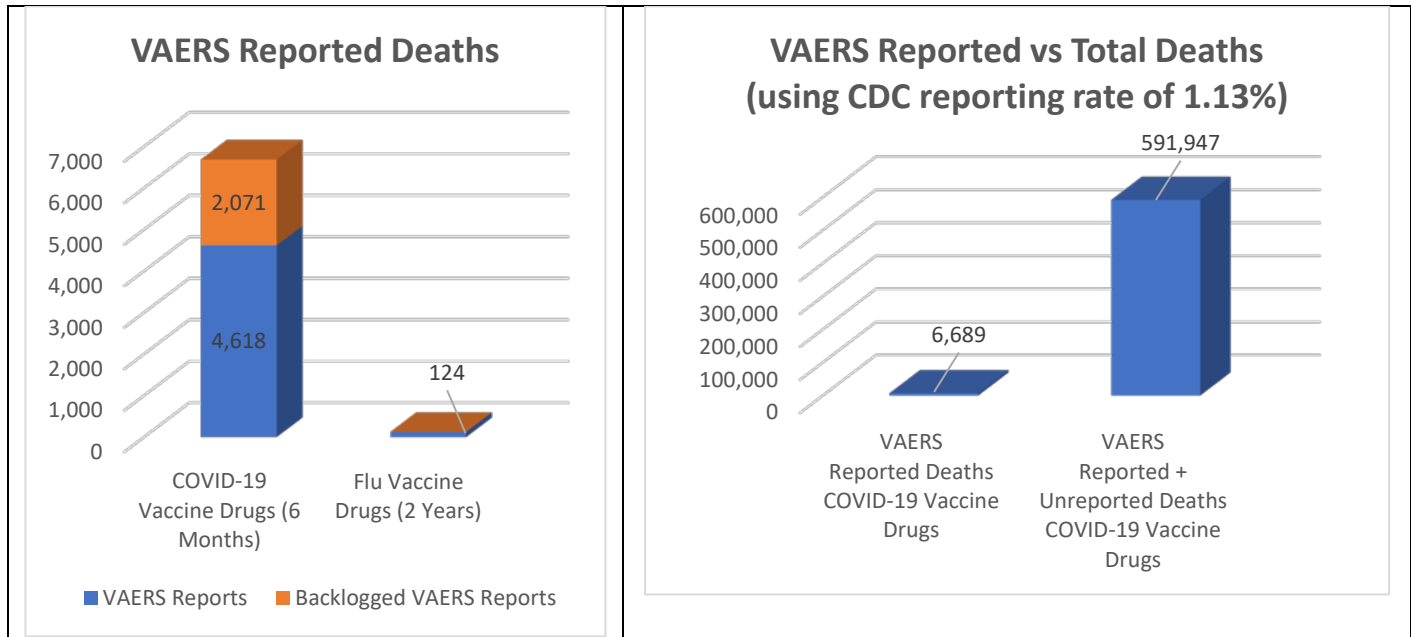


COVID-19 Vaccine Drug Reactions: Deaths

Preliminary Notes – Reactions Listings Start on Page 2 Below



1. Death cases Reported through June 4, 2021 in the United States to the Vaccine Adverse Event Reporting System (VAERS).
2. In order to understand the two charts above:
 - a. The VAERS COVID-19 vaccine drug reported cases + backlogged cases **versus** the flu vaccine reported cases
 - b. The VAERS reported cases versus the total cases in the United States

It is **crucial** to at least one time, carefully read through the two answers in the FAQs related to backlogged cases and then the VAERS reporting rate:

https://www.covid19vaccinefacts.net/VAERS_FAQ.shtml#Backlog

https://www.covid19vaccinefacts.net/VAERS_FAQ.shtml#ReportingRate

Death: COVID-19 Vaccine Drugs

RECVDATE	VAERS_ID	STATE	AGE_YRS	SEX	VAX_DATE	ONSET_DATE	SYMPTOM_TEXT
6/4/2021	1373818	FL	73	M	2/13/2021	4/17/2021	COVID PNA/COVID 19 PNA/Covid test result=Positive; COVID PNA/COVID 19 PNA/Covid test result=Positive; This is a spontaneous report from a contactable consumer ((patient Daughter). A 73-years-old male patient received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration on 13Feb2021 (Batch/Lot Number: EN6201) as single dose, and dose 1 via an unspecified route of administration on 23Jan2021 (Batch/Lot Number: E18982) as single dose for covid-19 immunisation. Medical history included hypertension, hyperlipidaemia , type 2 diabetes mellitus , coronary artery disease , coronary artery bypass, chronic kidney disease, post-traumatic stress disorder, depression. Concomitant medications included amlodipine (AMLODIPINE) taken for an unspecified indication, start and stop date were not reported; hydralazine hydrochloride (APRESOLINE) taken for an unspecified indication, start and stop date were not reported; acetylsalicylic acid (ASPRIN) taken for an unspecified indication, start and stop date were not reported; atorvastatin (ATORVASTATIN) taken for an unspecified indication, start and stop date were not reported; clopidogrel (CLOPIDOGREL) taken for an unspecified indication, start and stop date were not reported; furosemide (FUROSEMIDE) taken for an unspecified indication, start and stop date were not reported; gabapentin (GABAPENTIN) taken for an unspecified indication, start and stop date were not reported; gramicidin, neomycin sulfate, nystatin, triamcinolone acetonide (KENALOG COMP. MED MYCOSTATIN) taken for an unspecified indication, start and stop date were not reported; ketoconazole (KETOCONAZOLE) taken for an unspecified indication, start and stop date were not reported; lisinopril (LISINOPRIL) taken for an unspecified indication, start and stop date were not reported; melatonin (MELATONIN) taken for an unspecified indication, start and stop date were not reported; metoprolol tartrate (METOPROLOL TARTRAS) taken for an unspecified indication, start and stop date were not reported; pantoprazole (PANTOPRAZOLE)

RECVDATE VAERS_ID STATE AGE_YRS SEX VAX_DATE ONSET_DATE SYMPTOM_TEXT

taken for an unspecified indication, start and stop date were not reported; insulin human, insulin human injection, isophane (NOVOLIN 70/30) taken for an unspecified indication, start and stop date were not reported; sertraline (SERTRALINE) taken for an unspecified indication, start and stop date were not reported; vitamin C (ASCORBIC ACID) taken for an unspecified indication, start and stop date were not reported; vitamin E nos (VITAMIN E) taken for an unspecified indication, start and stop date were not reported. The patient previously took morphine and experienced drug hypersensitivity, doxycycline and experienced drug hypersensitivity. The patient experienced covid pna//covid test result=positive on 17Apr2021 , causing patient's death on 07May2021. The patient was hospitalized for covid 19 pna/covid test result=positive for 20 days. The patient underwent lab tests and procedures which included sars-cov-2 test: positive on 17Apr2021 , sars-cov-2 test: positive on 04May2021. The patient died on 07May2021. An autopsy was not performed. Course of the event. The week prior to 17Apr2021 the patient started with diarrhea and cough. During the week it progressed to Vomiting, diarrhea and cough. He was unable to hold down any food or fluids. His diarrhea was uncontrollable with many accidents. On 17Apr21 he became SOB, cough, weak. He was taken to hospital ER where he was diagnosed with COVID PNA. He was admitted into the hospital for 20 days and passed away 07May2021 from COVID 19 PNA, acute hypoxc respiratory failure, SARS. The patient was treated with the following drugs: remdesivir, decadron, zithromax, cefepime, rocephin, BIPAP, intubation, dexamethasone, insulin, vanc. Follow up information has been requested. Lot numbers already provided.; Reported Cause(s) of Death: SARS; COVID-19 pneumonia; Hypoxia; Acute respiratory failure

<i>RECVD</i> DATE	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1374303			F			This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Died) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant medications were reported. No treatment information was reported. Action taken with mRNA-1273 (Moderna COVID-19 Vaccine) in response to the event was not applicable. Company comment: Very limited information regarding this patient's death has been provided at this time.; Sender's Comments: Very limited information regarding this patient's death has been provided at this time.; Reported Cause(s) of Death: Death
6/4/2021	1374141		90	M	1/28/2021	2/16/2021	death N17.9 - Acute renal failure (ARF) (CMS/HCC) R31.9 Hematuria, unspecified type
6/4/2021	1374138		52	M	4/14/2021	5/21/2021	death - Non-ST elevation (NSTEMI) myocardial infarction
6/4/2021	1374131		69	M	2/27/2021	6/1/2021	death I46.9 Cardiac Arrest J18.9 - Multifocal pneumonia
6/4/2021	1374122		75	F	3/17/2021	5/17/2021	death J18.9 - Pneumonia, unspecified organism
6/4/2021	1374114		87	F	2/17/2021	5/7/2021	death Pneumonia heart murmur weight loss
6/4/2021	1374110		63	M	4/16/2021	5/22/2021	death N17.9 - Acute renal failure, unspecified acute renal failure type

<i>RECVDATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1374022			U			<p>Death; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant medication or treatment were reported by the reporter. Company Comment: This is an invalid case due to no identifiable patient. Also, very limited information regarding the event has been provided at this time. This case was linked to MOD-2021-102410 (Patient Link).; Sender's Comments: This is an invalid case due to no identifiable patient. Also, very limited information regarding the event has been provided at this time.; Reported Cause(s) of Death: Unknown cause of death</p>

<i>RECVDATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1373996			U			DEATH; STROKES; This spontaneous report received from a consumer via social media concerned multiple patients of unspecified gender. The patient's weight, height, and medical history were not reported. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, start therapy date were not reported, 1 total administered for prophylactic vaccination. The batch number was not reported. Per procedure, no follow up will be requested for this case. No concomitant medications were reported. On an unspecified date, the patients died of unknown cause. It was reported that the patients had stroke. Date of death and autopsy details were not reported. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on an unspecified date and the outcome of strokes was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0- 20210601307-covid-19 vaccine ad26.cov2.s- Death, Stroke. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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6/4/2021	1373835	CA		U			All died within the 5 weeks after there first shot; This is a spontaneous report from a contactable consumer. This consumer reported similar events for six patients. This is the sixth of six reports. An elderly patient of unknown gender received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date of 2021, as single dose for covid-19 immunization. The patient's medical history and concomitant medications were not reported. Patient was residential home with 5 other elderly residents patient. Reporter stated that they all got vaccinated with the first Pfizer shot (Confirmed as Covid 19 vaccine) and they all died within the 5 weeks after their first shot. By 18Mar2021 these residents in the house would have died. The reporter stated that they should not have died they just died. The reporter doesn't know if it was a side effect, he knows if it was a reaction but all of the six residents that got vaccinated died within their first vaccination shot. Within the 5 weeks after the first vaccination. Reporter stated they died in their sleep supposedly. They died in their sleep. Outcome of the event was fatal. It was unknown if an autopsy was done. The information on the batch/lot number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021617030 same reporter/SD/AE, different patients; Reported Cause(s) of Death: died within the 5 weeks after there first shot
6/4/2021	1373801			M			Death; This is a spontaneous report from a non-contactable consumer. An adult male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot Number: Unknown) as single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient died on an unspecified date. It was not reported if an autopsy was performed. Follow-up attempts are completed. No further information is expected.; Reported Cause(s) of Death: Death

<i>RECVD</i> DATE	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1373784	CA		U	4/18/2021		<p>Miscarriage on 13May2021/seriousness criterion was reported as 'Congenital anomaly/birth defect'; Miscarriage on 13May2021/seriousness criterion was reported as 'Congenital anomaly/birth defect'; This is a spontaneous report from a contactable consumer (patient). This is the baby case. A 34-year-old female patient received the 1st single dose of BNT162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, in left arm on 18Apr2021 (Batch/Lot Number: Ew161), and the 2nd single dose, always in the left arm, on 02May2021 (Batch/Lot Number: Ew0171), for COVID-19 immunisation. First and second dose were administered at the age of 34 years old. Relevant medical history was reported as none. The patient's last menstrual period was on 18Feb2021 and pregnancy due date was 26Dec2021. Concomitant medications included unspecified pre-natal vitamins. Relevant past drug history included sulfa. The patient had not received any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was never diagnosed with COVID-19, and since the vaccination the patient had not been tested for COVID-19. The patient reported having miscarriage on 13May2021, diagnosed after the 2nd shot of BNT162b2. A doctor or other healthcare professional office/clinic visit was needed. The fetus had died sometime between the 1st and 2nd shot based on gestational age. Gestation period when the event was observed was reported as 4 weeks. The patient had to undergo dilation and curettage from which the patient was recovering. The seriousness criterion was reported as 'Congenital anomaly/birth defect' (no further information reported about the congenital anomaly). No follow up attempts are needed. No further information expected.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021602163 mother/baby case; Reported Cause(s) of Death: Miscarriage; Congenital anomaly; Miscarriage; Congenital anomaly</p>

<i>RECVD</i> <i>DATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1373776	NY	61	F	3/30/2021	3/30/2021	bleed on her brain; the infection had spread to her heart valves; she could not walk; legs went numb; sepsis; fever / fever went up over 103 F; chills; diarrhea; This is a spontaneous report received from a contactable consumer. A 61 years old female received the second single dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; lot EP7533) on 30Mar2021 (at 61 years of age), in right arm, for COVID-19 immunisation. The patient received the first dose of BNT162B2 vaccine on 09Mar2021 (lot EN6202), at 61 years of age, in right arm. No other vaccines were given within 4 weeks prior to the COVID vaccine. Medical history included connective tissue disorder - scleroderma. The patient was not pregnant at the time of vaccination. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medication included methotrexate. On 30Mar2021, within a few hours of receiving the second vaccination, she had fever, chills and diarrhea. By 4:30 AM on 31Mar2021 she could not walk and her legs went numb. An ambulance was called and the EMTs had to carry her out of the house. She was taken to hospital where they started treating with antibiotics her for an infection but her fever went up over 103 F, so they ventilated her to try to control the fever. They did blood tests during that time and got the infections disease unit trying to figure out what was causing her symptoms. Doctors diagnosed sepsis. They continued to do blood test and cultures but could not determine the cause. They did Magnetic Resonance Imaging (MRIs) as follow-ups because she was not responding. The fever never went down. She was awake for a few days (ventilator still in) and then started getting worse again. They did an MRI and found a bleed on her brain and the infection had spread to her heart valves. She died on 14Apr2021 after 15 days of hospital care and Intensive Care Unit (ICU) care. The events were reported with a fatal outcome. It was unknown if autopsy was performed. Since the vaccination, the patient had not been tested for COVID-19.; Reported Cause(s) of Death: chills; diarrhea; she could not walk; legs went numb; sepsis; bleed on her brain; the infection had spread to her heart valves; fever / fever went up over 103 F

<i>RECVDATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1373283			M	1/21/2021	1/21/2021	<p>The patient is deceased; Nausea while eating; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (The patient is deceased) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. No Medical History information was reported. On 21-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 21-Jan-2021, the patient experienced NAUSEA (Nausea while eating). The patient died on 11-Mar-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, NAUSEA (Nausea while eating) outcome was unknown. No concomitant medications were reported. It was reported that nausea would go away for a few hours and would come back while eating again. The patient was already in supplemental oxygen but was using more since he received the vaccine. The patient had been experiencing the events for four days. Company comment: Based on current available information and the temporal association between product use and the start date of the events a causal cannot be ruled out for the event of Nausea and is unlikely for the event of Death. The event of Oxygen therapy is invalid as it is a pre-existing condition. Most recent FOLLOW-UP information incorporated above includes: On 25-May-2021: Follow up received on 25 May 2021 includes serious event death.; Sender's Comments: Based on current available information and the temporal association between product use and the start date of the events a causal cannot be ruled out for the event of Nausea and is unlikely for the event of Death. The event of Oxygen therapy is invalid as it is a pre-existing condition.; Reported Cause(s) of Death: unknown cause of death</p>

<i>RECVD</i> <i>DATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021	1373292	IA	83	F	4/8/2021	4/1/2021	drained fluid off her liver; they thought she was dehydrated; Throwing up; Small headache; Not eating; Not drinking; Not peeing; Sore feet; Sepsis; Death; Screwed up kidneys; Fluid overload; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (Death), SEPSIS (Sepsis), RENAL DISORDER (Screwed up kidneys), LIVER DISORDER (drained fluid off her liver), FLUID OVERLOAD (Fluid overload), DECREASED APPETITE (Not eating), FLUID INTAKE REDUCED (Not drinking), ANURIA (Not peeing), PAIN IN EXTREMITY (Sore feet), VOMITING (Throwing up), HEADACHE (Small headache) and DEHYDRATION (they thought she was dehydrated) in an 83-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 041B21A) for COVID-19 vaccination. Concurrent medical conditions included Arthritis (shoulders and knees), Hypertension, Acid reflux (esophageal), Penicillin allergy, Drug allergy (Lyrica), Drug allergy (cymbalta) and Drug allergy (ibuprofen). Concomitant products included AMLODIPINE for Blood pressure management, AMITRIPTYLINE for Sleep disorder, HYDROCODONE, POTASSIUM and PARACETAMOL (TYLENOL) for an unknown indication. On 08-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 10-Apr-2021, the patient experienced DECREASED APPETITE (Not eating) (seriousness criterion hospitalization), FLUID INTAKE REDUCED (Not drinking) (seriousness criterion hospitalization), ANURIA (Not peeing) (seriousness criterion hospitalization), VOMITING (Throwing up) (seriousness criterion hospitalization) and HEADACHE (Small headache) (seriousness criterion hospitalization). In April 2021, the patient experienced RENAL DISORDER (Screwed up kidneys) (seriousness criterion hospitalization prolonged), FLUID OVERLOAD (Fluid overload) (seriousness criterion hospitalization prolonged) and PAIN IN EXTREMITY (Sore feet) (seriousness criterion hospitalization). On an unknown date, the patient experienced SEPSIS (Sepsis) (seriousness criterion hospitalization prolonged), LIVER DISORDER (drained fluid off her liver) (seriousness criterion hospitalization) and DEHYDRATION (they thought she was dehydrated) (seriousness criterion

RECVDATE	VAERS_ID	STATE	AGE_YRS	SEX	VAX_DATE	ONSET_DATE	SYMPTOM_TEXT
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hospitalization). The patient was treated with DULOXETINE HYDROCHLORIDE (CYMBALTA) in May 2021 at a dose of UNK dosage form. The patient died on 21-May-2021. It is unknown if an autopsy was performed. At the time of death, SEPSIS (Sepsis), RENAL DISORDER (Screwed up kidneys), LIVER DISORDER (drained fluid off her liver), FLUID OVERLOAD (Fluid overload), DECREASED APPETITE (Not eating), FLUID INTAKE REDUCED (Not drinking), ANURIA (Not peeing), PAIN IN EXTREMITY (Sore feet), VOMITING (Throwing up), HEADACHE (Small headache) and DEHYDRATION (they thought she was dehydrated) outcome was unknown. Not Provided DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): In May 2021, Blood potassium: abnormal (abnormal) abnormal. Additional concomitant products used included a non-specific acid reflux pill. Treatment information includes fluids, medications NOS, diuretic NOS, dialysis, a catheter, duloxetine (Cymbalta) and antibiotics NOS. Very limited information regarding these events have been provided at this time. However age of patient can be a confounding factor. No further information is expected. Most recent FOLLOW-UP information incorporated above includes: On 25-May-2021: Follow-up information received 25-MAY-2021 included no new information.; Sender's Comments: Very limited information regarding these events have been provided at this time. However age of patient can be a confounding factor. No further information is expected.

<i>RECVD</i>	<i>DATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/4/2021		1373836	CA	97	M		2/9/2021	Grandfather died within a week and a half after his vaccination; This is a spontaneous report from a contactable consumer. This the first case out of six cases. Patients grandson reported for the patient (reporters grandfather) that a 97-year-old male (same age during vaccination) patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date of 2021, as single dose for covid-19 immunization. The patients medical history and concomitant medications were not reported. Reporter stated that So, he doesnt exactly know. His grandfather was the first phase to get the Pfizer vaccination (Confirmed as Pfizer Covid 19 vaccine) back in March (Further not clarified). He was in a residential home with 5 other elderly residents with him. They all got vaccinated with the first Pfizer shot (Confirmed as Covid 19 vaccine) and they all died within the 5 weeks after their first shot. Honestly the only thing that he can pinpoint with my aunt and other people and loved ones we have talked to come together because only two of the residents were on hospice and the other people were not on hospice. They should not have died they just died. he doesnt know if it was a side effect, he knows if it was a reaction but all of the six residents that got vaccinated died within their first vaccination shot. Within the 5 weeks after the first vaccination. He was not sure other residents got the second vaccination, but his grandfather died 09Feb2021. Reporter stated he only have detail for his grandfather and other residents, and they died in their sleep supposedly. They died in their sleep. Both of them died in their sleep (Further not clarified hence not captured in tab). He just feels, his grandfather was not on hospice he was healthy considering the underlying problem that they had but they were supposed to get vaccinated with the Moderna and the day that we got there they changed the vaccination to Pfizer. So, they had the on-duty nurse there to answer any of the questions that we had. We asked then all the questions we had. We felt ok with it, everybody got vaccinated that day. My grandfather died within a week and a half after his after vaccination. So, he didnt get the second and by the middle of march their resident also died. The only thing I can tie to it is the first dose of Pfizer vaccination. Regarding Height and weight

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						reporter stated he do not know exact. he wont say he was 5 (feet) 8 (inches) when he passed away, he believed either between 115 (pounds) and 120 (pounds) when he passed away. Outcome of the event was fatal. Information related Lot/Batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021618004 same reporter/SD/AE, different patients;US-PFIZER INC-2021616779 same reporter/SD/AE, different patients;US-PFIZER INC-2021617301 same reporter/drug/AE, different patients;US-PFIZER INC-2021616796 same reporter/SD/AE, different patients;US-PFIZER INC-2021616788 same reporter/SD/AE, different patients; Reported Cause(s) of Death: Grandfather died within a week and a half after his vaccination
6/3/2021	1372112	IN	31	M	4/5/2021	4/23/2021 Pt died of massive pontine hemorrhage and then cardiac arrest two weeks after vaccination.
6/3/2021	1371933	MI	65	M	5/7/2021	5/20/2021 On May 19th at approximately 10-1030 pm. My father suffered a heart attack with no warning and died instantly. He was fine all day long, fine since the second shot. We don?t believe the vaccine was the cause but maybe it jumpstarted something. We wanted to alert someone for knowledge or research. We did not have an autopsy.
6/3/2021	1371740	MN	87	M	5/4/2021	5/20/2021 Resident was found in his bed to be passed away. He had been on Hospice.
6/3/2021	1371745	OR	83	F	5/4/2021	5/16/2021 Was informed by the husband on Thursday May 27, 2021 that his wife had passed away 10 days after the first moderna vaccine and that her physician said it was contributing factor to her death. The husband was waiting for the death certificate.
6/3/2021	1371818		78	M	5/13/2021	5/14/2021 Death with 24 hours of second vaccine - per autopsy Myocarditis

<u>RECVDATE</u>	<u>VAERS_ID</u>	<u>STATE</u>	<u>AGE_YRS</u>	<u>SEX</u>	<u>VAX_DATE</u>	<u>ONSET_DATE</u>	<u>SYMPTOM_TEXT</u>
6/3/2021	1371859	KY	69	M	3/30/2021	5/24/2021	COVID -19 Vaccine, Primary care MD. Wife, 5/23/2021 patient admitted through ED for chief complaint of 5 days shortness of air, tested positive for COVID-19; patient vaccinated 3/30/2021 at 'local church'. 5/24/2021 admitted to ICU - Attending, 5/26/2021 rapid response due to vitals, 5/27/2021 patient intubated due to respiratory failure/distress/hypoxia; identified in septic shock. 5/31/2021 went to surgery for left forearm and hand compartment syndrome. 6/3/2021 Code blue called, 6/3/2021 date of death. Allergies: Losartan (other) and Verapamil (intolerance) Date of Vaccination: 3/30/2021, Dose: 2, Vaccine Manufacturer: Moderna Lot #: Clinic Administering Vaccine: "local church" - no specific name was provided, Injection site: Description of event/reaction: Patient does not have vaccination card and reports not knowing date of first vaccine or exact clinic location. Date of Hospitalization: 5/24/2021 Reason for clinic visit or hospitalization: Shortness of air COVID-19 positive test result: Yes or No; if Yes, date 05/23/2021
6/3/2021	1371898	IL	71	F	4/6/2021	4/6/2021	We were at my Hair Stylist and the Pharamist came over and asked if anyone if they needed a Covid 19 shot and I said to the patient) there's your shot, we walked next door and she got it in her left arm . I drove her home right after this she seemed fine then. We went back to pick her up to take her to a Primary Dr. for a follow up so she establbblishd a Primary in the area, She did not answer the door, we banged on the door and no one answered 3-4 days she was dead.
6/3/2021	1371905	PA	59	M	5/30/2021	6/1/2021	Adverse Event was Death within 48 hours of vaccine.
6/3/2021	1371998	CA	77	F	4/27/2021	4/28/2021	severe vertigo,
6/3/2021	1372049	KY	66	F	5/13/2021	6/1/2021	PASSED AWAY 06/01/21
6/3/2021	1372096	VA	39	M	4/29/2021	4/29/2021	Patient died abruptly 2-3 hours after receiving shot.

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6/3/2021	1372120	CA	19	F	5/1/2021	6/1/2021	Pt called 911 for shortness of breath The following is the paramedic narrative patient found at home, sitting on floor. alert, speaking. Patient with sob, saying she can not breath , states it came on suddenly about a half hour ago and pt has not been feeling ill prior to this. No trauma, no pains or other complaints. pt went unconscious then into pea cardiac arrest, witnessed. Laid pt down and check for heart beat and breathing, became pulseless and apneic Initial treatment CPR, IV, BVM. Family states no medical history other than anemia. no drug use, no respiratory or cardiac issues. Pt was given J and J covid 19 vaccine recently. Pt also just returned from a trip and noted to not have gone diving. 2 epinephrine IV given on scene with no change to heart rhythm. Pt loaded into the ambulance and cpr continued while transporting. pt with copious amounts of vomit, suction enroute to ed. Pt w/o shockable rhythm throughout transport. Continue cpr and bvm via king airway , cap at 9. unable to get capnography higher. no change in heart rhythm. while enroute to er. At ED pt did get pulses back however it was reported that pt loss pulses and was pronounced
6/3/2021	1372122	ND	91	M	1/8/2021	2/28/2021	Patient was hospitalized Feb 18th to the 21st and passed away on Feb 28, 2021.
6/3/2021	1372151	CO	88	M	2/17/2021	3/2/2021	My father suffered an Ischemic stroke on March 2nd and died on March 9th. He was was healthy and fit up to this point and walked several times a day.
6/3/2021	1372291	PA	59	M	5/30/2021	6/1/2021	Bloody Vomit and cardiac arrest. CPR attempted by ambulance, but patient died during transport to the hospital.
6/3/2021	1371594	MD	77	M	2/27/2021	3/6/2021	cardiac arrest (V fib) treated: with amiodarone, magnesium, 6 doses of epi, calcium, bicarb. Achieved ROSC. outcome: withdrawal of care
6/3/2021	1372338	MD	24	M	5/21/2021	5/21/2021	Death
6/3/2021	1371537	TX	50	M	2/16/2021	2/19/2021	Received shot Tuesday afternoon Died Friday Mourning
6/3/2021	1372601		86	M	4/11/2021	4/11/2021	Noticeable decline after 2nd Moderna vaccine, patient could no longer get out of bed, stopped eating and was unable to communicate verbally

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6/3/2021	1373090	CA	64	M	4/8/2021	4/8/2021	Patient had received his first Moderna Covid vaccine on 4/8/21 (time unknown). He left the pharmacy after wait period of 15 minutes. Wife said that he complained of sore throat later in the day. Wife said "he started having fever almost like COVID symptoms". Wife said he went to the doctors office and received prescription for ibuprofen. on 4/10/21 at 10am. Wife said he didn't get any better so he was hospitalized at the Hospital 8 days later and he passed away.
6/3/2021	1372095	CA	74	F	3/27/2021	3/27/2021	Pt. is a 74 Y female with dementia who was brought to the hospital due to altered mental status and then died shortly after receiving vaccine. She presented to ER from her facility on 3/23/21 due to urinary incontinence and worsening of mental status. She was tachycardic, O2 sat 94% on room air, found to be in urosepsis and was started on Rocephin. Patient had been stable clinically, and on day of discharge was given second dose of Pfizer vaccine at 1320. Patient then was found to be too weak to go home by means of friend's private transportation. Patient was then scheduled to leave by medical transport, but then became non-responsive and pulseless. Patient was DNR and she was pronounced dead at 5:22pm. No note of any fevers, tachycardia, rash, or new hypoxemia after the vaccine.
6/3/2021	1371338	MA	32	F	4/9/2021	5/31/2021	32 year old female received vaccines while pregnant with her 3rd child. Pt has asymptomatic Factor V Leiden. She delivered on 5/27/2021 and passed away on 5/31/2021.
6/3/2021	1371720	IL	52	M	5/5/2021	5/14/2021	Death, cardiac arrest. Patient was found deceased in home, no hospitalization, no autopsy

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6/3/2021		1370319			M			Son died 10 days after his first moderna vaccine; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Son died 10 days after his first moderna vaccine) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product was not provided by the reporter. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. A male patient of an unknown age who received mRNA-1273 died 10 days after his first dose of vaccine. No medical conditions or conmeds were provided. Very limited information regarding these events has been provided at this time. Further information is being pursued.; Sender's Comments: A male patient of an unknown age who received mRNA-1273 died 10 days after his first dose of vaccine. No medical conditions or conmeds were provided. Very limited information regarding these events has been provided at this time. Further information is being pursued.; Reported Cause(s) of Death: Son died 10 days after his first moderna vaccine
6/3/2021		1371177	GA	81	M	2/18/2021	5/3/2021	Patient hospitalized and died after testing positive for COVID-19. Tested positive on 5/3/2021.
6/3/2021		1369968	NJ	73	M	6/1/2021	6/2/2021	Fatigue on 6/2/21 followed by cardiac arrest & death
6/3/2021		1371354	MI	52	M	4/15/2021	4/26/2021	Patient developed dizziness, chills, fever, body ache, sore throat, difficulty breathing, and stopped eating beginning April 26. The adverse effect is the belief that a breakthrough case of Covid-19 will be less severe if you had the shots. A false sense of security.
6/3/2021		1371376	OH	45	F	5/1/2021	5/3/2021	Fatality. Death occurred

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6/3/2021	1371420	AZ	58	M	2/17/2021	2/20/2021	patient expired 3 days after first vaccination. Did not present to our facility for care after vaccination; did not have any adverse reactions during vaccination waiting period. Per the Medical examiner, patient passed away at his residence, and his death was not related to the COVID vaccine.
6/3/2021	1371438	WI	90	M	2/16/2021	6/1/2021	Clinet was vaccinated on 2/16/21 and on 3/9/21
6/3/2021	1371446	MI	67	M	3/8/2021	5/14/2021	Admitted for syncopal episode on 5/14/21, found to have lung lesion with necrotizing granulomatous inflammation, deceased 5/20/21
6/3/2021	1371516	KY	67	M	2/19/2021	5/21/2021	PASSED AWAY AT THE HOSPICE HOUSE

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6/3/2021	1370350	CA	79	M	1/19/2021	5/14/2021	Heart problems; Breathing problems; Lymph nodes swollen; This spontaneous case was reported by a consumer and describes the occurrence of CARDIAC DISORDER (Heart problems), DYSPNOEA (Breathing problems) and LYMPHADENOPATHY (Lymph nodes swollen) in a 79-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 024m20a and 029I20a) for COVID-19 vaccination. Concurrent medical conditions included Diabetes, Lung cancer (in remission since November) and Liver disorder (liver problems). On 19-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 19-Feb-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 14-May-2021, the patient experienced CARDIAC DISORDER (Heart problems) (seriousness criterion death), DYSPNOEA (Breathing problems) (seriousness criterion death) and LYMPHADENOPATHY (Lymph nodes swollen) (seriousness criterion death). The patient died on 15-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. No relevant concomitant medications were provided. Daughter of the patient reported that the patient passed away after his lymph nodes swollen, had breathing problems, and hart problems. She stated that the patient was in remission of lung cancer since November, and that he was diabetic and had liver problems. They wanted to be part of the trials for the vaccine. She wanted his cases to be research because his lymph nodes were swollen, and that for her means there's a correlation between the vaccine taking and his demised. No treatment information was provided. Very limited information regarding these events has been provided at this time. Further information has been requested. The patient's medical history of diabetes, liver disorder and lung cancer are confounding factors that may play possible contributory roles.; Sender's Comments: Very limited information regarding these events has been provided at this time. Further information has been requested. The patient's medical history of diabetes, liver disorder and lung cancer are confounding factors that may play possible contributory roles.; Reported Cause(s) of Death: passed away

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6/2/2021		1366914			F		5/23/2021	got his grandma a covid-19 vaccine and she died /she's not the first i have heard about that died; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (got his grandma a covid-19 vaccine and she died /she's not the first i have heard about that died) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 23-May-2021 The patient died on 23-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant medication was reported. It was reported that the reporter grandma received a covid-19 vaccine and died yesterday. Reporter also stated that it's not the first he has heard about that someone died from the covid-19 vaccine. The reporter did not specify it was the morderna Covid-19 vaccine he was referring to. Company comment Very limited information regarding this event/s has been provided at this time. Further information has not been requested since reporter did not share any personal information.; Sender's Comments: Very limited information regarding this event/s has been provided at this time. Further information has not been requested since reporter did not share any personal information.; Reported Cause(s) of Death: unknown cause of death
6/2/2021		1367961	PA	80	M	4/27/2021	4/27/2021	Felt ill shortly after getting the vaccine. Weakness, nausea and vomiting. Developed AMS. Presented to the ER and was found to be in acute hepatic failure
6/2/2021		1367844		82	M	3/25/2021	5/23/2021	death weakness E87.1 - Hyponatremia
6/2/2021		1367840		87	F	2/20/2021	4/17/2021	death vision loss Acute cerebrovascular accident acute hyponatremia
6/2/2021		1367547		77	F	1/20/2021	1/26/2021	death D69.6 - Thrombocytopenia, unspecified Respiratory failure Intracranial mass

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6/2/2021	1366907			F		5/23/2021	Died; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Died) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 23-May-2021 The patient died on 23-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. The reporter mentioned that grandma got Moderna vaccine and died yesterday (23 -May-2021) Concomitant medication and treatment information were not reported. Action taken with mRNA-1273 in response to the event was Not Applicable Company comment Very limited information regarding this event/s has been provided at this time. Further information has not been requested since follow up was denied. Reporter did not allow further contact; Sender's Comments: Very limited information regarding this event/s has been provided at this time. Further information has not been requested since follow up was denied.; Reported Cause(s) of Death: Unknown cause of death

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6/2/2021	1366906			M			<p>Passed away; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Passed away) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. The patient's wife reported that the patient passed away a few weeks after taking the Moderna vaccine. Concomitant medication and treatment information were not reported. Action taken with mRNA-1273 in response to the event was Not Applicable Company comment Very limited information regarding this event/s has been provided at this time. Further information has been requested. Reporter did not allow further contact; Sender's Comments: Very limited information regarding this event/s has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death</p>

<i>RECVD</i> DATE	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
6/2/2021	1366902	LA	63	M	3/3/2021	4/29/2021	After the 2nd shot they started bleeding a few days later/body changed/started bleeding, I don't know where, may be the toilet; sweating; started feeling weak I thought their heart gave up since they were diagnosed with heart failure in 2013; started walking slow; sleeping a lot; they were leaking out; got real sick; could not drive; what used to be daily life ended; arm hurting; my husband died in the hospita at 4:30 AM"; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (my husband died in the hospita at 4:30 AM") in a 63-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 026B21A and 027A21A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Heart failure since 2013. On 03-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 31-Mar-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient experienced HAEMORRHAGE (After the 2nd shot they started bleeding a few days later/body changed/started bleeding, I don't know where, may be the toilet), HYPERHIDROSIS (sweating), ASTHENIA (started feeling weak I thought their heart gave up since they were diagnosed with heart failure in 2013), GAIT DISTURBANCE (started walking slow), SOMNOLENCE (sleeping a lot), URINARY INCONTINENCE (they were leaking out), VACCINATION COMPLICATION (got real sick), IMPAIRED DRIVING ABILITY (could not drive), LOSS OF PERSONAL INDEPENDENCE IN DAILY ACTIVITIES (what used to be daily life ended) and VACCINATION SITE PAIN (arm hurting). The patient died on an unknown date. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, HAEMORRHAGE (After the 2nd shot they started bleeding a few days later/body changed/started bleeding, I don't know where, may be the toilet), HYPERHIDROSIS (sweating), ASTHENIA (started feeling weak I thought their heart gave up since they were diagnosed with heart failure in 2013), GAIT DISTURBANCE (started walking slow), SOMNOLENCE (sleeping a lot), URINARY INCONTINENCE (they were leaking out), VACCINATION COMPLICATION (got real

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6/2/2021

1366828

M

sick), IMPAIRED DRIVING ABILITY (could not drive), LOSS OF PERSONAL INDEPENDENCE IN DAILY ACTIVITIES (what used to be daily life ended) and VACCINATION SITE PAIN (arm hurting) had not resolved. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): In 2021, Colonoscopy: normal (normal) Normal. In 2021, Endoscopy: normal (normal) Normal. Reporter could not provide the list of concomitant medications or hospital details. Company comment: Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. Regarding the event death, very limited information has been provided at this time. Further information has been requested.; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. Regarding the event death, very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

DEATH; This spontaneous report received from a consumer concerned a male of unspecified age. The patient's height, and weight were not reported. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) 1 total, dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient died due to unknown cause. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0:20210600235 -COVID-19 VACCINE AD26.COV2.S- Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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6/2/2021	1367997	NY	67	M	3/11/2021	5/7/2021	Massive Heart Attack resulting in death.
6/2/2021	1366598	MN	86	F	3/24/2021	5/9/2021	Onset acute blood loss due to internal bleeding on approximately 05/09/21, upper GI bleeding and anemia. Hemoglobin dropped to 5.2 resulting in death. Hospitalization on 05/12/21 discharged to Hospice Care 05/15/21 loss of life on 05/22/21.
6/2/2021	1368651	GA	74	F	2/16/2021	2/21/2021	Patient's daughter came to the pharmacy today and said patient died of a heart attack. Patient thought that she was sick from the vaccine. Did not get help until five days after

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6/2/2021	1366783	MI	77	M		5/1/2021	<p>MASSIVE BLUNT FORCE TRAUMA; CAR ACCIDENT; BLEEDING PROBLEMS; FELT PUNK; POSITIVE COVID TEST/ CONFIRMED COVID-19 INFECTION; This spontaneous report received from a consumer concerned an 77year old male. The patient's weight was 216 pounds, and height was 65 inches. The patient's concurrent conditions included pacemaker, and copd (Chronic obstructive pulmonary disease), and other pre-existing medical conditions included the patient was on respiratory medications and blood thinners. The patient was previously treated with warfarin. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, Expiry :unknown) dose was not reported, 1 total, administered on 10-MAY-2021 for prophylactic vaccination. The batch number was not provided and has been requested. On an unspecified date in JAN-2021, Laboratory data included: COVID-19 virus test (NR: not provided) positive. The patient felt a little punk from the vaccine initially. On 18-MAY-2021, the patient was in a car accident. He was driving a truck and got T-boned by a car and pushed 40 feet into a ditch. He was hospitalized and had 2 negative rapid tests for COVID. He decompensated and was intubated. Upon intubation, another rapid COVID test was done and was positive. They did an additional test that was also positive. He passed away on 25-MAY-2021. An autopsy was performed on an unspecified date. It was reported that she believed the cause of death to be the massive blunt force trauma and bleeding problems. He tested positive for COVID with a 5 day test in JAN-2021. During that time, he had received the monoclonal infusion. She noted that he did not get ivermectin. He also got a physical examination done. Laboratory data included: COVID-19 virus test (NR: not provided) not reported, and SARS-CoV-2 rapid diagnostic test (NR: not provided) positive, positive. Laboratory data included: SARS-CoV-2 rapid diagnostic test (NR: not provided) negative, negative. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of massive blunt force trauma and bleeding problems on 25-MAY-2021, and the outcome of positive covid test/ confirmed covid-19 infection, car accident and felt punk was not reported. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's</p>

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Comments: V0. 20210554454-COVID-19 VACCINE AD26.COV2.S. Massive blunt force trauma, bleeding problems, car accident. This events is considered unassessable. The events have an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the events.; Reported Cause(s) of Death: MASSIVE BLUNT FORCE TRAUMA; BLEEDING

6/2/2021 1368008 OH

63 F

4/17/2021

4/28/2021

4/28/21 Pt presented to the ED with complaints of a cough that started 2 weeks ago and was getting worse and weakness with several falls. She also admitted to intermittent diarrhea. She was found to be febrile with a temp to 101.1, tachypneic w/RR of 20. Sats were in the low 90's. NP was positive for SARS-CoV-2. CXR showed bilateral opacities and she was admitted for PNA and sepsi. She was given Rocephin and Z-max in ED and both were discontinued upon admission. She was started on Decadron in ED 4/30 she had increasing hypoxemia and was placed on a non rebreather. She was transferred to critical care and given tocilizumab. Her respiratory status continued to worsen and she was intubated. She subsequently developed a pneumothorax that persisted despite 2 chest tubes. She developed a large air leak and she was not a surgical candidate. Family ultimately decided to w/draw care on 5/15/21

6/2/2021 1368159 KY

95 F

3/30/2021

5/19/2021

Resident became hypoxic and supplemental oxygen did not bring oxygen saturation up to normal levels. The physician ordered resident be sent to the emergency room for evaluation.

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6/2/2021	1368271		30	F	3/30/2021	4/2/2021	On April 15th, the otherwise healthy 30 year old daughter of my cousin passed away in a hospital from a massive stroke and seizures related to encephalitis of unknown cause. She recovered easily from Covid19 back in November of 2020, along with several of her close friends and family members with no lingering effects. On March 30th, she was given a single dose of the Moderna vaccine along with her teaching colleagues at a local high school. She initially complained of mild nausea and vomiting but quickly developed a severe headache prompting her to visit the local ER where she received treatment for a migraine. She returned to the ER at least one more time after no relief from the headache. By April 3rd,Saturday, she no longer recognized her sister nor knew what a mask was for. Her family rushed her again to the same ER and she was subsequently transferred the following day to a Hospital. Due to dangerously high intracranial pressure, she suffered a stroke with paralysis of her left side and a seizure. Multiple lesions were noted on her brain via MRI. A shunt was inserted to relieve the pressure, she was intubated and placed into a deep coma from which she would never awaken. Despite these medical interventions and pharmacological interventions, the pressure did not subside. A craniotomy was performed the following Saturday as a last ditch effort to relieve the unrelenting pressure in her brain. The craniotomy was able to reduce the pressure but it was too late. There was no longer any brain activity and my cousin's daughter was removed from life support after they were able to say their goodbyes. The medical examiner will be examining her brain to attempt to find a cause but that report may take 6 months.

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6/2/2021	1368325	NY	61	F	3/30/2021	3/30/2021	Reaction began within a few hours of vaccination. Patient had fever, chills and diarrhea within a few hours of receiving the vaccine. By 4:30am on 3/31 she could not walk and her legs went numb. An ambulance was called and the EMTs had to carry her out of the house. She was taken to Hospital where they started treating her for an infection but her fever went up over 103F so they ventilated her to try to control the fever. They did blood tests during that time and got the infections disease unit trying to figure out what was causing her symptoms. Doctors diagnosed sepsis. They continued to do blood test and cultures but could not determine the cause. They did MRIs as follow-ups because she was not responding. The fever never went down. She was awake for a few days (ventilator still in) and then started getting worse again. This is about 1.5 weeks post vaccination. They did an MRI and found a bleed on her brain and the infection had spread to her heart valves. Symptoms began within hours of vaccination. She was take to the hospital the morning after the vaccine and never came home. Patient died after 2 weeks in the ICU.
6/2/2021	1368648	KY	75	M	1/6/2021	1/31/2021	Died on 1/31/2021.
6/2/2021	1369811	OH	54	M	4/30/2021	5/1/2021	Patient went swimming at a fitness center the day after he had his 2nd COVID-19 vaccine and was found unresponsive at the bottom of the shallow 4.5 deep pool while exercising. He was not able to be revived. The death certificate says that the immediate cause of death was Arrhythmia resulting from Hypertensive Atherosclerotic Cardiovascular Disease.
6/2/2021	1368670	KY	83	M	3/11/2021	5/2/2021	Admitted to hospital on 5/2/2021 due to hypoxia and ultimately intubated. Family moved to comfort care and he died on 5/2/2021 at 10am.

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6/2/2021	1368764	CO	77	M	3/19/2021	3/20/2021	Cardiac arrest at home, EMS performed CPR. Return of spontaneous circulation in the field after 2 rounds of epinephrine, In ED unresponsive, placed on a ventilator, required high doses epi to maintain perfusing blood pressure. Has acute kidney injury with hyperkalemia, shock liver and severe metabolic acidosis with arterial pH 7.04. CT of the head showed early findings of anoxic brain injury. Admitted to ICU and treated with aggressively with vasopressors, bicarbonate drip, heparin drip and empiric broad spectrum antibiotics. Very poor medical and neurologic prognosis, discussed with family and patient was transitioned to comfort care and passed away on 03/21/21 at 1626
6/2/2021	1368779	CA	29	M	5/17/2021	5/17/2021	After receiving second dose of vaccine, complained of stomach pain and feeling "bloated." Later had muscle pain, insomnia, and nausea. Found dead at home on 6/1.
6/2/2021	1369065	CO	75	F	4/1/2021	4/12/2021	Mother suffering from sarcoidosis, however was improving until she recieved the Johnson and Johnson vaccination. She became very weak, very hard to breath . She was admitted to the Hospital and stayed for about two weeks. Since released from the hospital she never got her strength back and lost more weight. My mother passed away 5/28/2021.
6/2/2021	1369340	AL	52	M	5/12/2021	5/12/2021	My brother took the day off work on May 12, 2021 to receive his 2nd dose of the Moderna vaccine. He communicated with friends later that same day saying he was tired and needed to rest. On May 13, 2021, a work colleague followed up with a text message to see how he was doing to which my brother did not respond. This same colleague went to his house a few days later to find him dead lying on his couch.

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6/2/2021	1369944	NJ	55	F	4/21/2021	5/9/2021	Patient presented to the emergency room on 5/9/2021, approximately 3 weeks after receiving the J&J vaccine due to progressively worsening shortness of breath. She also had noted pain and swelling in the left calf and leg. In the ED she underwent CTA of the chest showing severe burden of acute PE (pulmonary embolism) with severe right heart strain, small early infarct posteromedial LLL, hepatic steatosis. Venous doppler 5/10/21 showed complete thrombosis left femoral, popliteal, posterior tibial, peroneal and anterior tibial veins, partial thrombosis of left common femoral vein. She underwent urgent thrombectomy, however, the next morning she became more hypoxic and hypotensive. She was intubated and was urgently placed on ECMO. She developed multi-organ failure. She was started on CVVH for oliguric renal failure. CT scan of her head done 3 days later showed diffuse diffuse cerebral edema, which is most likely a result of hypoxic encephalopathy. With no improvement in her mental status over the course of the next few days, she was taken off life support and died on 5/15/2021
6/2/2021	1368553	TX	60	M	2/8/2021	5/16/2021	5/16- symptoms started- cough, fever body aches. admitted 5/19 with SOB in addition. COVID pnueumonitis, 5/23-sudden decrease in saturation - placed on BiPAP and transferred to the ICU. further decline and arrested on 5/27. PEA and agonal breathing. intubated and ACLS meds given. Coded a second time and family elected to halt heroic measures.
6/2/2021	1369287	MN	26	M	3/31/2021	4/3/2021	Sudden cardiac death. After vaccine patient experienced headache, chills, fatigue, chest pain and did not seek medical care. He had a witnessed cardiac arrest less than 3 days after vaccine #2.
6/1/2021	1365034	IN	61	F	5/12/2021	5/12/2021	unknown
6/1/2021	1366320	FL	21	M	3/10/2021	3/11/2021	He died
6/1/2021	1366154	FL	54	F	5/28/2021	5/30/2021	Death

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6/1/2021	1366129	AL	69	F	2/1/2021	5/14/2021	Abrupt syncope with cessation of pulse and respirations at 11:15AM at main office. CPR was started by the workers present. 911 activated and code was activated by EMS and continued during transport and arrival at ER. All resuscitation efforts failed to restore breathing and cardiac activity. A large amount of blood was encountered upon intubation, so Dr. informed next of kin that cause of death was likely a large pulmonary embolus.
6/1/2021	1365932	CA	49	M	4/13/2021	4/27/2021	Patient passed away on April 27, 2021, which was two weeks after receiving second dose of Moderna Covid-19 vaccine.
6/1/2021	1365754	PA	82	M	5/27/2021	6/1/2021	PT'S wife reported to the pharmacy that he was very tired after the vaccine on thursday and friday, he did not wake up on saturday, he passed away.
6/1/2021	1365695	CA	91	M	2/25/2021	3/1/2021	After the first dose my father got what the eye doctor thought was pink eye. After treating him it didn't clear up. It was later diagnosed as herpes of the eye and he became blind in one eye. Shortly afterwards I read an article from researchers who stated they had found fragments of the herpes virus in the vaccine. After the second vaccine he was fine one day and 2 days later started having seizures. He was hospitalized for the seizures. His personality totally changed. He no longer recognized my sister. He also became hostile which is not the person he was. He was released from the hospital and brought to a new facility. Then the lights went out. he just stared off into space. A day later he was dead.
6/1/2021	1365530	AZ	76	F	6/1/2021	6/1/2021	Patient passed away 3 days after receiving vaccination
6/1/2021	1365516	TX	54	F	5/26/2021	5/28/2021	my friend died from this vaccine
6/1/2021	1365485	CA	30	M	5/26/2021	5/27/2021	On 05/27/2021 the decedent began complaining of shortness of breath, cough, fever, chills, and pain at the injection site. On 05/28/2021 the decedent complained of the same symptoms.
6/1/2021	1365410	MD	52	M	2/28/2021	3/15/2021	ON 3/15/21 patient was found unresponsive by spouse. EMS was called. Patient was found to have cardiac arrest Was given Epinephrine, Amiodarone and External Ventricular defibrillation Patient passed away on 3/15/21

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6/1/2021	1365404	IL	59	M	3/1/2021	3/5/2021	My husband past away
6/1/2021	1365328		82	M	4/10/2021	5/21/2021	death Non-ST elevation (NSTEMI) myocardial infarction Acute kidney failure, unspecified
6/1/2021	1366333	NV	37	M	4/21/2021	5/4/2021	Death
6/1/2021	1364724	TN	85	F	4/9/2021	5/18/2021	Patient received second COVId 19 vaccine on 4/9/21 @ Health Department. Was admitted to hospital on 5/18/2021 with SOB, Nausea, Vomiting, and Headache. Diagnosed with COVID 19 infection and COVID 19 Pneumonia. Patient expired on 5/19/2021 at hospital.

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6/1/2021	1363773	CA	59	F	4/1/2021		<p>CONTINUED TO BLEED; HAEMORRHAGIC STROKE; VOMITING; HEADACHE; PLATELET COUNT DECREASED; BIOPSY SOFT TISSUE; BRAIN SCAN ABNORMAL; POSSIBLE CEREBRAL VENOUS SINUS THROMBOSIS; BRAIN COMPRESSION; BRAIN STEM HAEMORRHAGE; BRAIN STEM SYNDROME; CEREBRAL HAEMORRHAGE; HEMIPLEGIA; SEIZURE;</p> <p>This spontaneous report received from a health care professional via a Regulatory Authority Vaccine Adverse Event Reporting System (VAERS) (VAER reference number 1244328 and 1199143) concerned a 59 year old female. The patient's height, and weight were not reported. The patient's concurrent conditions included pre-diabetic. It was unknown if patient was taking any prescriptions, over-the-counter medications, dietary supplements, or herbal remedies at the time of vaccination. No allergies to medications, food, or other products was reported. The patient was not pregnant at the time of vaccination. The patient did not have an adverse event following any previous vaccine. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 1805020, and batch number: 1805020 expiry: UNKNOWN) dose was not reported, administered on 20-MAR-2021 (also reported as 27-MAR-2021) for prophylactic vaccination. Anatomical vaccination site were not reported. No concomitant medications were reported. On 03-APR-2021, one week after vaccination, the patient had headache and vomiting. On 05-APR-2021, the patient had seizure due to hemorrhagic stroke. On an unspecified date, the patient experienced brain compression, brain stem haemorrhage, brain stem syndrome, cerebral haemorrhage, hemiplegia, possible cerebral venous sinus thrombosis, biopsy soft tissue, and brain scan abnormal, and was hospitalized. On 06-APR-2021, the patient had a surgery to remove pressure on brain and brain stem (craniectomy). The surgeon noted alarmingly low platelet counts (results unspecified). The patient had platelet transfusion. The patient was hospitalized for '4 days'. The patient continued to bleed on 06-APR-2021 and 07-APR-2021. The patient was removed from life support on 08-APR-2021. The patient died on 08-APR-2021. It was unknown if autopsy was performed. Laboratory data reported following: Brain scan was abnormal and showed abnormal, multi-focal</p>

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brain bleeds and increased compression of brain. On 07-APR-2021, Brain scan abnormal which showed increased bleeding and brain stem injury. On 08-APR-2021, the patient died from possible cerebral venous sinus thrombosis. Laboratory data (dates unspecified) included: Biopsy soft tissue (NR: not provided) unknown, Pathology test (NR: not provided) unknown. On 08-APR-2021, the subject died from possible cerebral venous sinus thrombosis. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of possible cerebral venous sinus thrombosis, brain compression, brain stem haemorrhage, brain stem syndrome, cerebral haemorrhage, hemiplegia, seizure, haemorrhagic stroke and continued to bleed on 08-APR-2021, had not recovered from headache, vomiting, and platelet count decreased, and the outcome of biopsy soft tissue and brain scan abnormal was not reported. This report was serious (Death, and Hospitalization Caused / Prolonged). This case, involving the same patient is linked to 20210441454. Additional information was received on 24-MAY-2021. Following information was added and incorporated into the narrative. Additional events of haemorrhagic stroke and continued to bleed were added, seriousness of events platelet count, vomiting, and headache was updated, additional reference numbers were added, additional vaccination date added in narrative, labeling updated, and course of event and laboratory data updated. It was determined that Manufacturer Case Number 20210441454 was a duplicate of this case. All relevant information regarding this case will be submitted under Manufacturer Case Number 20210500861. Upon review, the following information was amended: events biopsy soft tissue and brain scan abnormal was updated from non-serious to serious as this was on the earlier VAERS report.; Sender's Comments: V2: Additional information received regarding updates in seriousness of events, labeling, course of events, case identifier; and additional events of hemorrhagic stroke and "continued to bleed" did not alter prior assessment. This fatal spontaneous report (VAERS ID 1244328) concerned a 59- year- old female who experienced vomiting, headache and seizures and was hospitalized for brain compression, brain stem hemorrhage, brain stem syndrome, cerebral hemorrhage,

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hemorrhagic stroke, hemiplegia, possible cerebral venous sinus thrombosis 16 days after Janssen COVID-19 vaccine was administered for prevention of symptomatic SARS-CoV-2 virus infection. The patient's height, and weight were not reported. The patient was pre-diabetic with no known allergies. Concomitant medications were not reported. Biopsy soft tissue was done (results not reported) and brain scan showed multifocal brain bleeds and increased compression of brain; the patient underwent neurosurgery. The platelet count was decreased (result not reported) and received platelet transfusion. Follow-up scan next day showed increased/continued bleeding and brain stem injury and a day later she died from possible cerebral venous sinus thrombosis. It was unknown if an autopsy was performed. Although the subject's pre-diabetic status may have contributed, based on evolving knowledge of Thrombosis with Thrombocytopenia Syndrome (TTS, per definition from Brighton Collaboration - BC) and considering the low platelet count and temporal relationship to vaccination (BC Criteria level 5), the events are assessed to have a plausible relationship with vaccination.; Reported Cause(s) of Death: POSSIBLE CEREBRAL VENOUS SINUS THROMBOSIS

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6/1/2021	1363909	FL	66	F		5/1/2021	DEATH; COULDN'T WALK; SWOLLEN LEGS; COULDN'T TASTE; COULDN'T SWALLOW; SHORTNESS OF BREATH; This spontaneous report received from a parent and concerned a 66-year-old a Not Hispanic or Latino Asian female patient. The patient's weight was not reported and height was 62 inches. The patient's past medical history included overweight. Patient was non-alcoholic, and non-smoker. Patient had no drug abuse or illicit drug usage. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 043a21a, and expiry: unknown) dose was not reported, 1 total administered on 06-APR-2021 for prophylactic vaccination. No concomitant medications were reported. In May-2021, afterwards or sometime around, the patient could not walk, had swollen legs, could not taste, could not swallow and had shortness breath. On an unspecified date in MAY-2021, the patient died from an unknown cause. It was unknown if an autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: Covid-19 Vaccine ad26.Cov2.S-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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6/1/2021	1363989	WI	71	M	1/29/2021	3/3/2021	<p>Liver cancer (It was in his ducts & everything)/ had the cancer, but this vaccine accelerated it; This spontaneous case was reported by a consumer and describes the occurrence of HEPATIC CANCER (Liver cancer (It was in his ducts & everything)/ had the cancer, but this vaccine accelerated it) in a 71-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 007M20A and 013A21A) for COVID-19 vaccination. No Medical History information was reported. On 29-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 26-Feb-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On 03-Mar-2021, after starting mRNA-1273 (Moderna COVID-19 Vaccine), the patient experienced HEPATIC CANCER (Liver cancer (It was in his ducts & everything)/ had the cancer, but this vaccine accelerated it) (seriousness criteria death and medically significant). The patient died on 17-May-2021. The reported cause of death was liver cancer. It is unknown if an autopsy was performed. No concomitant medications was reported. No treatment medications was provided. 03-Mar-2021: Husband was diagnosed with liver cancer. It was in his ducts and everything. He had cancer at the time we took both vaccines. He died 10 weeks after being diagnosed with liver cancer. Caller felt the vaccine escalated the process. Company comment: Very limited information regarding the event has been provided at this time. Further information has been requested. This case was linked to MODERNATX, INC.-MOD-2021-019697 (E2B Linked Report).; Sender's Comments: Very limited information regarding the event has been provided at this time. Further information has been requested. MODERNATX, INC.-MOD-2021-019697:Wife's case; Reported Cause(s) of Death: Liver cancer</p>

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6/1/2021	1364018	MS	61	M	3/3/2021	5/8/2021	Cardiac Arrest (38 days after second vaccine); This spontaneous case was reported by a consumer and describes the occurrence of CARDIAC ARREST (Cardiac Arrest (38 days after second vaccine)) in a 61-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 03-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 31-Mar-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 08-May-2021, after starting mRNA-1273 (Moderna COVID-19 Vaccine), the patient experienced CARDIAC ARREST (Cardiac Arrest (38 days after second vaccine)) (seriousness criteria death, medically significant and life threatening). The patient died on 08-May-2021. The reported cause of death was cardiac arrest (38 days after second vaccine). It is unknown if an autopsy was performed. It was reported that Lot number 023M20A was the only lot on the vaccination card. Caller was not sure if this lot is from first or second vaccine." Treatment information was not reported but it was reported "Paramedics were there at home and they could not resuscitate him." Concomitant medication was not reported. Company Comment: Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded.; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded.; Reported Cause(s) of Death: Cardiac Arrest (38 days after second vaccine)

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6/1/2021	1364021			M	5/13/2021	5/13/2021	Had his second shot on 5/13 and passed away on that night or morning; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Had his second shot on 5/13 and passed away on that night or morning) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 13-May-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 13-May-2021 The patient died on 13-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. No relevant concomitant medications were reported. It was reported that patient passed away on that night of vaccination or next morning. The patient's autopsy might be scheduled on 24-MAY-2021. No treatment information was provided. Action taken with mRNA-1273 in response to events was not applicable. Very limited information regarding this event/s has been provided at this time. Further information has been requested.; Sender's Comments: Very limited information regarding this event/s has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
6/1/2021	1365222	TX	49	M	5/1/2021	5/15/2021	Received the shot 5/6 and very unexpectedly died 5/15, autopsy was not performed because foul play was not suspected and family could not pay to have it done

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6/1/2021		1364631	GA	31	M	5/1/2021	5/1/2021	This is reported by his mother. Around 10:00 AM he got his vaccine. Mother met him at 12:30 and went to lunch, said he felt OK. She stayed with him a couple of hours, went home and apparently he went to sleep. The next day he texted his mother and said that he felt yucky. She told him to give it a couple of days, and he went to work all week, but said that after he ate he felt "funny". Then on Sunday, Mother's day on 5/9/21 and they face timed and was supposed to meet him at 5:30. At 12:45 he had finished eating, ate some enchilladas and said that he felt weird. He said that he was going to be ok to meet him at 5:30. At 4:37 PM she texted him to say that she was on her way to meet him. She got at the meeting place at 5:30 and he was usually there before her, this is a normal weekend ritual to exchange his dog. She waited 9 minutes and she tried to facetime him thinking he was in traffic, and he didn't answer. She thought he was just not answering. She then waited 9 more minutes and then called his phone and local Hospital answered the phone and asked who she was, and she answered the questions, and she told her to get to the hospital. She went to the hospital and the doctor came in and told her that he had the car running and he went to the gas pump to get gas and he stepped out of the car and collapsed. The person who saw him told the attended that he had collapsed and they called 9-1-1 and he was pronounced dead. He worked in a warehouse and was doing well and about to be certified to be a forklift driving. They said that they worked on him and that they could not get his heart started again. They had to do an autopsy which is against her religion and she will not find out those results for 3-6 months. She said that he was healthy and looking forward to get tested at work. They told her that he had an enlarged heart and an enlarged spleen, and had never had any heart issues in the past. He walked 20,000 steps a day in the warehouse. He was living in a sober man's facility, he has been clean for 18 months. He had an addiction to pain pills and Xanax. She feels that there was something in the vaccine that had something to do with it as he was perfectly healthy before the vaccine.

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6/1/2021	1365075	MO	23	M	3/10/2021	3/12/2021	Patients father said his son began throwing up 2 days after injection. They took him to the ER and patient was given some medication to stop emesis. Two days later patient was still throwing up and the ER told him to give the medication a couple more days to work. The father said the throwing up was not constant and patient was able to eat and keep it down. The emesis was reported as dark brown mucous with no food particles in it. Patient was reported to throw up everyday until his death on day 9.
6/1/2021	1364761		64	F	5/19/2021	5/20/2021	Please note the patient did not receive the vaccination at state Medicine so the lot # and site of administration information is NOT available. Unclear if vaccine contributed to patient condition or outcome, but reporting due to timing of events. Patient received her 2nd Pfizer COVID vaccine around 2 pm on 5/19. She felt fatigued and had some localized arm pain in the arm she received her shot. She returned home and took a long nap from 3:30 pm to 11 pm at her daughter's house. She was playing with her grand-daughter and lifting her up when all of a sudden the daughter and her daughter's husband noticed the patient made a grunting/choking noise. She all of a sudden became unresponsive, had fixed pupils and a blank stare and found to be in PEA arrest with acute respiratory failure. Patient was initially admitted 5/20 to Medical Center and then transferred to state Medicine on 5/21. Patient passed on 5/31/21.
6/1/2021	1364855	FL	46	M	4/29/2021	4/30/2021	Dizziness, blurred vision, headache, nausea
6/1/2021	1364864		77	M	3/2/2021	5/8/2021	First dose given 2/9/2021 see further information below. Date of death 5/16/2021. Hospital 5/8/2021 to 5/16/2021
6/1/2021	1364886	NV	73	F	4/14/2021	5/4/2021	Death after fall and hospitalization.
6/1/2021	1365007	CT	27	M	1/18/2021	1/23/2021	I do not know the individuals medical hx or illness/complications. Due to new information circulating related to mRNA vaccines and myocarditis/pericarditis and being made aware that this person had suffered cardiac arrest after being admit to the hospital following complications with their health it warrants being reported regardless of prior health conditions.

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6/1/2021		1365365	KS	57	M	5/25/2021	5/29/2021	Resident received Janssen Covid 19 vaccination on 5/25. On 5/29, the resident died.
6/1/2021		1364314	FL		M			Cardiac arrest; This is a spontaneous report received by a contactable consumer. A male patient of unknown age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, Lot number not provided), via an unknown route, on unknown date at single dose for COVID-19 immunisation. No relevant medical history and concomitant medications were provided. Recently the patient received the first shot of COVID-19 vaccine and subsequently went into cardiac arrest. He unfortunately passed away one week later. It was unknown if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: cardiac arrest
6/1/2021		1365322		67	M	4/22/2021	5/13/2021	death Pneumonia, unspecified organism Cerebral infarction, unspecified
5/31/2021		1362287	CA	76	M	2/7/2021	2/7/2021	Stroke, ending in death
5/31/2021		1362130	MA	64	F	3/17/2021	4/13/2021	Acute onset stroke symptoms the afternoon of 4/13/21 after returning home from room. EMS transported pt to local hospital. Dx with aortic arch/proximal subclavian artery thrombus, migration into axillary artery. Treated at local hospital with TNK for aortic arch clot & ischemic stroke. Transferred to tertiary medical center. Pt had massive stroke (left & right side) with brain stem herniation. Pt CMO after 16hrs and expired on 4/14, <32 hrs after symptom onset.
5/31/2021		1362271	FL	66	M	5/12/2021	5/21/2021	Death
5/31/2021		1362305	CA	52	M	5/19/2021	5/25/2021	Massive heart attack. He was in Icu with a ECCMO and Impella machine. The highest life support was going to get a heart transplant but his life ended with a stroke while under sedation for 5 days
5/31/2021		1362402		90	M	3/15/2021	5/5/2021	death N17.9 - Acute kidney failure, unspecified E87.1 - Hypo-osmolality and hyponatremia
5/31/2021		1362465	PA	74	F	5/26/2021	5/27/2021	chest pain, fatigue, death

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5/31/2021		1362511	AZ	57	M	2/22/2021	2/22/2021	Skin hurting/sensitivity (Day 1 forward), severe chills (day 2 forward), headache (day 1 forward), fatigue (day 1 forward), mild cough on/off, eye pain (? day 4 forward), achey (day 1 forward), chest rash (? day 3 forward), fever (? day 5 forward 101.9 day 5), back pain (? day 5 forward), labored breathing (? day 5 forward), diarrhea (? day 5 forward), sore throat (? day 5 forward) vomit (day 7). Symptoms of chills and miserable feeling increased day 4 on. Tylenol, Albuterol on day 6, Day 8 hospitalized, antibiotics and oxygen, Sepsis and shock, less than one day in hospital - passed on 3/2/21 am.
5/31/2021		1362518	NM	89	M	1/27/2021	1/28/2021	Death (found down in home) having died the night before, and he received his COVID vaccine <24 hours before his death.
5/31/2021		1362534	FL	82	M	1/27/2021	1/28/2021	Within 24 hours after the vaccine his blood pressure escalated out of control, 200's over 100's . He went to see his PCP and cardiologist Nephrologist ended up in the hospital in February and his aortic graphic had broken loose and they felt it was because of the escalation of the blood pressure which the doctor felt was a possibility caused by the vaccine. February 7 he was in the hospital for 4 days. On march 10 he went to the hospital to repair the aneurism that had broken loose, the doctor thought it could have broken loose from the hypertension of the blood pressure. He stayed in the hospital for 48 day and was transferred to a rehab center in anther hospital he was in the hospital for a total of 78 days . He came home on the 26 of May and had home health care, he also was ended up with pneumonia. he came home on antibiotics . He ended up passing away yesterday, May 30th, 2021
5/31/2021		1362539	NJ	44	M	5/13/2021	5/28/2021	Pt presented to the hospital with abdominal pain and shortness of breath May 28, 2021 Noted to be thrombocytopenic - had normal platelet 20 days prior Had bruising, melena
5/31/2021		1362566	NC	43	F	5/26/2021	5/27/2021	mostly unknown, but partner said patient was unresponsive the next morning the day after receiving her Covid vaccine
5/31/2021		1362251	OK	68	M	5/1/2021	5/15/2021	Upset stomach and vomiting. Shortness of breath. Pressure in chest. Heart attack and DEATH.

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5/30/2021	1361447	CA	75	M	3/2/2021	4/15/2021	Patient developed cough about one month after the second dose of his vaccine. He does not have history of underlying lung disease. His CT scan showed diffuse ground glass appearance. Developed progressive and rapid respiratory failure. He was admitted to hospital on 5/13 and expired 5/30.
5/30/2021	1361481	NY	87	M	4/9/2021	4/1/2021	Rapid decline in ability to perform respiratory gas exchange and build up of carbon dioxide in the blood to life-threatening levels, ultimately leading to death. Rapid decline began about 2 weeks after receiving vaccine. Death would likely have occurred on 5/6/2021 or 5/7/2021 but for hospital intervention via use of a BiPAP machine. Patient had been exhibiting more mild, non-COVID respiratory distress for some time, back to at least late 2020, and likely at even lower levels for several years prior. Signs and symptoms included shallow breathing, extreme fatigue, difficulty or inability to lie down, occasional lightheadedness, etc. Oxygen saturation levels in April, as measured by a pulse oximeter, ranged from about 87%-96%. On May 6, it measured 65% just prior to ER visit.
5/30/2021	1361961	VT	96	F	5/7/2021	5/7/2021	profound exhaustion, unable to stay awake even with stimulation, severe anorexia - unwilling to eat pleural effusion +4 leg edema UTI felt like she was shaking internally (found it painful) felt hot (not common) body aches outcome=death
5/30/2021	1361857	TN	60	F	4/26/2021	4/26/2021	DEATH, lethargic, migraines, tired
5/30/2021	1361818	FL	58	F	3/31/2021	5/12/2021	Death
5/30/2021	1361764	FL	78	F	4/8/2021	5/14/2021	I happened to counsel patient's husband about his prescription 2 days ago and hear that his wife died of stroke approximately a month after the second dose of Moderna vaccine. I could not ask him further about exact date when she was admitted at the hospital because he was sick. I am not sure whether moderna vaccine caused her stroke, or not. Her husband said his wife had high blood pressure. They got Moderna vaccine on the same date. Her husband thought her high blood pressure caused the stroke. I don't have any info about her medical progress at the hospital.

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5/30/2021		1361723	NJ	90	F	3/2/2021	3/8/2021	Weaknesses. Dizziness. Headaches. Blurry vision both eyes. Sleepiness. Strokes. Hospitalization. Death
5/30/2021		1361525	FL	76	M	5/27/2021	5/28/2021	None known. However, died on 5/28/21 at 06:11
5/30/2021		1361500	ME	61	M	5/20/2021	5/26/2021	Patient received vaccine on Thursday evening. He began to feel very tired Monday and Tuesday. Wednesday he woke up in alot of abdominal pain. We went to healthcare facility at 4:30pm. He was diagnosed with Acute Pancreatitis. He was sent home at 10:30pm We went back to ED at 1:30 am Thursday. He was admitted during the day. In the early morning of Friday May 28th his blood pressure tanked and he became unresponsive. His heart stopped and they did compressions for 8-9 minutes. He was put into ICU. By 3am we were told he may not survive. By 5 am we were told his organs were shutting down. He passed around 7:45am. In researching the vaccine we discovered the SARS virus used in vaccine can attack the pancreas. We believe he died as a result of the reaction to the vaccine and his body and organs could not fight.
5/29/2021		1361137	FL	89	F	5/28/2021	5/29/2021	Death
5/29/2021		1361131	NC	59	M	4/19/2021	4/30/2021	s/p 2 doses of Covid-19 vaccine. Pt presented for weakness, SOB, fatigue progressive over the past month prior to admission. Found to be pancytopenic with bone marrow biopsy consistent with MDS. He was started on chemo but stay was complicated by neutropenic fevers, epistaxis, retinal hemorrhage, AKI, fluid overload, hypoxic respiratory failure, atrial fibrillation with RVR, and shock. He ultimately had a heart attack while admitted and was transitioned to comfort care after medical interventions could not stabilize hemodynamics.
5/29/2021		1361035	NY	71	F	3/16/2021	3/19/2021	3 days post vaccine, patient developed progressive DOE. Ultimately dx with microangiopathic hemolytic anemia and severe pulmonary HTN thought to be pre- and post capillary. TTP ruled out with normal ADAMTS 13, attempted IV vasodilation but ultimately died.
5/29/2021		1360114	CA	42	M	4/11/2021	4/13/2021	Soariness, low blood pressure and then death.

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5/29/2021		1359916		92	M	1/14/2021	2/10/2021	Death; This case was received via VAERS on 18-May-2021 and was forwarded to Moderna on 18-May-2021. This regulatory authority case was reported by an other health care professional and describes the occurrence of DEATH (Death) in a 92-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 13L20A) for COVID-19 vaccination. No Medical History information was reported. On 14-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 10-Feb-2021 The patient died on 10-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided. It was reported that Patient had no scanned records on file and no further noted regarding events from this time to date of death. No autopsy results were available. 27 days from date of vaccine to date of death. Treatment information was not provided. Action taken with mRNA-1273 in response to the event was not applicable. Very limited information regarding this event has been provided at this time. Further information cannot be requested.; Sender's Comments: Very limited information regarding this event has been provided at this time. Further information cannot be requested.; Reported Cause(s) of Death: Unknown cause of death
5/29/2021		1361366	VA	55	M	3/23/2021	3/23/2021	Death - 03/26/2021
5/28/2021		1358578	CA	64	M	4/14/2021	5/15/2021	CLIENT HAD FEVER AND BLUE/GRAY SKIN TONE FEW DAYS PRIOR TO DEATH. MISSED DOCTORS APPOINTMENT ON 5/14/21, FOUND DESEASED AT HOME ON 5/15/21.

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5/28/2021	1357369	VA	39	M	3/11/2021	3/15/2021	<p>Passed away from a Pulmonary Embolism; This is a spontaneous report from a contactable consumer. A 39-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at the age of 39 years old, on 11Mar2021 (Lot Number: EN6208) as single dose for covid-19 immunisation. Medical history included wolff-parkinson-white syndrome from an unknown date to 15Mar2021. The patient was diagnosed with this later in life, but was told he probably had it his entire life it just hadn't caused any issues for him. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient's concomitant medications were not reported. The patient previously got the flu vaccine for immunization every year with no issues. The patient passed away from a pulmonary embolism on 15Mar2021. The patient was not hospitalized prior to his death. He died from the pulmonary embolism in his sleep. The reporter denied any medications, labs, testing, or treatments for her husband relevant to these events. The patient died on 15Mar2021. There was a private autopsy performed and they said that the Pfizer Covid Vaccine was one of the contributing factors to the patient's death. The autopsy said the vaccine was a contributing factor. The reporter stated she told them since they said it was the pulmonary embolism that killed him, then that's what it should say. The Medical Examiner was saying that the science for the vaccine is so new, they just don't have the data that they need.; Reported Cause(s) of Death: Pulmonary embolism</p>

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5/28/2021	1357434			U			DEATHS; BLOOD CLOTS; This spontaneous report received from a consumer who reported reading and seeing on the news concerned a patient of unspecified age, race, ethnic origin and sex. The patient's height, and weight were not reported. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number not reported, expiry not reported) frequency one total, dose, therapy start date were not reported administered for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date, the consumer stated that he read and saw on the news that this vaccine causes patient's deaths, and blood clots. On an unspecified date, the patient died from unknown cause of death. It was not reported whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of deaths on an unspecified date, and the outcome of blood clots was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0: 20210550011-covid-19 vaccine ad26.cov2.s-deaths, blood clots. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/28/2021	1357679	DC	47	M	5/12/2021	5/15/2021	3 days after 2nd dose of moderna patient presented to our er in cardiac arrest; lacking extensive cardiac history other than a-fib; he had reported anginal like symptoms to his wofe during the day and then collapsed in v-fub and was unrecusatble; no autopsy or further information; unclear if vaccine is contributory but within 3 days i agreed with patient's wife in that the temporal relation should be reported
5/28/2021	1357990	GA	82	M	3/11/2021	4/1/2021	Patient hospitalized. Patient died after testing positive for COVID-19. Admitted to hospital 4/2/2021 for right flank pain. Tested positive on 4/1/2021. Died 4/29/2021

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5/28/2021	1358044	PA	73	F	5/26/2021	5/28/2021	Resident was not having any complaints after injection, Vitals were being monitored Q-shift for 72 hours and up to the time of incident vitals were stable, Administrator received phone call approximately 120am stating resident was complaining of SOB and Chest pain, RN supervisor came to assess resident and determined that she needed to be sent out. EMS was called and in route and resident was having conversation with night shift staff member and suddenly ceased talking and had passed away. Resident was a DNR at the time of incident.
5/28/2021	1358087		51	U	4/1/2021	4/1/2021	There were several serious GMO-associated injuries resulting into hospitalization: 90 (ninety) people, at least 2 (two) of whom died, but possibly even 25 (twenty-five) died (hospital/officials do not disclose the exact number) - Non of the injured/dead had noticable flu-like symptoms, but they had serious non-flu symptoms, e.g. transient ischaemic attack, acute myocardial infarction, neuronal stroke/hemorrhage, autoimmuneal petecchial thrombocytopenia etc.
5/28/2021	1358091	PA	61	M	4/27/2021	5/1/2021	My husband died on May 1st after receiving the vaccine on April 27th.
5/28/2021	1358130	MI	98	M	4/29/2021	5/9/2021	Made home visit for the 2nd dose of the Moderna COVID Vaccine and the daughter reported patient had died on 5/9/2021. No other information was given.
5/28/2021	1358345	IN	59	M	4/10/2021	5/1/2021	My husband died May 1st, 3 weeks after his last vaccine April 10 . He had a saddle pulmonary emboli. He did not have any symptoms that I knew of prior to May 1st. Entering info for research data.
5/28/2021	1358542	TX	64	F	5/19/2021	5/27/2021	The spouse reported onset of symptoms on 5/20/21 including lethargy. He reported that on 5/27/21, her speech became slurred and she died. Per spouse, an autopsy is pending.

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5/28/2021	1357033	TN		F		5/3/2021	DEATH; This spontaneous report received from a consumer concerned a 51 year old female. The patient's weight was 130 pounds, and height was 60 inches. The patient's concurrent conditions included COPD (Chronic obstructive pulmonary disease) and ex-alcohol user. The patient had no known allergies. The patient had drug abuse or illicit drug usage in past The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, and batch number: 206A21A expiry: 23-JUN-2021) dose was not reported, administered, 1 total on 28-APR-2021 for prophylactic vaccination. No concomitant medications were reported. On 03-MAY-2021, 5 days after vaccination the patient died. Consumer was waiting toxicology reports of patient at the time of reporting. On 03-MAY-2021, the subject died from unknown cause of death. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death); Sender's Comments: V0: 20210546992 -covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s); Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/28/2021	1358781	MN	83	M	5/5/2021	5/13/2021	death
5/28/2021	1358813	ME	89	F	4/27/2021	5/6/2021	Kidney failure/ death
5/28/2021	1359313	NJ	66	M	1/14/2021	1/25/2021	My husband had a stroke on 01/25/2021, with one large blood clot and many small blood clots. He was put on a ventilator until 02/06/2021 when I asked to have it removed. I died within 5 minutes after it being removed.

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5/28/2021	1357112	IN	73	F	2/22/2021	4/23/2021	<p>Patient developed COVID after vaccination; She is now deceased; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (She is now deceased) in a 73-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 013M20A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Cancer (previously had cancer twice). Concomitant products included ATORVASTATIN CALCIUM (LIPITOR), NIFEDIPINE (PROCARDIA [NIFEDIPINE]), TICLOPIDINE HYDROCHLORIDE (TICLID), OMEPRAZOLE (PRILOSEC [OMEPRAZOLE]) and CLOPIDOGREL BISULFATE (PLAVIX) for an unknown indication. On 22-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, the patient experienced COVID-19 (Patient developed COVID after vaccination). The patient died on 23-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, COVID-19 (Patient developed COVID after vaccination) outcome was unknown. It was reported that the patient previously had cancer twice, and her immune system was not what it should have been. The patient got really, really sick and had COVID at some point after receiving the vaccine. No corrective treatment was provided. Action taken with the drug in response to the events was not applicable. Company comment: Very limited information regarding this event has been provided at this time. Noting the subject had received 1st dose of vaccine prior to COVID. However, based on the mechanism of action of mRNA1273, the event COVID is unlikely related to vaccine.; Sender's Comments: Very limited information regarding this event has been provided at this time. Noting the subject had received 1st dose of vaccine prior to COVID. However, based on the mechanism of action of mRNA1273, the event COVID is unlikely related to vaccine.; Reported Cause(s) of Death: Unknown cause of death</p>

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5/28/2021	1358491	OH	40	M	5/23/2021	5/24/2021	patient called 911 with shortness of breath and chest pain. When squad arrived, he was still oriented and awake and told squad he had Pfizer vaccine the previous day. Thought was a pulmonary embolism had occurred. Then he lost consciousness and pulses. EMS started CPR. Despite aggressive ACLS maneuvers, the patient ultimately died.

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5/28/2021	1357031	NY		M		5/1/2021	RESPIRATORY FAILURE FROM PROSTATE CANCER AND METASTASIS; HALLUCINATING, TALKING TO HIS DEAD MOTHER AND BROTHER AND CHASING SQUIRRELS; STOPPED EATING; LOSS OF VOICE; TROUBLE SLEEPING; HEALTH STARTED TO DETERIORATE; DID NOT FEEL GOOD; LOW ENERGY; MIGHT BE GETTING A COLD; AGITATION; This spontaneous report received from a consumer concerned a 77 year old male. Initial information was processed with additional information received on 19-MAY-2021, 21-MAY-2021 and 22-MAY-2021. The patient's weight was 140 pounds, and height was 68 inches. The patient's past medical history included prostate issue and kidney shut down in 2014 because he could not urinate. Patient was hospitalized and doctor ruled out prostate cancer; he did have a serious infection, sepsis, surgery to open his prostate for urination and Foley catheter for 6 months. On 21-JUL-2014, daughter took patient home. Doctor wanted to place him in nursing home, he needed 24-hour care, but daughter refused. He went home with a feeding tube, had metabolic issues described as low pressure but high heart rate, "insulin dependent/diabetes/sugar issues" due to the feeding tube; within 3 weeks, he was up functioning, no more feeding tube, gained 25 pounds he was doing good with home care OT/PT, and blood sugar issues were corrected. The pulmonologist or cardiologist told daughter that he did not have damage to his heart. An echocardiogram was completed during this time, any other results are unknown. On 16-APR-2020, patient had trouble breathing, thought he was getting a cold. Ambulance was called and he was responding to supplemental O2, but was taken to the hospital. He was calm and fine but waiting for antibiotics during a 6-hours visit to the emergency room. X-ray showed he had a slight infection in his lower lobe. Apparently, the patient was told he had COVID-19 disease and had an anxiety attack. A couple hours later the reporter was notified that her father was intubated and placed in a drug-induced coma for COVID-19 disease. The reporter stated that this was not true and the hospital had no evidence because a rapid COVID-19 test was not available at that time and they had no evidence of COVID-19 infection. Five days later, the COVID-19 test result was positive. He was hospitalized for 95 days. While in coma, he had 2 heart attacks, his right lung collapsed due to

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hydropneumothorax with 85% of chest filled with loculated effusions; 900 mL of pleural fluid was removed from the lung. He received plasma antibodies during coma; he had hematomas all over both arms and hands. Daughter refused DNR (do-not-resuscitate). Daughter took her father home on 21-JUL-2020. Patient had a long history of hospital stays and health problems, was in coma from 16-APR-2020 to 24-JUL-2020. Patient was on ventilator. He was discharged and was still on feeding tube, He regained most of his abilities, but still was not able to retain information, and did not have a memory of what happened to him. He was not mentally capable. He was still recovering from his coma. On 05-SEP-2020, he had a bone marrow biopsy which ruled out cancer. Anemia treated with iron supplement. On an unspecified date in 2021, patient broke his hip and stayed in the hospital for another 11 days. Patient had chronic cough and was diagnosed with prostate cancer metastatic. The patient experienced rash when treated with morphine. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 206A21A, expiry: UNKNOWN) frequency 1 total, dose was not reported, administered on 05-MAY-2021 for prophylactic vaccination. No concomitant medications were reported. Reporter reported that her father received the Janssen COVID-19 Vaccine on 05-MAY-2021. He sat for the 15 minutes monitoring period at the vaccine facility. He did not intend to get vaccinated, but rather, was exchanging his glasses at the facility and proceeded to get vaccinated. The reporter stated that her father was escorted by the optical department associate to the pharmacy and that her father did not have the mental capacity to provide consent for vaccination. He was not capable of making medical decisions for himself. She was his contact person for informed consent. He went to pharmacy for eyeglasses and saw all the advertisement for JJ vaccine and went to get the shot. Even though He did not have the mental capacity to make decisions, the JJ vaccine was administered by pharmacy staff without any notifications to his family. There were no other risk factors or anything different that he did in those days. After 4 days of receiving the vaccine (on 10-MAY-2021) his health started to deteriorate and died within 24 hours after symptoms. On 07-MAY-2021 and 09-MAY-2021, the reporter was in

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contact with her father and he was fine. On 10May2021, her father did not feel good and thought he might be getting a cold, however, it was nothing alarming. He had fatigue, trouble sleeping, agitation, and low energy. On 11-MAY-2021, he was not eating, lost his voice, had trouble breathing, and told his wife he was going to lay down. On an unspecified date in MAY-2021, patient's breathing changed. On 11-MAY-2021, he was hallucinating, talking to his dead mother and brother and chasing squirrels (coded as visual hallucinations), then died. He was feeling tired and wanted to rest, he lied down and he dropped dead in short time. Patient died on 11-MAY-2021. Family did not have time to take him to the hospital. Daughter believed JJ vaccine is a killer and it was a death sentence for her father. The cause of death was reported as respiratory failure from prostate cancer and metastasis, which the reporter disagrees. She denied the cause of death. Reporter was angry and disappointed, blaming the death of her father on JJ vaccine. She stated so many times that the vaccine was a death sentence and how was it still continued, it was killing people. Reporter mentioned after her dad's passing his doctor called asking why was he given the vaccine and that patient was not a candidate for it considering his past medical history. Doctor did not want him to get the vaccine. Reporter also looked at her dad's journal, according to it he thought vaccine was created to help with side effects instead of actually preventing it. She already called pharmacy and spoke to the pharmacist/district manager, it was a completely new pharmacy for him and he had only gone for eye glasses only. District manager said they made a judgement call about vaccinating him. Daughter was angry with them for not checking with her or his doctor first. On JUL-2014, Laboratory data included: Blood pressure (NR: not provided) low pressure, Echocardiogram (NR: not provided) No damage to his heart., and Heart rate (NR: not provided) high heart rate. On APR-2020, Laboratory data included: COVID-19 virus test (NR: not provided) positive. On 16-APR-2020, Laboratory data included: X-ray (NR: not provided) a slight infection in lower lobe. On 05-SEP-2020, Laboratory data included: Bone marrow biopsy (NR: not provided) ruled out cancer. An autopsy was performed on 11-MAY-2021. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The

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patient died from respiratory failure from prostate cancer and metastasis. The patient had not recovered from hallucinating, talking to dead mother and brother and chasing squirrels, stopped eating, loss of voice, did not feel good, trouble sleeping, low energy, health started to deteriorate, and might be getting a cold, and the outcome of agitation was not reported. This report was serious (Death, and Other Medically Important Condition). This report was associated with product quality complaint :90000179909. The suspected product quality complaint has been confirmed to be voided based on the PQC evaluation/investigation performed. Confirmed no PQC was identified within the reported complaint reported. Complaint is approved for void. This case, from the same reporter is linked to 20210534689 and 20210544901.; Sender's Comments: V0: 2021054583 -covid-19 vaccine ad26.cov2.s –Respiratory Failure From Prostate Cancer And Metastasis. This event(s) is considered not related. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event(s) than the drug. Specifically: MEDICAL HISTORY 2021054583 -covid-19 vaccine ad26.cov2.s - Hallucinating, talking to his dead mother and brother and chasing squirrels. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: RESPIRATORY FAILURE FROM PROSTATE CANCER AND METASTASIS

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5/28/2021		1357346	KS	65	F	5/5/2021	5/17/2021	she slowly declined with pneumonia; Woozy/Dizzy; Sleeping all the time; Not eating; Running a fever off and on; Her blood pressure was a bit low, 105 over something; suspected COVID-19 with symptoms; Heart attack; This is a spontaneous report from Pfizer from a contactable Consumer reported for mother. A 65-years-old female patient received bnt162b2 (BNT162B2), dose 1 via an unspecified route of administration on 05May2021 as 1ST DOSE, SINGLE for covid-19 immunisation. The cancer doctor told her that she needed a Covid vaccine since she has cancer and a lowered immune system. Medical history included Metastatic rectal cancer from Jul2019 to 17May2021, Osteoporosis from unknown date to 17May2021 (She had it for maybe 10 years or something), Fibromyalgia from unknown date to 17May2021 (She had the fibromyalgia for 20 years). She had rectal cancer, osteoporosis, fibromyalgia, and a couple other things that the caller can't think of off hand. Her mother was diagnosed with the rectal cancer in Jul2019. The caller has no idea when she was diagnosed with the osteoporosis. She had the fibromyalgia for 20 years, and the caller is sure it was the same for the osteoporosis, maybe 10 years or something. They were being managed. There were no concomitant medications. The patient did have metastatic rectal cancer, but it was managed. She was not on hospice or terminal, and they hadn't exhausted all of the treatment plans yet. It was being controlled. She was under the surveillance of a cancer doctor who was completely shocked by her sudden death. It seemed like there was no reason. She was fine and drove herself to her appointments all the time. She had just driven herself to her last appointment. She passed away yesterday morning. She was slowly declining since she got the vaccine. The coroner was playing guessing games and assumed it was pancreatic cancer. Well, she didn't have pancreatic cancer, and the doctor already said the cancer didn't kill her. The doctor said if he had to guess it could have been some kind of pneumonia or a reaction to the vaccine. All of it made her heart stop. The coroner couldn't get the city to approve an autopsy to see the real cause of death because there was no foul play. The caller took it upon herself to discover if maybe Pfizer could help, and she needs to alleviate the vaccine as an option if it contributed. She is

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so tired and hasn't slept. It is devastating. This woman was everything in her life, and the caller is probably going to go next with how she feels. She feels responsible. Her other guess is if she gave her mother Covid and she slowly declined with pneumonia. The caller couldn't get her sister to take her mother to the ER. Her sister was there Sunday night. On Monday morning her sister called to say her mother was gone. On 05May2021 the patient had the first dose of the Covid vaccine. The caller could have gone there or called an ambulance when her mother wasn't answering the phone. She knew something was wrong. She called her sister who said their mother wasn't feeling good. Her mother was woozy, dizzy, and sleeping all the time. On day 3, Sunday, the caller couldn't get her mother on the phone. She thought she had some level of peace because her sister was there and could keep her updated. Her mother often gets sickly, but she always answers the phone even if she is deathly sick. The caller thought enough is enough and she needed to be put on the phone on speaker with her mother. The caller's sister said her mother was sleeping. The doctor said to probably bring her mother to the ER. The caller told her sister who just didn't take her mother to the ER. The caller could have called an ambulance. She feels incompetent. They are assuming the cause of death was a heart attack. If her mother had gone to the ER on Sunday night they may have found out. Her mother became woozy last weekend because the caller was there on Thursday and her mother didn't look good. She had her chemo bag because she brings it home. It was her first new chemo treatment, and the caller had never seen her mother respond like this. It was strange. Any other time when she was getting chemo she felt great because there is so much stuff in there like steroids to prevent a reaction. It was surprising because she was only sick on chemo once and she had been on this one before. She was just off. Then she continued to decline from there. It started before the chemo. She got on chemo that Thursday before Mother's Day, she was on her first chemo treatment at that time. She was sick a couple of days before that. She had the chemo on 06May2021. She started feeling sickly the day she got the injection on 05May2021. When the caller was there she was thinking it was from the chemo. The caller calls her mother every day and she was sounding worse and

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worse. On Thursday 13May2021 her mother took herself to her chemo follow up appointment and was telling the doctor that she was woozy, dizzy, and not eating. The doctor gave her fluids, and he didn't give her chemo because she was not scheduled for it that day. It was just a follow up appointment. He sent her home. The caller talked to her mother on Thursday evening and she didn't sound good and told her she was woozy and dizzy. On Friday, Saturday, and Sunday she didn't answer the phone. The caller's mother is totally against vaccines, and she had been begged to get the pneumonia and flu vaccine and denied them. She had never responded well to them in her life. Even as a cancer patient they would say she needed it and she wouldn't. She did get the Covid vaccine even though she didn't want to. The caller thought her mother was trying to convince herself it was because of the vaccine because she is so against them, but now she doesn't know. The doctor said he didn't think it would have been Covid because she didn't have a fever. Her mother told her that she had been running a fever off and on, which is not unusual for her mother. The doctor didn't think it would have been Covid. Her mother started sleeping all the time mid week last week. She started not eating at the end of last week. The caller has no idea when her mother had a fever. She hadn't gotten to talk to her mother all weekend. At some point last week her mother had said in a conversation that she had a fever off and on. Then on Thursday when she went to the chemo doctor she had no fever it shows it was 97 something. Her oxygen was fine. Her blood pressure was a bit low, 105 over something, which is low for her. She didn't have a fever last Thursday. Prior Vaccinations within 4 weeks no other vaccinations. Blood work on 13May2021 with unknown result. The patient passed away on 17May2021 after receiving the first dose of the Pfizer Covid vaccine. The caller expresses concern that her mother may have had Covid. No autopsy done. Cause of death was Heart attack. Information on Lot/Batch number has been requested.; Reported Cause(s) of Death: Heart attack

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5/28/2021	1357362	AZ	45	M	5/20/2021	5/20/2021	Patient went to sleep and died within 12 hours of vaccination; feeling sick; This is a spontaneous report from a contactable consumer via Pfizer sales representative. A 45-year-old male patient received BNT162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection), via an unspecified route of administration at the age of 45-year-old on 20May2021 (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. It was reported that 45-year-old healthy male patient received Pfizer Covid vaccine in the morning, reported feeling sick by the evening on 20May2021. Patient went to sleep and died within 12 hours of vaccination on 20May2021. Event took place after use of product. The patient died on 20May2021. It was not reported if an autopsy was performed. The outcome of event feeling sick was unknown. The outcome of event 'Patient went to sleep and died within 12 hours of vaccination' was fatal. Information on lot number/batch number has been requested.; Reported Cause(s) of Death: Patient went to sleep and died within 12 hours of vaccination

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5/28/2021		1357338	FL	96	F	3/28/2021	4/12/2021	<p>her mother's body was full blown with leukemia/she wasn't responding/leukemia was back; Second dose: breathing heavy; Second dose: screaming in agony and pain because her sides were blowing up in pain; Second dose: She had no red blood cells that could provide oxygen to her organs; Second dose: weak; Second dose: overproducing of her white blood cells; Second dose: wasn't acting like herself; Second dose: more tired; Second dose: she could hardly talk; Second dose: she couldn't stand up; Second dose: she lost control of her bowels; Second dose: hollow cough; This is a spontaneous report from a contactable consumer. A 96-years-old female patient received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration, administered in Arm Left on 28Mar2021 (Batch/Lot Number: EP6955) as 2ND DOSE, SINGLE for covid-19 immunisation. Medical history included Leukaemia in 2018, High blood pressure with 40 years, Diabetes in 2016, Atrial fibrillation in 2018. The patient's concomitant medications were not reported. Patient previously received the first dose of BNT162B2 (Batch/lot number: EN6199) in left arm on 07Mar2021 for COVID-19 immunization. She had just had her blood drawn in Feb2021 and her blood was ok. So on 07Mar2021 she received her first Covid 19 vaccine. At 96 years old, after the Covid 19 vaccine, her mother's body was full blown with leukemia. Radiation wasn't an option to stop the overproducing of her white blood cells. The Covid 19 vaccine just accelerated it. Maybe there are others out there in this condition and should be double checking to see if they should get the Covid 19 vaccine. On the 12Apr2021 or 13Apr2021 her mother started having a hollow cough. She wasn't congested but she continued to cough. She noticed her mother was breathing heavy and fighting to breathe on Friday, on 16Apr2021. It wasn't getting any better and she thought her mother would have more trouble so she took her to the emergency room. She reported she took her mother to the hospital on 16Apr2021. She was admitted on 16Apr2021 and discharged on 18Apr2021. They gave her some oxygen and did some tests. They asked her mother if she had chronic obstructive pulmonary disease and she did not, they suggested that it was her atrial fibrillation. She has had atrial fibrillation in the past, her doctor did leave her on her atrial fibrillation medication. She can't recall the</p>

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name of the atrial fibrillation medication. She was discharged home on 18Apr2021 and she was breathing ok on her own. But by that next Tuesday, 20Apr2021, she noticed her mother was declining. She wasn't acting like herself. On Wednesday, 21Apr2021, she was more tired and her difficulty breathing started back up. On Thursday, 22Apr2021, she called the ambulance to take her mother to the hospital. She could tell that her mother wasn't herself, she could hardly talk on 22Apr2021, she couldn't stand up, she lost control of her bowels. She wasn't responding to her. The caller knew something was going on. They put oxygen on her mother and they transferred her to a cancer specialist hospital. That's when the doctor realized it was a leukoblast. Clarified with caller, leukoblast. Then her mother died. She died on 28Apr2021. The caller knows the hospital was doing tests to see what was causing her mother's pain, but she doesn't have that information. She heard the screams from her mother and there was no consoling her mother. The hospital gave her mother morphine and it didn't work. She has no product information for the morphine, it was given in the hospital. She was screaming for murder, screaming for help and was given the morphine. Within a month of receiving the Covid 19 vaccine her leukemia was back and her mother was screaming in agony and pain because her sides were blowing up in pain. Whatever the Covid 19 vaccine did in her body, her body thought it was fighting off something. She had no red blood cells that could provide oxygen to her organs. She was weak. Overproducing of her white blood cells on an unspecified date. The lab data included White blood cell count abnormal and Red blood cell count decreased. Outcome of her mother's body was full blown with leukemia/she wasn't responding was fatal, of remaining events was unknown. Treatment received for all events. The seriousness of event breathing heavy and fighting to breathe were reported as hospitalization from 16Apr2021 to 18Apr2021. The seriousness criteria of she wasn't responding was reported as hospitalization from 22Apr2021 to 28Apr2021.; Reported Cause(s) of Death: Fatal Neoplasm progression

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5/27/2021		1354172	GA	67	M	3/29/2021	5/5/2021	PATIENT REPORTED DIFFICULTY BREATHING UPON EXERTION AND CHEST PAIN STARTING AROUND 05/08/2021. PATIENT WENT TO MD ON 05/12/2021 WHERE MD FOUND EKG ABNORMAL. PATIENT PASSED AWAY THAT EVENING
5/27/2021		1354872	MN	64	M	3/31/2021	4/21/2021	Patient was hospitalized multiple times and died within 60 days of receiving a COVID vaccine series
5/27/2021		1354848	MN	65	F	4/8/2021	4/20/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
5/27/2021		1354838	AR	71	M	2/16/2021	2/16/2021	71 y.o. male with history of leukemia who presents accompanied by his son with complaints of 6 week history of generalized weakness worsening over time accompanied by loss of appetite and weight loss. He reports receiving his initial COVID vaccine 6 weeks ago and symptoms began immediately following this. He denies pain or SOB. Pt with severe protein calorie malnutrition and AML presented with dehydration from MRSA Sepsis. Pt had weakness from dehydration, malnutrition and sepsis. He had a progressive downhill course. His family elected for comfort measures. He died of his illness and was pronounced dead at 4:13AM April 13, 2021
5/27/2021		1354811		65	M	4/5/2021	4/21/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
5/27/2021		1354796	TX	76	M	5/14/2021	5/18/2021	According to the family, he had symptoms of weakness, nausea, headache, difficulty breathing beginning May 15, 2021. They spoke with him on Sunday, May 16, 2021 and he was continuing to have symptoms. On Monday, May 17, he called one of his daughters, but she missed the call. The family tried to call him on May 18- and May 19, but they couldn't reach him. A welfare check was initiated on May 20; however, the police didn't enter the residence. He was found dead in his bed on May 21, 2021, with changes of decomposition.

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5/27/2021		1353088	NY		F			<p>Died in the car on the way home after receiving the second dose of the Moderna COVID-19; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Died in the car on the way home after receiving the second dose of the Moderna COVID-19) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant medication information not provided. Treatment information not provided. Action taken with mRNA in response to the event/s was not applicable. A patient called on 13MAY2021 to report adverse effects she experienced after receiving the Moderna COVID-19 vaccine. During the call, she reported a serious adverse effect for "another lady" who "died in the car on the way home" after receiving the second dose of the Moderna COVID-19 vaccine. The caller reported that the individual received the second dose of the vaccine. No additional information was provided. The Serious Adverse Event Reporting form has been completed. Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. This case was linked to US-MODERNATX, INC.-MOD-2021-128107, MOD21-090166, US-MODERNATX, INC.-MOD-2021-128999 (E2B Linked Report).; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. US-MODERNATX, INC.-MOD-2021-128107: MOD21-090166: US-MODERNATX, INC.-MOD-2021-128999;; Reported Cause(s) of Death: unknown cause of death</p>

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5/27/2021	1353097		15	F			Cardiac arrest; 15 year old female received vaccine; This spontaneous case was reported by a non-health professional and describes the occurrence of CARDIAC ARREST (Cardiac arrest) in a 15-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced CARDIAC ARREST (Cardiac arrest) (seriousness criteria death and medically significant) and PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (15 year old female received vaccine). The patient died on an unknown date. The reported cause of death was Cardiac arrest. It is unknown if an autopsy was performed. At the time of death, PRODUCT ADMINISTERED TO PATIENT OF INAPPROPRIATE AGE (15 year old female received vaccine) had resolved. Concomitant medication use was not provided by the reporter. Treatment of events was not reported. Limited information regarding the events has been provided at this time and a causal relationship cannot be excluded for the event of cardiac arrest. Follow up not possible as no contact details available; Sender's Comments: Limited information regarding the events has been provided at this time and a causal relationship cannot be excluded for the event of cardiac arrest. Follow up not possible as no contact details available; Reported Cause(s) of Death: Cardiac arrest
5/27/2021	1353752	MA	65	M	3/1/2021	4/26/2021	He received both doses March 2021. second dose on 3/26. on 4/26 presented to ER with Epistaxis, came to about a month after Pfizer series pt went to Hospital ER 3 times that week for care of what was thought nose bleeds from picking, and later ENT for care that required travel. Pt stopped Plavix use and 6 days later on 5/1 returned to Hospital ER with serious symptoms, developed multiple thrombotic events that lead to clotting of leg/bowel/coronary. Transferred to Hospital on 5/1/2021. Multiple MI events and expired at Hospital on 5/3/2021

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5/27/2021	1354152	TX	79	F	4/6/2021	4/17/2021	<p>Eleven days after getting the shot, my mother in law was experiencing severe back pain and was not able to get comfortable or sleep at night. Before we could take her to see a doctor, she fell while trying to get out of bed at 7am the next morning. She had trouble getting up and exerted a lot of energy trying on her own. She called for my husband and I to help her get up. I grabbed her around the waist and my husband held her walker for her as support. Upon rising (mostly of her own ability) she was so exhausted that we had her sit on her walker and rest a moment. My husband went to check on her twice over the next 15-20 minutes, but when he returned again she was showing classic stroke signs and EMS was called. They arrived quickly and agreed. She was taken immediately to the ER, where they also agreed that it looked like a stroke. She was admitted as they continued to run tests, but she continued to decline more and more each day at the hospital losing motor skills and ability to speak. She was not able to move her right side at all and the left side was fidgety and had uncontrollably flailing that left her bruises on her arm and leg. She was also excessively sleepy. After loads of testings and images, the MRIs finally showed that the brain stem was extremely inflamed and it was an auto-immune response. By this time, she was already a vegetable in the ICU ward under incubation, IVs and a feeding tube. They continued to run more tests and brought in infectious diseases, but they ultimately said her body was fighting an infection that she did not have. They attempted a hemoglobin treatment with an oncologist to shut down her immune system but never consulted with her renal doctor, even through they were very concerned about renal failure. She could not complete the treatment and only received 4 out of the 5 doses they wanted to give her because of her kidney counts. They said that the auto-immune attack was very aggressive and they could not shut it down. In the early morning of 4/28/21, they finally contacted her kidney doctor and she was put on dialysis as a last effort to try to save her, but it was too late and all her organs were failing. She passed at 1:56 pm. Patient was homebound during the pandemic and did not leave the house unless she was visiting her doctor's office. My husband and I have limited contact at our jobs, as we work in small offices, and our children (that also lived with her) were being schooled virtually.</p>

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						There is nothing that I know that could have caused her immune system to go into overdrive, except for the vaccine that was administered less than 2 weeks (which is considered the time frame for vaccine immunity) prior to her symptoms.
5/27/2021	1354193	TN	68	M	4/13/2021	5/25/2021 Patient received second COVID 19 vaccine on 4/13/21 at Site. Patient tested positive for COVID on 5/16/2021. Patient had worsened short of breath on 5/25/2021 and was admitted to Medical and placed on a vent. Patient expired on 5/26/2021.
5/27/2021	1354321	MN	78	M	4/30/2021	5/11/2021 Hospice patient death within 60 days of receiving a COVID vaccine
5/27/2021	1354336	MN	70	M	3/3/2021	3/10/2021 Patient was hospitalized multiple times and died at home within 60 days of receiving a COVID vaccine
5/27/2021	1354359	IL	76	M	4/7/2021	5/12/2021 Patient presented to this facility on 5/12/21 as transfer from hospital for treatment of acute hypoxic respiratory failure secondary to COVID pneumonia requiring intensive care unit treatment. Patient did receive a J&J COVID vaccine on 4/7/21. Patient was intubated on arrival. Patient was treated with remdesivir, tocilizumab, steroids, and antibiotics. Patient's ARDS progressed. He developed septic shock, recurrent pneumothoraces, and acute kidney injury on chronic kidney disease. Patient did not improve. Patient was transitioned to comfort care on 5/23/21 and patient expired.
5/27/2021	1354490	IL	85	M	5/25/2021	5/27/2021 Was found deceased in bed this morning
5/27/2021	1354548	UT	50	M	5/11/2021	5/22/2021 No adverse symptoms reported. Death following a fall while at home alone.
5/27/2021	1354601	TN	60	F	4/8/2021	5/7/2021 cardiomegaly, with significant bilateral lung abnormality. in addition, pulmonary edema with extensive bilateral multifocal pneumonia
5/27/2021	1354616	PR	74	F	1/13/2021	2/6/2021 Difficulty breathing, coughing, congestion, dies of cardiac arrest.
5/27/2021	1354660	UT	66	M	5/22/2021	5/22/2021 Patient spouse reports to me the following: patient felt normal most of the day, later in the evening he felt extreme fatigue went to bed around 9pm. She found him deceased around 2am.

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5/27/2021	1354136	MA	59	F	5/6/2021	5/11/2021	Patient had been complaining of worsening LE edema 3 days prior to event. She was seen at the clinic and given medication for it. Patient apparently developed high BP at home (worsening HTN ?) and passed away at home 5 days after vaccination (05/11). No further info.

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5/27/2021	1355095	PA	72	F	3/17/2021	3/22/2021	Daughter reporting after her mother's death . She got her vaccine and called her daughter in the afternoon around 2:00 and told her that she got it. At 6:00 she received a VM where she said that she was having joint pain and wanted to know if she could call her doctor to get her joint pain medicine. Later that evening her daughter told her that was why she was put on the Hydroxychloroquine and they wanted her to see the rheumatologist. She complained of pain a lot, but she specifically asked for joint pain medicine. On the 22nd on another VM her daughter noticed that she sounded raspy hoarse sounding and congested and had a cough. Then subsequent messages after that the hoarseness was there that didn't go away. Her daughter took her to the dentist on 4/15/21 and she remembered that the caregiver told her that she did not want to go to the dentist as she did not feel good. She did not like to get out of the apartment. Then on 4/19/21 she was admitted to the hospital and that she had pneumonia. They were going to discharge her home and she was going to pick her up on 4/22/21, and then they called her back and told her that she sounded junky and they were going to keep her another day. She made arrangements to pick her up on Friday and then her oxygens dropped and would discharge her on Monday. She normally gets oxygen 1 liter of oxygen only at night, and when she was admitted her oxygen levels were low and they put her on 6 liters when she was admitted. Then she was weaned off oxygen completely, and her daughter informed them that she slept with oxygen and that's when they were talking about going home. On Friday she dropped her oxygen level into the 60's On Saturday 4/24/21 she was on 9 liters of oxygen and the doctor came in and said that she was on 14. By Saturday night she was on the Critical care Unit, but her on Vancomycin and was on Vapotherm on high-flow oxygen and she had maxed out at 40 liters at 100% oxygen. They talked to the daughter about putting her on ventilation and thought it was toxicity to Vancomycin and other things and couldn't figure it out and said that it was some sort of inflammation of her lungs. They put her on high levels of steroids and was then taken off of high-flow oxygen and then was still on 20% liters. They recommended hospice and palliative care. They decided to bring her home on Hospice with 15 liters of oxygen. It was up and down levels. She was

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						given steroids when she came home on Hospice and was given steroids. She then started to decline and hospice nurse came and she was admitted to Hershey and they repeated her chest x-ray and COVID testing, and that her lungs were so scarred there was nothing that they could do for her. They tested her for COVID multiple times, the CAT Scans came back that it was worsening and consistent with COVID but tested negative twice while was there. She was then sent to Hospital and tested again and was negative, and she passed on 5/10/2021. HOSPITAL ADMISSIONS: She was admitted to on 4/19/21 discharged home on hospice on 5/6/21. She was admitted to Medical Center on 5/6/21 and she died on 5/10/21 at 5:48 PM.	
5/27/2021	1356045	OH	45	F	5/1/2021	5/3/2021	Death. Patient died on 5/3/2021; two days after receiving vaccine.
5/27/2021	1355831	CA	87	M	4/9/2021	4/10/2021	Site pain Vomiting fever death
5/27/2021	1355806	FL	73	M	2/13/2021	4/10/2021	My father received his vaccines through the hospital, on 1/23/21 and 2/13/21. The week of April 17, 2021, he started with diarrhea and cough. He spoke with his PCP and was told to quarantine and report any worsening symptoms. Wednesday or Thursday he began with vomiting and unable to hold down any fluids. His cough was nonproductive. On Saturday 4/17/21 he reported to Hospital ER with SOB, cough, vomiting & diarrhea. He was diagnosed with COVID PNA. He passed away 5/7/21 of COVID PNA, respiratory failure. He tested positive the week of 5/7/21 again of COVID 19. I feel this needs to be reported as he had both PFIZER vaccines in January & February and still ended up intubated and deceased from COVID 19.
5/27/2021	1355794	NE	84	F	4/8/2021	4/15/2021	My mother has never had any heart issues, and suffered a heart attack on Thursday April 15. She had 2 stints put in late Thur evening. The surgery went well, but there was too much damage to her heart and she passed away on Sat April 17, 2021
5/27/2021	1355384	SC	73	M	2/3/2021	4/2/2021	Admitted to the hospital with weakness, fever on 4/14/2021. Transferred to ICU on 4/17/21 requiring bipap. Intubated 4/25/2021. covid + 4/2/21. Last vaccine dose completed 3/3/2021. Pt died on 5/15/2021

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5/27/2021	1355185	IA	83	F	4/22/2021	5/26/2021	Patient found dead
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5/27/2021	1355181	CA	75	M	1/13/2021	1/17/2021	Death
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5/27/2021		1355174	CA	51	M	5/7/2021	5/20/2021	On 5/20/21 the patient was at home with his mother when he had acute nausea, light-headedness, and abdominal pain. He presented to the ED by ambulance. Excerpt from ED notes of MD follows: "Initial ED interventions: iv fluids, low dose iv ativan, iv toradol, iv zofran. ED course: patient arrives very anxious, writhing on bed, difficult to redirect. With chronic tonic, not seizing. Mother arrives, and he recognizes her, seems to be consoled somewhat by her presence, but she is unable to direct him, and describes his behavior as irregular, and events acute this evening at her home. Patient rests, and then HR decrease to 50s on monitor and patient found to be pulseless - I immediately start chest compressions, and achieve ROSC after PEA arrest with administration of EPI/compressions. Patient intubated per procedure note without complication. L femoral central attained per procedure note without complication. CPR performed over ED course intermittently (always PEA arrest) with ROSC achieved with administration of EPI, EPI drip started in addition to sedation meds, and iv fluids. No obvious STEMI on ECG to administer lytics, with suspicion of dissection and AAA prominent. I am able to stabilize and accompany patient to CT suite, where I recognize B/L massive PE immediately. I discuss with Dr. of Cardiology, who agrees with administration of alteplase. I discuss risks with mother who consents verbally. Patient without response to alteplase, and with continued pattern of PEA arrest following bradycardia. I discuss etiology of presentation with mother, and that patient is with very poor prognosis of survival, and likely poorer prognosis of neurological status, and patient is made comfort care, and fentanyl drip increased, patient is taken off of ventilation and drips. Pronounced deceased at 22:00. MDM: Initial concern for but not limited to appendicitis, AAA, diverticulitis, renal stones, pyelonephritis, musculoskeletal pain, pancreatitis, toxic ingestion, ACS, obstruction, perforation, sepsis (2/2 PNA, UTI, meningitis, intra-abdominal infection), AAA, dissection, PE - as ED course progresses, differential narrows and consider more likely PEA arrest secondary to ACS, PE, dissection, AAA, necrotic pancreatitis, tension PNX (less likely). Considered but do not suspect seizures, stroke. Imaging studies reviewed - CXR with ETT in place, no acute pathology. CTA chest/A/P remarkable for massive

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								proximal B/L PE. Labs reviewed. ECGs without STEMI, with sinus tach initially, LBBB after initial ROSC, and then AFib in RVR on subsequent ECG. Per above, patient suffered massive B/L PE, with subsequent cardiac arrest, despite heroic efforts including thrombolysis. Death called at 22:00. Diagnosis: massive B/L PEs, PEA arrest. Disposition: deceased.~~
5/27/2021		1354898	MO	45	M	4/30/2021	5/1/2021	My brother had his second vaccine shot on 4/30. When I talked to him on 5/5 he told me he'd had a lot of joint pain and fatigue but thought he would go into work the next day. Thursday he left work feeling sick with a lot of 'rib pain'. At some point that night he passed away. We still do not have an autopsy report, but the timing seems odd.
5/27/2021		1355126	PR	77	F	4/3/2021	5/12/2021	Difficulty breathing and pain in the chest.
5/27/2021		1354899	MN	80	F	3/24/2021	4/29/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
5/27/2021		1355052	CA	77	F	1/28/2021	1/30/2021	She received her vaccine. The next few days, she was extremely tired and slept a lot. A couple days after the vaccine, she complained that her stomach hurt slightly. Days went by and the pain slowly got worse. She didn't feel like eating. Then on 2/8/21 in the middle of the night, she woke up in excruciating stomach pain and her husband called ambulance. They rushed her to ER. The determined that her colon had ruptured near her stomach and they took her in for emergency colonoscopy. The surgery was a success, but a couple days after, she was weak and said she didn't want to fight any longer. They put her on hospice measures and she died 2/15/21. We feel that she was doing fine before the vaccine, and then all of a sudden this occurred. Seems to be too much of a coincidence. Finally taking the time to report it, in case there are others having colon and or stomach issues.
5/27/2021		1355039	OR	20	M	5/22/2021	5/23/2021	Cardiac Arrest
5/27/2021		1355032	MN	68	M	3/31/2021	4/21/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine

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5/27/2021		1354978	NC	76	M	4/16/2021	5/3/2021	He received the vaccine and had a heart attack on May 3, 2021 and passed away on May 4th. They did an full autopsy
5/27/2021		1354957	WA	57	M	3/26/2021	3/27/2021	On 3/27/21 at around 9pm He felt tightness in chest which lead to heart attack and death
5/27/2021		1355014	MO	92	F	2/1/2021	5/26/2021	Patient on hospice d/t Stroke. She had a history of CVA's. She died 5-26-2021.
5/27/2021		1354932		93	F	2/25/2021	3/3/2021	Patient was hospitalized multiple times and died within 60 days of receiving a COVID vaccine
5/27/2021		1354740	NC	70	M	5/24/2021	5/25/2021	Death
5/27/2021		1355128	MA	70	M	4/1/2021	4/3/2021	Fainted in apartment parking lot, on morning of April 3; transported to ER,, via ambulance. Hospital stay for several days, moved to Rehab, sent back to ER with a cough, trouble breathing, and swallowing. Diagnosed with pneumonia. Went into coma on 4/18. Passed away on 4/22/2021.
5/27/2021		1354959	GA	80	M	3/4/2021	5/5/2021	Muscle ache, loss of smell and taste The PUI started feeling ill on 4/29/21 with minor symptoms. The patient is having body aches and a loss of appetite due to his loss of taste/smell. The patient is currently undergoing chemo therapy and is most likely the reason why he still got sick with COVID-19 even though he is fully vaccinated. Cause of Death: ACUTE HYPOXIC RESPIRATORY FAILURE, COVID 19 PNEUMONIA

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5/26/2021	1351091	ID	77	F	2/27/2021	3/12/2021	Onset urticaria 3/12/21. ED visit 3/14/21. Syncopal episode in context of rash 3/17/21 leading to hospitalization 3/17-8/21. Benadryl, loratadine, famotidine, cephalexin for UTI. 2nd Moderna shot 3/27/21. 4/2 Office visit dizzy, weak, headaches, nausea, loss of appetite since 2nd vaccine Na 127. 4/16 Office visit for Headache, neck pain. 4/25 ED visit for dizziness. MRI head NL, labs mild hyponatremia. Given meclizine. 4/27-8 Hospitalization for dizziness, orthostasis, URI symptoms. OC43 Coronavirus, orthostasis. Alb 2.7 Globulin 5. New cervical and axillary Lymph adenopathy. 5/8/21 admitted to hospital w/ new diagnosis of lymphoma (pathologic diagnosis Nodal peripheral T cell lymphoma w/ follicular helper phenotype. Large axillary lymphadenopathy, thrombocytopenia, elevated total protein, acute kidney injury, anemia. 5/15/21 patient passed away from acute hypoxic respiratory failure in the setting of new lymphoma diagnosis.
5/26/2021	1351172	PA	42	M	1/1/2021	2/18/2021	Death on 2/18/21. Pulmonary embolism found on autopsy.
5/26/2021	1351207	MI	73	M	3/5/2021	4/3/2021	73 year old male with PMHx of AFib, CAD, and HTN who presents with c/o dyspnea that started 4/6/21. Patient states it got to the point where he could not walk in his house without severe dyspnea. States he was diagnosed with COVID-19 one week prior. Per chart review he was in our ER 4/3/21 and diagnosed with COVID-19. At the time he was 95% on room air. His only other symptom has been diarrhea. He states he received the Johnson and Johnson vaccine one month ago. He denies any dizziness, chest pain, abdominal pain, n/v, weakness, or numbness. In ER patient was hypoxic and improved only with BiPAP. Per chart review patient had cardiac arrest on 11/2020 for 17 minutes. He has a significant cardiac history consisting of stemi, fem-pop bypass surgery, PVD, CABG x4, AFib post ablation 2017, V-tach. He was started on therapy with steroids, anticoagulation, and Remdesivir. He failed to improve and had increasing oxygen requirements. He was eventually intubated. Due to failure to improve patient was made DNR and eventually expired.

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5/26/2021	1351287	NY	92	F	5/24/2021	5/24/2021	11am Resident vaccinated. 2pm Chest congestion, STAT dose of Solumedrol and non rebreather applied. Resident had small amount of emesis and was suctioned. Was being monitored and expired at 2:30 pm
5/26/2021	1351301	CA	74	M	5/19/2021	5/25/2021	Resident was given the vaccine on 05/19/21 and has been doing well until 05/25/21 around 10:01 am, he was found very congested, lungs with crackles, O2 saturation went down to 60-70 %, placed on 100% non-rebreather masks. Resident suctioned as ordered. Resident was placed on Hospice care. Resident expired at 11:58am.
5/26/2021	1351445	CA	55	F	5/5/2021	5/6/2021	Slight malaise after first dose. After second dose, she complained of body aches throughout the rest of the day until she was transported to the hospital.
5/26/2021	1351033	CA	74	M	1/28/2021	4/28/2021	COVID-19 INFECTION, DIED 5/8/2021
5/26/2021	1351475	MN	76	F	4/3/2021	5/3/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
5/26/2021	1351084	MI	75	F	3/11/2021	3/27/2021	75 y/o female w/ PMH significant for COPD, diabetes, GERD, HLD, HTN, CAD, CVA who presented to the hospital ED on 4/2/21 for fever, dyspnea. Pt reports being exposed to COVID 1 week ago, her entire family at home had it. She called her PCP and was placed on multivitamins and prednisone taper when she became symptomatic ~3/27/21. Throughout the week, pt had worsening dyspnea, worse with exertion, as well as dry cough, fevers and chills. Reports her temperature was 102 at home. Pulse ox was 85% at home and pt was instructed to come into the ED. On arrival, O2 82% on RA and pt having some respiratory distress. Patient was intubated and placed on full vent support, but could not be extubated. Patient's diabetes continued to be uncontrolled because of IV steroid. Patient's lactic acidosis improved with IV hydration. Patient continued to be difficult to extubate because of COVID pneumonia with ARDS. Family opted for the patient to be transitioned to hospice care and comfort care. Expired on 4/26/2021.
5/26/2021	1351511	TX	84	M	12/1/2020	1/1/2021	dead two weeks later, is that good enough for your "adverse event"? Are you using the data to be sure it's killing like you want? What do you want from me here?

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5/26/2021		1351527	MN	85	F	3/26/2021	4/9/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
5/26/2021		1351556	MN	74	M	3/23/2021	3/25/2021	Patient was hospitalized multiple times and died within 60 days of receiving a COVID vaccine series
5/26/2021		1351564	MI	62	M	4/13/2021	4/27/2021	Pulmonary embolism that resulted in death
5/26/2021		1351581	NJ	64	F	3/18/2021	4/26/2021	Complaint of cramping in legs on April 26, 2021. Resolved for a short period of time. Earlier in May 2021 Complaint of Left Flank pain with Radiating pain to Left Thigh. Appointment with Orthoped cancelled due to inability to drive with pain. On May 15, 2021 complaint of continued Left Flank Pain Radiating to Left thigh with burning and discoloration. Unresponsive on May 16, 2021. Pronounced Dead at 1:52pm by County Coroner. Cause of death noted as CV. Nature of death :Natural This is being reported in case another patient complains of these same symptoms. There may or may not be a Correlation with this Death and The Jansen Covid-19 Vaccine
5/26/2021		1351679	NY	66	M	4/21/2021	4/22/2021	Difficulty Breathing, Pain
5/26/2021		1351907	KY	55	F	4/1/2021	5/16/2021	My mother described feeling "off" from the moment after the second vaccination of COVID19 (Pfizer-BioNTech). She Continued to feel strange weeks after the vaccine. My mother passed away at age 55 completely healthy and had a check-up with her primary care physician prior to any vaccinations. My mother did not die of natural causes at the time of her age and health.
5/26/2021		1351466	MI	88	M	4/1/2021	4/16/2021	88-year-old male with lymphoma that received a transfusion of 2 units of packed red blood cells prior to admission. The patient has a history of pleural effusions and he states after the blood transfusion, he became increasingly more short of breath and could not catch his air. He was dyspneic at rest and exertion. There is no cough. No fevers. He also has a history of cardiomyopathy and chest x-ray is suggestive of increasing sizes of his pleural effusions. Tested positive for COVID on 4/20/2021. Moved to hospice and expired on 4/22/2021.

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5/26/2021		1350433	MI	50	F	4/8/2021	5/8/2021	Presented 5/13 to Hospital. Presented to Hospital on 5/13 with one week of symptoms including cough, dyspnea, diarrhea. COVID-19 testing was positive on 5/8. Treatments prior to arrival included remdesivir and dexamethasone, started 5/13. She was also placed on pulse dose steroids 1000 mg/day methylprednisolone given her history of ground glass lung opacities in 2018. Progressed to high-flow nasal cannula, then BiPAP on 5/14, and was intubated on 5/17. Paralysis and proning initiated. Transferred to another hospital for possible VV ECMO candidacy. Patient with severe acute respiratory failure d/t covid who has failed treatment with the ventilator despite paralysis and proning. CTS asked to place patient on VV ECMO. 5/20/21 1135am initiated ECMO Patient is a 50yr old female with past medical history of hypertension, asthma, OSA and obesity BMI 41.5 who presented to hospital on 5/13 with progressive cough and shortness of breath for about a week. Of note, patient also has a history of respiratory failure presenting with ground glass opacities on CT scan in 2018 with unclear etiology despite bronchoscopy and serologic studies which resolved with high dose corticosteroids. Patient recently tested positive for COVID on 5/8 and received johnson and johnson vaccine in April. Patient was admitted on 5/13 and treated with decadron, remdesivir and tocilizumab. Course complicated by progressive respiratory failure requiring HFNC followed by Bipap and ultimately intubation on 5/17. Due to elevated d-dimer, lower extremity dopplers were obtained which were negative, however a heparin gtt was initiated. Course further complicated by cold left lower extremity; arterial duplex demonstrated distal popliteal artery thrombus extending into the peroneal, anterior tibial and dorsalis pedis arteries. therefore heparin was switched to argatroban and a HIT panel was sent. On 5/19 patient continued to decline despite paralytic and proning. Patient transferred to ICU for further level of care and VV ECMO evaluation. On arrival patient was started on velettri; however due to continued respiratory decline a shock call was placed for VV ECMO and patient cannulated for VV @ 1200. Cannulation was difficult and patient was felt to have an IVC thrombus as clot was seen going into the ECMO circuit during cannulation. Post cannulation she developed worsening septic shock and DIC. She received 2uprbc, 1unit cryo, 1

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platelet, 2 FFP, 5 liters crystalloid and 1L albumin. Blood cultures positive for GPC in clusters. Escalating vasopressors (Epi/NE/vaso) and ongoing hypoxia family opted to change code status to DNR. Patient then continue to have worsening hemodynamic instability and went into PEA and ultimately asystole. She was pronounced deceased at 1815. Family was en route already due to her instability thus will be notified of her passing once they arrive. Dr. was notified of patients death.

5/26/2021

1349013

60 M

5/1/2021

PULMONARY EMBOLISM; This spontaneous report received from a patient via a company representative concerned a 60 year old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 205A21A, and expiry: UNKNOWN) dose was not reported at 1 total, administered on 03-MAY-2021 for prophylactic vaccination. No concomitant medications were reported. On an unspecified date in MAY-2021, the patient experienced pulmonary embolism and died from pulmonary embolism. It was unknown whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The medical examiner ruled that the cause of death was due to a pulmonary embolism and did not believe that the pulmonary embolism was caused by the covid-19 vaccine ad26.cov2.s and the reporter causality was not related to covid-19 vaccine ad26.cov2.s and where as company causality was possible to covid-19 vaccine ad26.cov2.s. This report was serious (Death).; Sender's Comments: V0- 20210537420 - Covid-19 vaccine ad26.cov2.s-pulmonary embolism This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: PULMONARY EMBOLISM

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5/26/2021		1349042	NY		U			<p>DROPPING DEAD; HEART ATTACKS; BLOOD CLOTS; STROKES; BRAIN DAMAGE; HEART CONDITIONS; This spontaneous report received from a consumer who reported reading from many personal social media accounts which concerned multiple patients of unspecified age and sex. No past medical history or concurrent conditions were reported. The patients received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, 1 total, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow up will be requested for this case. No concomitant medications were reported. It was reported that, the patients were suffering from blood clots, dropping dead, had strokes, heart attacks, heart conditions and brain damage after vaccination. It was also reported that, the patients were perfectly healthy before and now they would never be the same. On an unspecified date, the patient died from unknown cause of death. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patients died of unknown cause on an unspecified date, and the outcome of blood clots, strokes, heart attacks, heart conditions and brain damage was not reported. This report was serious (Death, and Other Medically Important Condition). This case, from the same reporter is linked to 20210534943.; Sender's Comments: V0: 20210544901-covid-19 vaccine ad26.cov2.s -Dropping dead, brain damage, blood clots, heart attacks and strokes. This event(s) are considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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5/26/2021	1349104	NV	30	F			<p>Died; irregular heartbeat; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Died) and HEART RATE IRREGULAR (irregular heartbeat) in a 30-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. unknown) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, the patient experienced DEATH (Died) (seriousness criteria death and medically significant) and HEART RATE IRREGULAR (irregular heartbeat) (seriousness criterion medically significant). The patient died on an unknown date. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, HEART RATE IRREGULAR (irregular heartbeat) outcome was unknown. Concomitant medication and treatment information were not reported. Action taken with mRNA-1273 in response to the event was Not Applicable. Company comment:Limited information regarding the events has been provided at this time and a causal relationship cannot be excluded. Cause of death not reported.; Sender's Comments: Limited information regarding the events has been provided at this time and a causal relationship cannot be excluded. Cause of death not reported.; Reported Cause(s) of Death: Died</p>

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5/26/2021	1349117	NY		M			<p>Dropped dead of a heart attack; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of MYOCARDIAL INFARCTION (Dropped dead of a heart attack) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. Unknown) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient experienced MYOCARDIAL INFARCTION (Dropped dead of a heart attack) (seriousness criteria death and medically significant). The reported cause of death was Heart attack. It is unknown if an autopsy was performed. No concomitant medication was reported. No treatment information was reported. It was reported that patient's funeral was on 11 May 2021. Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. This case was linked to MOD21-090166, US-MODERNATX, INC.-MOD-2021-128463, US-MODERNATX, INC.-MOD-2021-128999 (E2B Linked Report).; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. MOD21-090166: US-MODERNATX, INC.-MOD-2021-128463:Same reporter US-MODERNATX, INC.-MOD-2021-128999;; Reported Cause(s) of Death: Heart attack</p>

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5/26/2021		1349127	KY	22	F	3/19/2021	4/4/2021	found dead; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (found dead) in a 22-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 032m20a) for COVID-19 vaccination. Concurrent medical conditions included Traumatic brain injury, Movement disorder, Seizures (since she was a baby at 11 months old) and Speech loss. Concomitant products included CLONAZEPAM, OXCARBAZEPINE (TRILEPTAL) and GABAPENTIN for an unknown indication. On 19-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 04-Apr-2021 The patient died on 04-Apr-2021. The cause of death was not reported. An autopsy was not performed. Reporter stated that death certificate said the cause of death was natural causes. She did have her yearly physical exam after her first dose with her physician prior to her death and no other health issues were noted at the time of the exam. Very limited information regarding this event has been provided at this time. Further information has been requested.; Sender's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Natural causes
5/26/2021		1351119	MN	66	F	3/24/2021	4/23/2021	Patient presented to the ED on 4/23/21 and was subsequently hospitalized for Acute on chronic respiratory failure with hypoxia and hypercapnia. Patient presented to the ED on 5/5/21 and was subsequently hospitalized for hypertensive urgency and CVA. Patient died on 5/9/21.

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5/26/2021		1349751			U			DIED; This spontaneous report received from a consumer via a company representative concerned a patient of unspecified age and sex. The patient's height, and weight were not reported. No past medical history or concurrent conditions were reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: unknown, expiry: unknown) dose, start therapy date were not reported, 1 total dose administered for prophylactic vaccination. The batch no was not reported ,The company is unable to performed follow up to request batch /Lot numbers .No concomitant medications were reported. It was reported that on an unspecified date, the patient died from covid-19 vaccine ad26.cov2.s. The cause of death was unknown. it was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death); Sender's Comments: V0: 20210546018-covid-19 vaccine ad26.cov2. s Death. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/26/2021		1351018	PR	72	F	1/13/2021	1/17/2021	Loss of apatite, when the time for diaper change arrived, patient was found without vital signs.
5/26/2021		1350509	IN	71	F	4/13/2021	5/16/2021	unknown
5/26/2021		1350521	GA	63	M	3/29/2021	4/30/2021	Patient was hospitalized 5/7/2021 after testing positive for COVID-19 on 4/30/2021. Patient was fully vaccinated. He died 5/18/2021.
5/26/2021		1350670	WY	47	F	2/25/2021	2/25/2021	After first dose her mental status become slightly altered and she leaned to the left a bit when standing up and walking.. From the day of second dose my sisters appetite decreased. She started sleeping more, got weaker to the point I had to bathe her, she had to start using a wheelchair. Mental status much more altered. She was to weak to go to dialysis on Monday March 22 2021 hospice was called in Tuesday March 23 2021 and she passed away at approximately 4:00 P.M. March 24th 2021.

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5/26/2021	1350766	GA	78	F	1/18/2021	5/16/2021	Hospitalization and death
5/26/2021	1350875	IL	81	F	3/9/2021	3/19/2021	My mother, was found deceased on March 19, 2021. Last seen and spoke to on March 18, 2021 around noon or before. After first injections, Pt reported being extremely tired around day 4 and laid down for a nap in the afternoon and woke up the next day in the morning. On the day she was found, it appears she had taken a nap on the couch and never woke up from the nap. This occurred within 10 days after the shot. Possible 9 days if she passed on the 18th. She was found deceased on 3/19/2021 after she didn't answer he apartment door for her meal being delivered.
5/26/2021	1350953	PR	78	F	3/23/2021	4/7/2021	During vital sign inspection, patient presented low saturation, and was taken to the Hospital.
5/26/2021	1350978	MI	78	M	3/2/2021	3/24/2021	78y.o. male with a past medical history of COPD, DM II, and HTN who presented to the hospital's emergency department from an extended care facility. Patient was recently hospitalized and treated with IV antibiotics for HCAP. Patient tested positive for COVID on 3/24/2021. EKG was negative for ischemic signs but patient had an elevated troponin. CXR showed right pleural effusion. Patient was admitted with COVID-19 pneumonia and severe respiratory failure. Patient's oxygenation continued to deteriorate despite Remdesivir, decadron and lovenox. Patient went into respiratory failure and expired from progressive respiratory failure.

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5/26/2021	1349598	OH	17	M	4/19/2021	4/19/2021	he was COVID positive; he was COVID positive; took his own life by hanging himself; slept all day; chills; no appetite; he didn't feel right; diarrhea; sick; headache; tired; This is a spontaneous report from a contactable consumer. A 17-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE, lot number Ew0153), via an unspecified route of administration in the right arm on 19Apr2021 09:00 (at the age of 17-years-old) as a single dose for COVID-19 immunization. The patient had no medical history. The patient had no known allergies. The patient did not have COVID prior to vaccination. The patient had no concomitant medications. The patient previously received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE, lot number Er8730), intramuscularly in the right arm on 29Mar2021 (at the age of 17-years-old) as a single dose for COVID-19 immunization and experienced headache, sore arm, lethargic. The patient did not receive any other vaccines within four weeks prior to the vaccination. On 19Apr2021, the patient received the second dose, and the patient was sick that day, headache/tired, diarrhea. On Tuesday (20Apr2021), the patient slept all day, headache, chills, diarrhea, no appetite, said he didn't feel right. Wednesday (21Apr2021), tired/headache unable to stay online for school, diarrhea, slept for large portion of day. Thursday (22Apr2021), not feeling himself, up more but headache, diarrhea. Friday (23Apr2021) diarrhea - took his own life by hanging himself in the reporter's basement in the morning hours. The patient did not have history or signs of depression, anxiety, or mental illness. The reporter stated the patient was a social, outgoing, happy 17-year-old. A notice from the health department dated 28Apr2021 stated that the patient was COVID positive on an unspecified date. Treatment for the events was reported as paracetamol (TYLENOL). The outcome of took his own life by hanging himself was fatal. The outcome of the other events was not recovered.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021525146 similar report from same reporter; Reported Cause(s) of Death: took his own life by hanging himself
5/25/2021	1348474	FL	90	F	2/10/2021	3/26/2021	Patient Died of Heart Failure unexpectedly.

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5/25/2021	1347547	NJ	20	M	4/15/2021	4/16/2021	The injury that led to the death occurred within 1 day of the decedent receiving the vaccine
5/25/2021	1348290	MI	62	M	5/21/2021	5/22/2021	The patient received the vaccine, but uses the other pharmacy in town for his medications. The pharmacist called me to relay the info he got from the patient's family. He said that the patient had a headache and body aches on Saturday 05/22/2021 and went to bed but did not wake up the next morning.
5/25/2021	1348060	WA	57	M	5/13/2021	5/13/2021	My father in law suffered a heart attacked on the day he received his second shot. at the time of this he was staying in our house where he wasn't found until two days later when we received a call from his work saying he never showed up or called in to work. The medical examiner told us that prior to the second vaccine in the last few weeks he had suffered some sort of heart issue that damaged his heart, but wasn't big enough for him to notice or think anything of it. The timeline the medical examiner gave us would have been after receiving the first vaccine. He then received his second Vaccine on a Thursday which was the last time anyone heard from him and he didn't show up to work Friday and was found Saturday after we were notified he didn't show up to work and we called 911. The medical examiner said he suffered a heart attack. The medical examiner said they had to write the death date on Saturday because that was when he was found, but the last anyone heard of him was prior to getting the vaccine and then he missed work the very next day(which was Friday).

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5/25/2021	1347843	OH	73	F	4/13/2021	4/24/2021	4/21/21 Pt was reportedly admitted to the Hospital for generalized weakness. Her nephrologist noted worsening renal function and had her admitted for hemodialysis. Of note, she had not been able to keep her appointment for mAB due to weakness. At the outlying hospital she had a palliative consult and started dialysis. First day of RRT was 4/24/21. Approximately one hour after dialysis she developed 10/10 CP and her EKG changed from a partial LBBB to a complete LBBB. She was transferred to a different Hospital for further evaluation. Her BP was fairly labile and troponins were positive. Approx 7 hours after arrival, she became unresponsive. Heart rate was very irregular in what appeared to be a fib. Transcutaneous pacing was initiated. She was given several amps of bicarb and started on a dopamine infusion. Her daughter arrived shortly thereafter and the pt became apneic. She was transitioned to comfort care and death was pronounced at 04:13 on 4/25/21.
5/25/2021	1347815	IL	61	M	3/2/2021	3/3/2021	passed away suddenly a day after getting his first Moderna covid vaccine. He got the vaccine said he felt fine other than having a sore arm he has in good spirits and joking around according to his coworkers. He died suddenly a day later circumstances are unknown ,He had passed before he was discovered. No autopsy was done. Aneurysm is suspected.

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5/25/2021	1345770			U			<p>DEATH; This spontaneous report received from a consumer by a other manufacturer company (Pfizer Inc.) via social media post, was received on 14-MAY-2021 and concerned multiple patients (more than 3000). The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: unknown, expiry: unknown) dose, start therapy date were not reported, frequency 1 total dose administered for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. Non-company suspect vaccine included: MRNA 1273 (form of admin, route of admin, and batch number were not reported), dose, start therapy date were not reported for an unspecified indication; and BNT 162 (form of admin, route of admin, and batch number were not reported), dose, start therapy date were not reported for an unspecified indication. No concomitant medications were reported. It was reported that on an unspecified date, more than 3000 patients died from vaccine. The cause of death was unknown. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210541733-covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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5/25/2021		1345689	NY		M			DEATH; UNABLE TO WALK; GOT SYMPTOMS; This spontaneous report received from a consumer concerned a male of unspecified age, ethnicity and race. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, and expiry: Unknown) dose, start therapy date were not reported, 1 total administered, for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, 2 days after receiving the vaccine, the patient got the symptoms (unspecified adverse event), and was unable to walk. The patient died from an unknown cause of death. The reporter stated that the vaccine killed father and wanted to speak to someone from the company about it. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on an unspecified date, and the outcome of unable to walk and got symptoms was not reported. This report was serious (Death).; Sender's Comments: V0: 20210534943- Covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/25/2021		1347808	CA	40	F	4/20/2021	4/28/2021	started with c/o "feels weird in my chest like a pulled muscle", few days later slight short of breath with fatigue, May 2 11:45 cardiac arrest when paramedics placed O2, rounds of CPR and med's, pronounced dead at hospital after attempts of CPR. Out come on death certificate Bilateral Pulmonary Thromboemboli. Coroner stated there were multiple PE's in bilateral lungs. Positive for Covid 19 (Had in Feb, vaccine in April 20)

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5/25/2021	1345716	OH		U			DEATH; This spontaneous report received from a consumer via social media concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, frequency one total ,start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the reporter reported that one patient died post vaccination from unknown cause of death. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died due to unknown cause on an unspecified date. This report was serious (Death). This case, from the same reporter is linked to 20210536753.; Sender's Comments: V0: 20210538476-COVID-19 VACCINE AD26.COV2.S-Death. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/25/2021	1347634		76	M	3/2/2021	3/5/2021	3/5, admitted 3 days after covid vaccine and died. Patient presented to ED feeling very weak and had fallen and could not get up. He was brought to the emergency room, and a trauma evaluation was negative. He was found to have a severe junctional bradycardia with a heart rate in the 20s and systolic blood pressures in the 60s. In addition, he was found to have a creatinine now of greater than 5 when his previously had been in the low 1s. Patient admitted with junctional bradycardia, acute renal failure, hypotension, cardiogenic shock, and acute hypoxemic respiratory failure with high O2 needs. PMH significant for CAD, pulmonary HTN, aortic stenosis, obstructive lung disease, and chronic hypoxia. This patient has been made DNR/DNI over the weekend which is quite appropriate. Patient was found to be unresponsive with fixed/dilated pupils, absent heart and breath sounds, no respiratory effort, absent pulses, and no response to painful stimuli. Patient was pronounced deceased on 03/10/2021 at 0405.

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5/25/2021	1345808	NY	67	F	2/28/2021		Shortness of breath increasing; lethargy; Hyperkalemia; Acute kidney injury; metabolic encephalopathy; Uremia; metabolic acidosis; protein calorie malnutrition; Hyperuricemia; Hyperphosphatemia; Hyponatremia; Anemia; Substernal chest pain aggravated; increasing abdominal girth; Abdominal Pain; Weakness; Nausea; multiorgan failure; This spontaneous case was reported by a physician assistant (subsequently medically confirmed) and describes the occurrence of MULTIPLE ORGAN DYSFUNCTION SYNDROME (multiorgan failure), DYSPNOEA (Shortness of breath increasing), LETHARGY (lethargy), HYPERKALAEMIA (Hyperkalemia), ACUTE KIDNEY INJURY (Acute kidney injury), METABOLIC ENCEPHALOPATHY (metabolic encephalopathy) and AZOTAEMIA (Uremia) in a 67-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 001121A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included Breast cancer stage IV since March 2019, COPD since an unknown date, GERD since an unknown date, Hypertension since an unknown date, Tobacco user since an unknown date, Transaminases increased since an unknown date, Peritoneal carcinomatosis since an unknown date and Metastatic bone disease prophylaxis (Lumbar spine pelvis and proximal femurs) since an unknown date. Concurrent medical conditions included Acute renal failure (Due to Foley catheter placement) and Pneumonitis. On 28-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced MULTIPLE ORGAN DYSFUNCTION SYNDROME (multiorgan failure) (seriousness criteria death and medically significant), DYSPNOEA (Shortness of breath increasing) (seriousness criterion hospitalization), LETHARGY (lethargy) (seriousness criterion hospitalization), HYPERKALAEMIA (Hyperkalemia) (seriousness criterion medically significant), ACUTE KIDNEY INJURY (Acute kidney injury) (seriousness criterion medically significant), METABOLIC ENCEPHALOPATHY (metabolic encephalopathy) (seriousness criterion medically significant), AZOTAEMIA (Uremia) (seriousness criterion medically significant), METABOLIC ACIDOSIS (metabolic acidosis),

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MALNUTRITION (protein calorie malnutrition), HYPERURICAEMIA (Hyperuricemia), HYPERPHOSPHATAEMIA (Hyperphosphatemia), HYPONATRAEMIA (Hyponatremia), ANAEMIA (Anemia), CHEST PAIN (Substernal chest pain aggravated), WAIST CIRCUMFERENCE INCREASED (increasing abdominal girth), ABDOMINAL PAIN (Abdominal Pain), ASTHENIA (Weakness) and NAUSEA (Nausea). The patient was hospitalized on 09-Mar-2021 due to DYSPNOEA and LETHARGY. The patient died on 13-Mar-2021. The reported cause of death was Multiorgan failure. It is unknown if an autopsy was performed. At the time of death, DYSPNOEA (Shortness of breath increasing), LETHARGY (lethargy), HYPERKALAEMIA (Hyperkalemia), ACUTE KIDNEY INJURY (Acute kidney injury), METABOLIC ENCEPHALOPATHY (metabolic encephalopathy), AZOTAEMIA (Uremia), METABOLIC ACIDOSIS (metabolic acidosis), MALNUTRITION (protein calorie malnutrition), HYPERURICAEMIA (Hyperuricemia), HYPERPHOSPHATAEMIA (Hyperphosphatemia), HYPONATRAEMIA (Hyponatremia), ANAEMIA (Anemia), CHEST PAIN (Substernal chest pain aggravated), WAIST CIRCUMFERENCE INCREASED (increasing abdominal girth), ABDOMINAL PAIN (Abdominal Pain), ASTHENIA (Weakness) and NAUSEA (Nausea) outcome was unknown. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 12-Mar-2021, Blood culture: negative (Negative) Negative. On 12-Mar-2021, Blood gases: abnormal (abnormal) Compensated mixed respiratory and Metabolic alkalosis. On 12-Mar-2021, Blood pressure measurement: 96/52 (Inconclusive) 96/52 mmHg, 100/50 (Inconclusive) 100/50 mmHg and 88/58 (Inconclusive) 88/58 mmHg. On 12-Mar-2021, Blood test: normal (normal) WBC-2.9 Normal, Hg-Normal, Platelet count-Normal. On 12-Mar-2021, Body temperature: 36.1 (Inconclusive) 36.1degrees Celsius, 35.9 (Inconclusive) 35.9 degrees Celsius and 36.2 (Inconclusive) 36.2degrees Celsius. On 12-Mar-2021, Brain natriuretic peptide: normal (normal) normal. On 12-Mar-2021, Chest X-ray: normal (normal) No acute thoracic pathology. On 12-Mar-2021, Computerised tomogram: abnormal (abnormal) revealed a right sided pleural effusion bony metastatic disease and hepatic metastatic disease, as

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well as small amount of ascites in the upper abdomen. On 12-Mar-2021, Echocardiogram: inconclusive (Inconclusive) Ejection fraction 60-65% and otherwise no significant findings. On 12-Mar-2021, Heart rate: 92 heart beats per minute (Inconclusive) 92, 86 heart beats per minute (Inconclusive) 86 and 90 heart beats per minute (Inconclusive) 90. On 12-Mar-2021, Oxygen saturation: 96 (Inconclusive) 96 percent, 93 (Inconclusive) 93 percent and 98 (Inconclusive) 98 percent. On 12-Mar-2021, Prothrombin time: normal (normal) normal. On 12-Mar-2021, Respiratory rate: 16 (Inconclusive) breaths per minute, 18 (Inconclusive) breaths per minute and 19 (Inconclusive) breaths per minute. On 12-Mar-2021, SARS-CoV-2 test: negative (Negative) Negative. On 12-Mar-2021, Troponin: normal (normal) normal. On 12-Mar-2021, Urine analysis: normal (normal) normal. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter considered MULTIPLE ORGAN DYSFUNCTION SYNDROME (multiorgan failure), DYSPNOEA (Shortness of breath increasing), LETHARGY (lethargy), HYPERKALAEMIA (Hyperkalemia), METABOLIC ENCEPHALOPATHY (metabolic encephalopathy), AZOTAEMIA (Uremia), METABOLIC ACIDOSIS (metabolic acidosis), MALNUTRITION (protein calorie malnutrition), HYPERURICAEMIA (Hyperuricemia), HYPERPHOSPHATAEMIA (Hyperphosphatemia), HYPONATRAEMIA (Hyponatremia), ANAEMIA (Anemia), CHEST PAIN (Substernal chest pain aggravated), WAIST CIRCUMFERENCE INCREASED (increasing abdominal girth), ABDOMINAL PAIN (Abdominal Pain), ASTHENIA (Weakness) and NAUSEA (Nausea) to be possibly related. No further causality assessment was provided for ACUTE KIDNEY INJURY (Acute kidney injury). Concomitant medications were not provided. Treatment for the events included proton pump inhibitors, oxygen, Tylenol, and comfort care. Company comment: Based on current available information and the temporal association between product use and the start date of the events a causal relationship cannot be excluded.; Sender's Comments: Based on current available information and the temporal association between product use and the start date of the events a causal relationship cannot be excluded.; Reported Cause(s) of Death: multiorgan failure

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5/25/2021	1345844	CO		F			<p>Patient died 2 hours after getting the vaccine; This spontaneous case was reported by a non-health professional and describes the occurrence of DEATH (Patient died 2 hours after getting the vaccine) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant products were reported. The reporter was worried about the administration of the vaccine and wanted to know if there was a way for someone to help their community. Reporter had contacted everyone in Public health department of the rural hometown. With the amount of adverse reactions with vaccine reporter was concerned that the vaccine was not being stored properly or not been given properly and further reported that one person died and they were not reporting it because they did not trust the government. A patient died two hours after getting the Moderna vaccine. No treatment information provided. This is a case of sudden death in a female patient who died 2 hours after receiving a dose of vaccine. Very limited information regarding this event has been provided at this time.; Sender's Comments: This is a case of sudden death in a female patient who died 2 hours after receiving a dose of vaccine. Very limited information regarding this event has been provided at this time.; Reported Cause(s) of Death: Unknown cause of death</p>

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5/25/2021		1345947	NY		U			BLOOD CLOTS; This spontaneous report received from a consumer by a other manufacturer company (Pfizer Inc.) received on14-MAY-2021 and concerned multiple (few) patients. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) frequency 1 total, dose, start therapy date were not reported for prophylactic vaccination. No concomitant medications were reported. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. Reporter stated that Johnson and Johnson vaccine caused blood clots and few people died. It was not reported whether autopsy was performed. On an unspecified date, the patients experienced blood clots. On an unspecified date, the patients died from blood clots. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0; 20210545044-covid-19 vaccine ad26.cov2. s Blood clots. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: BLOOD CLOTS
5/25/2021		1346604		79	F	3/1/2021	5/12/2021	death J18.9 - Bilateral pneumonia
5/25/2021		1346657	LA	19	M	2/18/2021	2/19/2021	Found deceased in bed, no known symptoms, undetermined cause and manner of death
5/25/2021		1346714	VA	85	M	4/26/2021	5/7/2021	death J18.9 - Pneumonia, unspecified organism shortness of breath chest pain
5/25/2021		1346723	CO	102	M	5/25/2021	5/25/2021	Patient contracted covid 2 months after receiving the full vaccine series. He was admitted the hospital and subsequently passed away. Variant testing was conducted (results are pending) and antibody testing was done. Antibody testing showed no antibodies were produced in response to the vaccine.

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5/25/2021	1347530	FL	53	M	5/18/2021	5/23/2021	5 days after COVID-19 vaccine, patient had a sudden unexpected cardiac arrest and died at his home after long resuscitation attempts by EMS.
5/25/2021	1346738		78	F	3/6/2021	5/16/2021	death E87.1 - Hypo-osmolality and hyponatremia N17.9 - Acute kidney failure, unspecified
5/25/2021	1346804		75	F	3/4/2021	5/12/2021	death N17.9 - Acute kidney injury WEAKNESS - GENERALIZED
5/25/2021	1347081	PA	53	M	4/27/2021	4/28/2021	Patient complained of exhaustion and malaise within 24 hours of receiving the dose. This never resolved. Three weeks later he complained of the same exhaustion and malaise. Jaw pain was reported on 5/23/2021. Patient found deceased 5/24/2021 at age of 53.
5/25/2021	1347105	CA	26	M	4/20/2021	5/1/2021	Found dead on May 3, 2021. Question day of death 05/01/2021. Medical examiners case. Cause pending, possible SUDEP.
5/25/2021	1347148	CT	65	M	3/30/2021	3/31/2021	Heart pain/ chest pain. Hard to breathe Lack of energy Swollen legs Erratic heart rate Outcome: death 3 days after. Heart failure
5/25/2021	1347160	OR	37	M	2/2/2021	5/19/2021	fall on May 19 and admitted to ER May 22 with subacute R MCA stroke resulting in obtundation and left sided hemiparalysis. Complicating his presentation is acute COVID 19 infection with pneumonia along with acute on chronic systolic congestive heart failure.
5/25/2021	1347172	MN	79	M	3/9/2021	3/21/2021	Unexpected Death
5/25/2021	1347211	PR	94	F	3/26/2021	4/18/2021	Dies at the Hospital do to a respiratory arrest.

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5/25/2021	1345714			F			HEART ATTACK; This spontaneous report received from a consumer via a company representative, concerned a female patient of unspecified age, race and ethnic origin. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration was not reported, batch number: unknown and expiry: unknown) dose and therapy start date were not reported, 1 total, administered for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date, in 2021 (11 hours post vaccination), the patient died due to heart attack. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of heart attack was fatal. This report was serious (Death).; Sender's Comments: V0 20210538222-covid-19 vaccine ad26.cov2.s-Myocardial infarction. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: HEART ATTACK
5/25/2021	1346731	VA	68	M	4/6/2021	5/15/2021	death R65.10 - SIRS (systemic inflammatory response syndrome) (CMS/HCC) N17.9 - Acute kidney failure, unspecified SHORTNESS OF BREATH LEG SWELLING ASCITES
5/24/2021	1343471	IL	84	M	2/24/2021	5/7/2021	Death within 90 Days
5/24/2021	1343436	CA	82	F	2/10/2021	2/19/2021	2-27-21 Heart pain, transported to ER 2x in 2 days. Within 2 days, her Liver and Kidney function failed. and Acute Hypoxic Respiratory Failure and Cardiogenic Shock were listed as cause of death on 3-3-21
5/24/2021	1343387	OR	65	M	5/11/2021	5/21/2021	Patient died of a myocardial infarction.
5/24/2021	1343315	OH	57	F	3/22/2021	5/20/2021	left MCA infarct

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5/24/2021		1343266	CO	55	M	4/1/2021	4/18/2021	On 4-18-21, 17 days after 1st dose of Moderna, he developed upper abdomen pain, chest discomfort. He thought it was indigestion and treated it as such. When he got no relief he went to Emergency room where a cardiac alert was initiated. After he died I was told he had developed myocarditis/pericarditis and they had to remove a liter of blood from the sac around his heart, but that his heart had gone into cardiogenic shock and that he died. They were prepared to insert a stint thinking he had a blocked coronary artery, but his arteries were clear and they had no idea what had caused this to happen. When he died so soon after the vaccine there were people who wanted to blame the vaccine but I checked into it and there were NO links between the vaccine and myocarditis, pericarditis or cardiogenic shock. Within a few weeks of his death, there began to be possible links between the vaccine and myocarditis. I know 55 is older than what is being looked at, but he had absolutely no previous cardiac history prior to this and this case should e looked at as well
5/24/2021		1343488	IL	94	M	2/24/2021	5/10/2021	Death within 90 days
5/24/2021		1343001	NJ		F	2/27/2021	3/1/2021	Went to er on March 3rd around 2am with discoloration on body with confusion and pain. Was told possible ttp. Condition quickly declined and was transferred to hospital main campus around 12pm. Condition continued to rapidly decline and passed away on March 4th at 11am. There is much more to tell about this. To much to write down. I have called several times no one has called me back.
5/24/2021		1344055	IL	90	F	1/29/2021	2/6/2021	one week after 1st vaccine shot, mom started to feel sick around lunch. Took mom to hospital she had a heart attack. They dissolved the blood clot and found out she also had pneumonia with no symptoms. She died 2 weeks later. She had dementia but health was fine until she received the covid 19 vaccine.
5/24/2021		1343241	FL	60	M	3/29/2021	5/3/2021	Outcome : patient died Cause : cardio respiratory arrest Had previously tested for any heart problem but his heart was in excellent conditions
5/24/2021		1343500	IL	87	F	2/3/2021	4/15/2021	Death within 90 Days

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5/24/2021	1343527	IL	94	F	3/19/2021	5/8/2021	Death within 90 days
5/24/2021	1343571	TN	46	M	4/7/2021	4/28/2021	Patient received their J&J vaccination on 4/7/2021. The patient's wife tested positive on 4/12/2021. The patient tested positive on 4/23/2021. The patient presented to the ER with a severe progressive cough (starting one week prior), worsening shortness of breath, a high fever, chills, myalgias, and malaise. The patient was diagnosed with COVID pneumonia and ARDS with hypoxia and given Lovenox, remdesivir, and dexamethasone, tessalon, and Brovana. The patient was admitted on the 23rd and continued to decline until their eventual passing on 4/28/2021.
5/24/2021	1343614	VT	23	F	5/18/2021	5/20/2021	presented to ED dept confused, incr n/v, weakness. Received palliative carex4 days. deceased 05/24
5/24/2021	1344052	CA	73	F	5/20/2021	5/21/2021	Complicated young elder with AICD for recurrent Vtach who was found unresponsive around 20 hours after vaccine; Based on the defibrillator interrogation she had sustained ventricular tachycardia that was properly identified and treated by the device but which did not respond to device discharge, degenerated into ventricular fibrillation and unfortunately could not be terminated by her ICD. Not clear related to vaccine
5/24/2021	1344282	NY	52	F	5/21/2021	5/22/2021	received the vaccine as an inpatient in our hospital on 5/21/21. Patient went into cardiac arrest on 5/22/21 at approximately 9:00am
5/24/2021	1345049	CA	77	M	1/1/2021	3/1/2021	Venous thrombosis leading to strokes.
5/24/2021	1343543	IL	84	M	2/23/2021	4/13/2021	Death within 90 Days
5/24/2021	1343926		64	M	4/17/2021	5/7/2021	Patient presented to the ED on 5/7/21 with CVA. He was hospitalized on 5/8/21 for 12 days, and died on 5/20/21.
5/24/2021	1343514	IL	104	F	2/25/2021	4/25/2021	Death within 90 Days

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5/22/2021		1340339	MA		U	4/18/2021	3/28/2021	<p>Baby stopped growing 5 days after shot, confirmed with ultrasounds on 4/26 and 5/6; Maternal exposure during pregnancy, first trimester; This is a spontaneous report from a contactable consumer (fetus's mother). This consumer reported information for both mother and fetus. This is the fetus report. A patient (fetus) mother (35-years-old) received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Arm Left on 18Apr2021 09:15 (Batch/Lot Number: EW0164) at the age of 35-years-old as single dose, dose 1 via an unspecified route of administration, administered in Arm Left on 28Mar2021 15:00 (Batch/Lot Number: Er8732) at the age of 35-years-old as single dose for covid-19 immunisation. Route of the administration for fetus was provided as Transplacental. The patient's mother medical history was not reported. The patient's mother's concomitant medication included estradiol (ESTRACE) taken for an unspecified indication, start and stop date were not reported; progesterone taken for an unspecified indication, start and stop date were not reported. The patient's mother did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The baby experienced maternal exposure during pregnancy, first trimester from 28Mar2021 15:00. On 23Apr2021, 14:00, the mother experienced miscarriage, the baby stopped growing 5 days after shot 23Apr2021 14:00, confirmed with ultrasounds 26Apr2021 and 06May2021, the event resulted in doctor or other healthcare professional office/clinic visit, there was no treatment for event. Mother's Last menstrual date was 10Mar2021. The outcome of the events was fatal.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021509131 mother case; Reported Cause(s) of Death: Baby stopped growing 5 days after shot, confirmed with ultrasounds on 4/26 and 5/6; Maternal exposure during pregnancy, first trimester</p>
5/22/2021		1340773	FL		60 M	5/3/2021	5/6/2021	<p>Pulmonary Embolism, Died on way to hospital, medical examiner report pending</p>

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5/22/2021	1340228	WA		F			DEATH; This spontaneous report received from a consumer concerned four female patients. The patient's weight, height, and medical history were not reported. The patient received Covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, 1 total dose was administered, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company was unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On unspecified date in 2021, the patients died from unknown cause of death after vaccination. The autopsy details were not provided. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). This case, from the same reporter is linked to 20210320422.; Sender's Comments: V0- 20210536600- Covid-19 vaccine ad26.cov2.s-death.This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/22/2021	1339062	SC	85	M	4/15/2021	5/4/2021	Patient appeared to have had suffered a stroke. Admitted to hospital, tests determined no stroke. Patient had pneumonia, and severe inflammatory response. Sepsis.

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5/22/2021	1340500	CT	55	F	3/2/2021	3/3/2021	<p>She aspirated and she was dead within week on respirator; she aspirated and she had pulmonary problem to begin with; 3 convulsions within 24 hours of having her first Pfizer / three grand mal compulsive seizures; This is a spontaneous report from a contactable physician. A 55-years-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 02Mar2021 (Batch/Lot number was not reported, vaccinated at the age of 55 years old) as single dose for covid-19 immunisation. Medical history included epilepsy, myocardial metabolism disorder. She has a myocardial metabolism disorder, very specific one and it is A467T mutation in the polymerase gamma gene and that is because of her epilepsy. It was because of that it's a progressive disease get involved with many part of the body that is all so causes seizure. Concomitant medications included clobazam; lamotrigine; escitalopram; amitriptyline; calcium folinate (LEUCOVORINE); lorazepam; mesalazine; butalbital, caffeine, paracetamol (FIORICET); vitamin b2 [riboflavin] (VITAMIN B2 [RIBOFLAVIN]); ubidecarenone (COQ10 [UBIDECARENONE]); l-carnitine [levocarnitine]; vitamin b complex (B COMPLEX [VITAMIN B COMPLEX]); vitamin a [retinol]; vitamin c [ascorbic acid], all taken for an unspecified indication, start and stop date were not reported. The patient previously took sulphur, nepatop, dilantin [phenytoin], prednisone, and lidocaine and all experienced hypersensitivity. The patient had received 3 convulsions within 24 hours of having her first Pfizer and she had epilepsy like she has been suffering from years and she aspirated and she was dead within week on respirator. She had three grand mal compulsive seizures and because of the seizures; she aspirated and she had pulmonary problem to begin with. She was put on a respirator and she was on respirator from the day she was admitted and she probably died within about two days. when the vaccination was, precise 24 hours later she had three grand mal compulsive seizures and because of the seizures she aspirated and she had pulmonary problem to begin with. She had 3 convulsive seizures that stayed for about 10 minutes and she had not, she normally would have the focal seizure just in her left arm. She has not had it big seizure in probably 20 years. The physician stated that don't know what killed</p>

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her was not seizure when she wasn't he hospital she was intubated and she was alive. What killed her was she was aspirated and they could not get her off the respirator and she did not have COVID. When she was admitted to the hospital they did a lot of blood test. Before that, her cortisone level usually runs about 200, with metabolize of 700, and her lamotrigine level runs about between 4 and 8.5 of all other routine her Full blood count (CBC) routine is quite normal. It was not reported if an autopsy was performed. Outcome of events Grand mal seizure and Pulmonary disorder was unknown. Information on batch number has been requested.; Sender's Comments: Based on the available information and known product profile, the causal relationship between the reported seizures along with the consequent aspirations which lead to death and the use of BNT162B2 cannot be fully excluded. However, it is noted that the patient has multiple comorbidities which confound the reported drug event pairs. 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: She aspirated and she was dead within week on respirator

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5/22/2021	1340510	AL	79	F	2/1/2021	2/1/2021	deceased alone at home; Constant Complaints of severe chest pains after taking the first shot and she was found deceased alone at home clutching a hot water bottle to her chest; This is a spontaneous report from a contactable consumer. A 79-years-old female patient (not pregnant) received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration, administered in Arm Left on Feb2021 (Lot Number: EL8982) as 1ST DOSE, SINGLE for covid-19 immunization. The patient medical history was none. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. The patient's concomitant medications were not reported. On Feb2021, the patient experienced constant complaints of severe chest pains after taking the first shot and she was found deceased alone at home clutching a hot water bottle to her chest. Since the vaccination, the patient has not been tested for COVID-19. The patient died on an unspecified date. It was not reported if an autopsy was performed. The outcome of chest pain was not recovered.; Reported Cause(s) of Death: deceased alone at home

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5/22/2021	1340513	CA		M	4/1/2021	4/1/2021	lose his life after the vaccine; Passed out; swelling and pain in his side of his arm; swelling and pain in his side of his arm; asthma trigger; allergies; This is a spontaneous report from a contactable consumer (patient's wife). A male patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) dose 1 via an unspecified route of administration on Apr2021 (Batch/Lot number was not reported) as 1st dose, single for covid-19 immunisation. The patient medical history included bad allergies and has asthma. Concomitant medications were not reported. He lose his life after the vaccine in Apr2021. He took the vaccine in Apr2021. After 3 days he took the vaccine on Tuesday, then Friday he was gone, that first dose. That day he died, he had like the asthma trigger like 10 minute after then he passed out but Thursday he was saying that he had like swelling and pain in his side of his arm. He had night shift and then morning came, Friday came home and then he ate and then he slept and then he woke up at 10 am just to go to kitchen and thought he was saying like having had allergies and 10 minutes then he passed out and then that was it. The reporter was just wondering how come, he still passed. Seriousness for lose his life after the vaccine was reported as death. The outcome of event lose his life after the vaccine was fatal and other events was unknown. The patient died in Apr2021. The cause of death was unknown. It was unknown if an autopsy was performed. Information on the Lot/Batch number has been requested.; Reported Cause(s) of Death: lose his life after the vaccine

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5/22/2021	1340672	OH	63	F	4/1/2021	4/3/2021	Patient went to ER 4/4/21 with severe headache, inability to stay awake. CT scan of the head revealed multiple areas of SAH (unexplained no head injury) and a very large ruptured MCA aneurysm. Patient was COMPLETELY asymptomatic prior to vaccination. The aneurysm was repaired with success but the cerebral hemorrhages kept appearing - unexplained. Cerebral edema became so severe (midline shift up to 9-10mm) neurosurgery ended up performing a burr hole craniotomy to relieve pressure as well as placement of a ventriculostomy. This patient later ended up with severe vasospasms which results in an ischemic stroke of the L frontal lobe. Patient later died in a rehabilitation facility, all of this secondary to the Janssen vaccine. This vaccine should not be administered until further studied. This was a healthy 63 year old woman. Vitals always WNL labs WNL very active, BMI WNL. Absolutely NO comorbidities. A lifelong nurse who raised 2 nurses of her own. These events took place for over a month. The trauma not only the patient has experienced but her family is unforgivable.
5/22/2021	1340758	WY	71	M	4/9/2021	5/1/2021	My dad started having breathing problems and heart fluttering shortly after getting his first covid vaccination on April 9, 2021. He had contracted Covid back in October 2020. He never told us he was getting the vaccination until we got a call on his cell phone from Public Health the day after he died of a pulmonary embolism. When he started complaining of symptoms, his doctor referred him to a cardiologist at a Clinic. He had an appointment with them a few days before he died. Apparently, they didn't find any blood clots, possibly because they were looking for heart issues. Either way, I believe that my dad died from side effects of the Moderna vaccine. My dad died on May 1, 2021 of a pulmonary embolism. The coroner and County Sheriff both said it was one of the biggest blood clots they had ever seen. Since he had no history of blood clots, I thought it important that I report it.
5/22/2021	1341218	CA	90	M	2/19/2021	2/19/2021	Within hours of receiving the second Moderna vaccine, the patient began experiencing excruciating pain in his lower back and sciatica. Consensus among the health professionals he saw is that the second vaccine triggered an inflammatory response. The pain did not respond to medication physical therapies.

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5/22/2021	1340821	NH	60	F	4/6/2021	4/26/2021	Please check with her doctors. I know she mentioned Myocarditis. She was vaccinated I am correct, on March 8 and April 6, 2021
5/22/2021	1339098	AZ	72	F	3/22/2021	4/11/2021	Massive stroke from huge clot right of brain. Never regained con..
5/21/2021	1338586		70	M	3/4/2021	3/27/2021	death I21.4 - Non-ST elevation (NSTEMI) myocardial infarction
5/21/2021	1338341	ND	83	M	5/11/2021	5/11/2021	Resident was found deceased in the evening of 5/11/21.
5/21/2021	1338394		39	M	4/7/2021	5/7/2021	Death N17.9 - Acute kidney failure, unspecified FATIGUE CHEST PAIN NAUSEA
5/21/2021	1338402	VA	49	M	3/28/2021	4/11/2021	U07.1 - COVID-19
5/21/2021	1338572		69	F	3/5/2021	5/3/2021	Death E87.1 - Chronic hyponatremia N17.9 - AKI (acute kidney injury) (CMS/HCC) J18.9 - Pneumonia of right lower lobe due to infectious organism
5/21/2021	1338590		76	F	3/5/2021	4/29/2021	Death Thrombocytopenia Subdural bleeding HEADACHE DIZZINESS
5/21/2021	1338605		80	F	3/12/2021	3/21/2021	Death Acute kidney injury
5/21/2021	1338610		82	M	2/27/2021	4/20/2021	Death J18.9 - Pneumonia, unspecified organism
5/21/2021	1338617	MI	77	F	5/19/2021	5/21/2021	Death of patient two days after second injection.

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5/21/2021		1338625	NM	32	F	5/20/2021	5/21/2021	Outcome: unexpected/unexplained death Had first dose Moderna Vaccine 3/31/21. She described body aches and mild fever ? ?like I had COVID again for a day? ? lasting about 36 hours, and then felt fine. Had dose # 2 Moderna vaccine about 6:50 PM at Community vaccination site. She was driver, received left deltoid injection from Doctor. During observation period reported no symptoms, was happy and talkative with family and staff. Family reports later that evening she did not feel well ? ?just not hungry? and wanting to lie down. Slept well, then woke up feeling better except for left arm achiness at injection site. Did not report redness, rash, or any difficulty breathing. Was talkative, walking around, took a shower, and was planning to drive to the grocery store later that day. Mid morning ? maybe beginning about 11 AM, family said she went in and out of bathroom several times. She told them she had vomited three times and was feeling shaky. Her oral temperature was 101.3. About 1:30 PM, she was in her room and called out for her mother. When family went into the room, she was shaking ?like she was having a seizure? and then her eyes rolled back and she fell to her side and stopped breathing. Family called 911 and started CPR. CPR was continued by EMT's once they arrived, but they were not able to resuscitate her.
5/21/2021		1337824	CO	66	M	5/21/2021	5/21/2021	foaming at the mouth and had a heart attack
5/21/2021		1338618		84	M	4/21/2021	5/14/2021	death N17.9 - Acute kidney failure, unspecified
5/21/2021		1337502	KS	67	F	5/20/2021	5/21/2021	Death, code blue at home, received COVID vaccine 5/20/21. No known health issues
5/21/2021		1336534		68	F	4/16/2021	5/10/2021	NA Acute Systolic AFIB Pancreatic cancer Heart Failure
5/21/2021		1336582		68	F	4/8/2021	5/17/2021	NA PAD, Coronary Artery Disease
5/21/2021		1336695	WI	78	F	3/25/2021	4/11/2021	Patient presented to the ED and was subsequently hospitalized within 6 weeks of receiving COVID vaccination. Diagnoses were pneumonia, A-fib and hyponatremia. Patient died on 4/21/2021

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5/21/2021	1336774	NC	59	F	3/26/2021	5/13/2021	Patient developed fever, dyspnea and headache on 5/12/2021; tested positive for COVID-19 on 5/12/2021; patient died on 5/20/21
5/21/2021	1337019	IA	73	F	4/2/2021	5/17/2021	unknown
5/21/2021	1337058	NJ	52	M	3/26/2021	3/27/2021	The patient had Covid 19 from approximately January 28, 2021 through early February 2021. He received the first dose of the Pfizer Vaccine on March 26, 2021. On March 27, 2021 at approximately 7:30 PM, the patient suddenly became unable to speak clearly and walk normally. The ambulance was called at approximately 7:45 PM. The patient was evaluated and placed in the ambulance by approximately 8:15 PM. He stopped breathing in the ambulance. He was resuscitated and placed on a ventilator at some point. After evaluation at the hospital, it was found that he had suffered a pontine hemorrhage. He was kept alive until his heart stopped on March 29, 2021.
5/21/2021	1337097	FL	61	M	5/20/2021	5/21/2021	pt received Johnson and Johnson vaccine on 5/21/2021, PT had been complaining of shortness of breath since getting the vaccine yesterday and today, pt collapsed at home, wife started CPR, EMS continued compressions and ACLS protocol when they arrived to ED he was in Vfib, After multiple shocks, Epinephrine, bicarb, lidocaine and multiple other life saving medications were administered to no avail, pt expired on 5/21/2021 at 1729
5/21/2021	1337198	KY	30	M	4/1/2021	5/7/2021	Patient presented to ED after receiving covid vaccination the month prior, with hemoptysis, petechiae, blood in stool and urine, and platelets . Prior to this, patient presented to the ED on 4/30 with kidney stone, no other significant PMH and prescribed medications mentioned on prior page. Suspected ITP, patient received IVIG x 3 days and prednisone x 4 days while admitted. On morning of 5/11, patient had AMS, became unresponsive and was evaluated for stroke. Patient had large intra-axial hemorrhage with significant midline shift, transferred to the Hospital and died the same day.

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5/21/2021	1337251	OH	67	M	4/15/2021	5/16/2021	To ED via ambulance for chest pain and shortness of breath. Decompensated during transport, hypoxic, cyanotic, hypotensive. Intubated in ED. CTA of chest positive for saddle embolism. 1/2 TPA/heparin given. Admitted to ICU. Change in mental status, CT of head showed intracranial hemorrhage. Patient had reportedly been sick about a week or 2 earlier, covid positive PCR on admission to hospital.
5/21/2021	1337366	NY	81	M	5/20/2021	5/20/2021	Resident received vaccine at 10am and was observed for 15 minutes post vaccine with no reaction noted. Pre and post vitals were at baseline. Upon rounds at 12pm, nurse noted resident with increased respirations and an elevated temperature (Resp 40, Temp 103.5). Nurse notified nursing supervisor and MD called. Patient was transferred via 911 to Hospital at 12:25pm.
5/21/2021	1337951	NY	40	M	5/12/2021	5/13/2021	patient expired 1 day after receiving 2nd dose of Moderna vaccine
5/21/2021	1337481	TN	89	F	5/19/2021	5/21/2021	Resident had been experiencing cognitive decline over approximately the last month. Resident was treated for UTI on 4/29/21, labs were obtained on 5/3/21 and were unremarkable. Resident had seizure like episode at approximately 0830, resident was DNR Comfort Measures and resident's family did not want resident sent to hospital. Resident expired at 0920 on 5/21/21.
5/21/2021	1337918	MO	69	M	4/9/2021	5/14/2021	Unaware of any adverse events between administration and death. Reporting agency became aware of patient's expiration on 05/14/2021.
5/21/2021	1337556		75	F	3/26/2021	5/14/2021	Stage IV Pancreatic Cancer
5/21/2021	1337585		68	F	4/15/2021	4/22/2021	NA COPD, MALT lymphoma, HTN
5/21/2021	1337619		71	F	2/21/2021	5/14/2021	NA End Stage Kidney disease DM Neuromuscular disease
5/21/2021	1337634	KY	79	F	5/14/2021	5/15/2021	had second dose on 5/14/21, passed away during the night of 5/15/21. Found dead on 5/16/21 morning
5/21/2021	1337675		73	M	4/16/2021	5/1/2021	NA Left Upper Lobe Lung CA COPD

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5/21/2021		1337701	AR	64	F	4/16/2021	5/18/2021	64 y.o. female who presented with SOB. She has a history of CAD, diabetes, CHF, CKD and DVT presents to the ED in respiratory distress. Patient was brought in by EMS from nursing home. Patient had reported onset of shortness of breath and respiratory distress over the last 6-7 hours. Patient has O2 sat of 90% on 6 L. Patient only uses 2 L nasal cannula oxygen all day long. Patient is coherent and initially was placed on BIPAP but then stated she wanted to go back, now after ER doc spoke to her she is ok with being admitted but does not want BIPAP or to be placed in the ICU. She is DNR/DNI. She is working hard to breathe currently. Patient is unsure if she is making urine at this time. Workup in the ER revealed AKI on CKD and covid + pneumonia. Patient elected hospice and expired 5/20/2021. It was reported that patient had received vaccines at Walmart.
5/21/2021		1337728	IN	65	F	4/27/2021	4/29/2021	Intestinal distress ending in dead gut syndrome
5/21/2021		1337755	KY	74	M	1/29/2021	5/9/2021	Person died on 5/9/2021, with death note listing acute and chronic respiratory failure with hypoxia, COVID-19, paroxysmal atrial fibrillation, chronic heart failure with reduced ejection fraction, follicular lymphoma, history of CABG, hyperglycemia, and type 2 diabetes.
5/21/2021		1337780	KY	72	F	3/8/2021	5/7/2021	Person died on 5/7/2021 with death note stating acute respiratory failure with hypoxia, thrombocytopenia.
5/21/2021		1337723	WI	36	M	5/13/2021	5/18/2021	PATIENT WAS IMMUNIZED 5/13. PATIENT WAS FOUND DECEASED IN THEIR APARTMENT ON 5/18. FAMILY LAST SAW HIM ON 5/16 WHEN THEY DROPPED HIM OFF AT HIS APARTMENT. MEDICAL EXAMINER HAS NOT YET DETERMINED CAUSE OF DEATH OR EXACT DATE OF DEATH.

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5/21/2021		1337439	TN	39	M	4/28/2021	5/11/2021	ACCORDING TO DAD, HE GOT THE VACCINE ON 4/28/21. ON MAY 11 HE WAS COMPLAINING OF N/V, LATER HEADACHE AND ALTERED VISION, ENCEPHALOPATHY, CARDIAC ARREST AND DEATH.... AFTER MULTIPLE LOCAL ER VISITS. HE NEVER HAD FEVER. I WAS CALLED ON HIS CASE DUE TO CONCERN FOR CNS INFECTION. HE WAS ADMITTED ON 5/18 AND DIED ON 5/20 THIS MAY OR MAY NOT BE RELATED TO THE COVID VACCINE, BUT IT IS IMPORTANT IT IS REPORTED JUST INCASE IT IS AND MAY HELP SOMEONE.
5/21/2021		1337689	CT	68	F	4/26/2021	5/21/2021	Health district notified by Police Dept. that a homebound resident who received first dose of Moderna on 4/26/21 and was due for second dose moderna on 5/24/21 was found deceased at home on 5/21/21.
5/20/2021		1334600	WI	75	M	3/13/2021	4/30/2021	Patient passed away on 4/30/21. Wife reports that on 4/29/21, she found him in the garage in a "pool of blood, face down" after a fall. Upon finding him on 4/29/21, she took him to the emergency room where he had a CT scan. Patient was diagnosed with a "concussion" and sent back home, and was instructed to follow-up with his primary care provider on 4/30/21. On 4/30/21, patient was "sleepy all day." On his way out of the house around 3:30, he suddenly put his hand on his wife and proceeded to collapse. The wife also fell, and by the time she gathered herself and went to check on her husband, he had passed away. An ambulance came to the house; CPR was performed for 40 minutes but "they could not get him back." He was not transported to a medical center. An autopsy was not done, but the coroner informed patient's wife that he likely died from a "clot, maybe a PE." Wife wonders how this could be, since he was on Plavix for 5 years. Wife does not feel that the COVID vaccine is to blame, but thought she should report the issue just in case. This writer is assisting wife of patient to fill out electronic report.
5/20/2021		1336097	IL	59	M	3/1/2021	3/1/2021	Vfib arrest
5/20/2021		1334038		76	M	4/1/2021	4/28/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series

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5/20/2021	1334068	CO	62	M	5/8/2021	5/8/2021	Patient was provided with the COVID-19 vaccine outside of the hospital and began having shortness of breath approximately 15-20 minutes after receiving the vaccination. In route home, the patient could not catch his breath. The patient was found slumped over at home. EMS arrived and the patient received ACLS and ROSC was achieved. Days later, the patient arrested again and passed away on 5/13/21.
5/20/2021	1334174	NE	44	M	4/30/2021	5/13/2021	Health department received notification that patient expired unexpectedly while operating a vehicle. No known link to vaccination at this time, but reported as it occurred on day 13 post-vaccination.
5/20/2021	1334199	MO	80	M	3/3/2021	3/7/2021	NIECE CALLED TO LET US KNOW PATIENT EXPIRED 3 DAYS POST VACCINE SHOT. NIECE STATED PATIENT HAD BREATHING ISSUES AND NOTES MENTION HEART ISSUES.
5/20/2021	1334283	LA	74	M	4/3/2021	4/4/2021	Patient felt very weak, body aches, shortness of breath and was found deceased at home on 5/10/2021
5/20/2021	1333939	SC	83	M	5/19/2021	5/19/2021	The resident was administered his second COVID vaccine (Moderna) on 5/19/21 at 9:30am. Per nursing, the resident tolerated the vaccine well and no problems were documented throughout the day. At 10:00pm the nurse who administered the vaccine recorded the resident's vitals as follows: BP 118/68, HR 72, Respiration 18, Temperature 97.0 F. At 10:20am the resident's CNA discovered him lifeless with vomitus around his mouth and neck. The resident was not breathing, bluish in color, and cool to the touch. Vital signs were checked and no pulse was detected. CPR was attempted with not effect.

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5/20/2021	1334527	CA	28	M	5/4/2021	5/10/2021	My brother got the Pfizer 5/4 and started getting sick with a cough on the 7th and by the 10th he was getting more and more sick and ye was taken to the ER on the 14th and he started coughing up blood, he was out of it and pale and not able to move much. On 5/15 in the hospital he was having a hard time breathing and they were trying to give him meds to make him better, they gave him antibiotics because his blood work showed infection, and Precedex to help him rest, and he passed away the same day, he was in good health before. They also said his heart rate was 201/123 and the doctors said pulmonary anema. It escalated so quickly.
5/20/2021	1333759	FL	79	F	4/5/2021	4/7/2021	My mom, patient was a health 79 year old women, only two health issues were COPD and moderate dementia. She had even gotten her annual labs done recently which came back all with in normal range, she as far as we knew did not have any issues with her heart. After her first vaccination in March she started to lose interest in things and didn't have energy to be as active as she was. After the second shot with in two days she started to report pain in chest and head and trouble breathing, She went to her PCP on 5/12 and he wanted her to go to a cardiologist, this referral was made but by the 16th she was in the ER due to extreme chest pain and trouble breathing, a stent was placed in her heart on 4/17/21 my mom's 80th birthday. with in 4 days she died. Her heart just deteriorated. i feel that if she didn't get this shot she would be alive today, she was healthy, now she is dead.
5/20/2021	1334684	MO	57	M	5/18/2021	5/18/2021	Systemic: death (unknown cause)-Severe, Additional Details: Patient was found deceased roughly an hour and a half after receiving Moderna vaccine. He waited 20 minutes at the pharmacy and left however later died. Details are unknown. Sister may have more information.

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5/20/2021	1334834	WV	67	F	4/3/2021	4/3/2021	<p>Caller stated his wife passed out and hit her head on the floor; hit her head on the floor and split it open; transferred to hospital due to cardiac complications; fall; His wife passed away; This spontaneous case was reported by a patient family member or friend (subsequently medically confirmed) and describes the occurrence of DEATH (His wife passed away), LOSS OF CONSCIOUSNESS (Caller stated his wife passed out and hit her head on the floor), SKULL FRACTURE (hit her head on the floor and split it open), CARDIAC DISORDER (transferred to hospital due to cardiac complications) and FALL (fall) in a 67-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 03-Apr-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 03-Apr-2021, the patient experienced LOSS OF CONSCIOUSNESS (Caller stated his wife passed out and hit her head on the floor) (seriousness criteria hospitalization and medically significant), SKULL FRACTURE (hit her head on the floor and split it open) (seriousness criteria hospitalization and medically significant), CARDIAC DISORDER (transferred to hospital due to cardiac complications) (seriousness criterion hospitalization) and FALL (fall) (seriousness criterion hospitalization). On 04-Apr-2021, LOSS OF CONSCIOUSNESS (Caller stated his wife passed out and hit her head on the floor), SKULL FRACTURE (hit her head on the floor and split it open), CARDIAC DISORDER (transferred to hospital due to cardiac complications) and FALL (fall) outcome was unknown. The patient died on 04-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product use was not provided by the reporter. Treatment information was not provided. On 03 Apr 2021, the reporter stated approximately 45 minutes after receiving the COVID-19 vaccine, the patient passed out in the parking lot and hit her head on the floor which caused it to split open. The patient was taken to a hospital but had to be transferred to another hospital after experiencing cardiac complications. On 04 Apr 2021 at 4:00 am, the patient passed away. Very limited information regarding this events has been provided at this time. Further</p>

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information has been requested.; Sender's Comments:
Very limited information regarding this events has been
provided at this time. Further information has been
requested.; Reported Cause(s) of Death: Unknown cause
of death

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5/20/2021		1334884	KY	82	M	2/13/2021	2/28/2021	Dad had been feeling dizzy and tired much of the time when he first knew something was not right and went to his primary doctor and his heart doctor. From the date of 02/13/2021, the first COVID-19 vaccine shot, Dad's condition worsened but once he was administered the second dose of the COVID-19 vaccine it quickly accelerated. One month and one day after the second vaccination shot he was dead from internal bleeding, an accelerated decrease in hemoglobin, red blood cells, platelets, and the complications this caused after surgery which removed a portion of his colon to stop the bleeding. Following is a chronological list of occurrences to the best of my recollection: 1) 2/25/2021 NP, received lab results which she had ordered earlier. Red blood cells 2.21 MIL/uL, hemoglobin 6.7 GM/DL, platelets 92 THOUS/uL. 2) 2/28/2021 admitted to the hospital to receive 3 units of blood and a bone marrow biopsy. Discharged 3/2/2021. 3) 3/3/2021 diagnosis: anemia, unspecified Melena, and occult blood in stools. 4) 3/5/2021 Dr. with lab results: red blood cells 2.7 MIL/uL, hemoglobin 8.6 GM/DL, platelets 56 THOUS/uL. 5) 3/10/2021 Video Capsule Endoscopy. 6) 3/12/2021 Outpatient blood transfusion. 7) 3/15/2021 Dr. with bone marrow report. Diagnosed with Myelodysplastic Syndromes. Received first shot of ARANESP with orders to receive the ARANESP shot every two weeks and see a specialist at Hospital. 8) 3/16/21 transported to ER by ambulance with GI bleed. Received blood transfusions and admitted. Received several more tests and blood transfusions. Diagnosis: Arteriovenous Malformation in descending colon. Treatment: 4 clamps in bleeding veins. Discharged: 3/19/2021. 9) 3/29/2021 Dr. office visit, labs, and second ARANESP shot. Ordered transfusion, no blood match. 10) 3/29/2021 Taken from Dr. office to ER and admitted to Hospital. Transfusions and additional tests performed. Test showed additional bleeding in colon. A colonoscopy was performed and several areas in the colon were sealed. 11) 4/2/2021 Discharged 12) 4/4/2021 Hemorrhaging from colon. Transported by ambulance to Hospital. More transfusions and tests. 13) 4/5/2021 Performed surgery to remove part of colon. My dad continued to worsen over the next 9 days. 14) 4/14/2021 My dad died.

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5/20/2021	1334886	CA	79	F	4/23/2021	4/26/2021	Patient died 72 hours after receiving the vaccine; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Patient died 72 hours after receiving the vaccine) in an 80-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 046a21a) for COVID-19 vaccination. No Medical History information was reported. On 23-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 26-Apr-2021 The patient died on 26-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant medication was not provided, Treatment medication was not reported. A 79-year-old female patient who received mRNA-1273 died 3 days after the first dose of vaccine. No medical conditions or concomitant medications were reported. Very limited information has been reported at this time. Further information is being followed up.; Sender's Comments: A 79-year-old female patient who received mRNA-1273 died 3 days after the first dose of vaccine. No medical conditions or concomitant medications were reported. Very limited information has been reported at this time. Further information is being followed up.; Reported Cause(s) of Death: Died 72 hours after receiving the vaccine.
5/20/2021	1334899	NC	72	M	1/1/2021	4/21/2021	Grand mal seizure; encephalopathy
5/20/2021	1334284	NV	76	F	4/20/2021	4/20/2021	According to patient's daughter, patient only complained of nausea the day of the immunization. Patient received 2nd dose of Moderna vaccine at 4:05pm and passed away around 8:30pm that same day per daughter's account. She had no pulse upon arrival to hospital. Autopsy was not performed.

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5/20/2021	1332962	MT		M			DEATH; LOW PLATELET; This spontaneous report received from a consumer who reported she had seen a post approximately one month ago concerning a male of unspecified age. The patient's height, and weight were not reported. The patient's concurrent conditions included good health. The patient's medical history was not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, intramuscular, batch number: Unknown) dose and start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the subject experienced low platelet and died on an unspecified date. Also conflictingly reported the cause of death was unknown (adverse events captured as Low Platelet and Death). It was not reported if an autopsy was performed. As per the reporter, the patient was an emergency (ER) physician who died after receiving the vaccine due to low platelets. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on an unspecified date. This report was serious (Death).; Sender's Comments: V0: 20210526587-covid-19 vaccine ad26.cov2.s -Death, Low platelets. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: LOW PLATELET

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5/20/2021	1332466	CA		M			<p>PULMONARY EMBOLISM; This spontaneous report received from a consumer via a company representative concerned a 63 year old male, race and ethnicity unspecified. The patient's height, and weight were not reported. The patient's medical history was not reported. The patient was very healthy, athletic and a marathon runner. The patient's mother died last year of an aneurysm. The patient's dad is in his 80's is very healthy. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, intramuscular, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the subject developed pulmonary embolism causing death six days after receiving the vaccination. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on an unspecified date. This report was serious (Death).; Sender's Comments: V0: 20210533144-covid-19 vaccine ad26.cov2.s- This case concerns to a 63 year old male. Pulmonary embolism. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: PULMONARY EMBOLISM</p>

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5/20/2021	1332507	TX		F		4/26/2021	Change in patient's condition; Passed away; This spontaneous case was reported by a health care professional (subsequently medically confirmed) and describes the occurrence of DEATH (Passed away) and ADVERSE EVENT (Change in patient's condition) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On 26-Apr-2021, the patient experienced ADVERSE EVENT (Change in patient's condition) (seriousness criterion hospitalization). The patient died on 06-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, ADVERSE EVENT (Change in patient's condition) outcome was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. No relevant concomitant medications were reported. No treatment information was provided. Very limited information regarding these events has been provided at this time. Further information has been requested; Sender's Comments: Very limited information regarding these events has been provided at this time. Further information has been requested; Reported Cause(s) of Death: Unknown cause of death
5/20/2021	1332656	CA	54	M	5/3/2021	5/4/2021	bilateral leg pain, diarrhea, flu like symptoms, death

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5/20/2021	1332839	IL		M			died; tested positive for covid; tested positive for covid; This is a spontaneous report from a non-contactable consumer. This male patient of unspecified age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date as single dose for COVID-19 immunisation. Medical history included chronic lymphocytic leukemia untreated since 2018 or 2019. Concomitant medications were not provided. It was reported that on unspecified date, patient got BNT162B2 and later tested positive for covid and died. It was not reported if an autopsy was performed. Lab data included covid test was positive on unspecified date. The outcome of the event died was fatal, while of the other events was unknown. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: died
5/20/2021	1332841		68	M	2/13/2021	2/14/2021	Body chills; Body aches; Blindness; Septic shock due to serratia infection (not sure how the infection came to be); Septic shock due to serratia infection (not sure how the infection came to be); Kidney failure; This is a spontaneous report from a non-contactable consumer. A 68-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on 13Feb2021 (Lot Number: EL9266) as single dose for COVID-19 immunisation. Medical history included type 2 diabetes, stage 4 kidney disease, high blood pressure. Concomitant medications included unspecified drugs. Prior to vaccination, the patient was not diagnosed with COVID-19. On 14Feb2021, the patient experienced body chills, body aches, blindness, septic shock due to serratia infection (not sure how the infection came to be), kidney failure. The events required a visit to the emergency room. No treatment required. The patient was hospitalized due to the events for 18 days and condition was life threatening. The final outcome was fatal. The patient died on 06Mar2021. An autopsy was not performed. Cause of death was septic shock. No follow-up attempts are possible. No further information is expected.; Reported Cause(s) of Death: Septic shock

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5/20/2021	1332849	NY	37	F	3/20/2021	4/24/2021	<p>passed away from COVID (positive test on 24Apr2021); passed away from COVID (positive test on 24Apr2021); This is a spontaneous report from a contactable physician. A 37-years-old female patient received second dose of bnt162b2 (Pfizer-BioNTech COVID-19 Vaccine), at the age of 37-years-old, via an unspecified route of administration on 20Mar2021 (Lot Number: EP7534, also reported as EPT534) as single dose for covid-19 immunisation. Medical history was none. The patient's concomitant medications were not reported. Patient received first dose of bnt162b2 at the age of 37-years-old on 27Feb2021 (Lot Number: EN6205) for covid-19 immunisation. Patient with no comorbidities passed away from COVID (positive test on 24Apr2021) in the ICU on 09May2021. Autopsy is still pending. Patient's family members provided vaccination card and she would like to verify if the lot numbers are from Pfizer Covid-19 vaccine. Added that it is freighting as the patient developed fatal Covid a month after being fully vaccinated. Additionally, she would like to verify if it is possible to know where the vaccines were shipped or any other distribution or facility information she could get from these lots. Stated that the vaccination card has something written on a box from the right hand side. Reporter seriousness for Tested Positive for Covid was Hospitalization, Death. Cause of death: Autopsy Pending, they assume Covid. Autopsy performed, Autopsy details not available. Events outcome was fatal. The patient died on 09May2021.; Sender's Comments: A possible contributory effect of suspect BNT162B2 on reported events cannot be excluded in a context of LOE. The impact of this report on the benefit/risk profile of the Pfizer drug 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: passed away from COVID (positive test on 24Apr2021)</p>
5/20/2021	1333991	OH	61	M	1/25/2021	4/14/2021	Blot clot followed by fatal aortic thrombosis

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5/20/2021	1332959	NY	55	M		4/2/2021	<p>SIGNIFICANT GI BLEED; DEATH; SUBORBITAL BLEEDING AROUND BILATERAL EYES; FATIGUE/ FEELING TIRED; This spontaneous report received from a consumer concerned a 55 year old male. The patient's weight was 240 pounds, and height was 60 inches. The patient's past medical history included thrombocytopenia, and concurrent conditions included cirrhosis of the liver, smoker, and non alcoholic, and other pre-existing medical conditions included patient had no known allergies and drug abuse or illicit drug usage. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, intramuscular, batch number: Unknown) dose was not reported, administered on 02-APR-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On JAN-2021, Laboratory data included: COVID-19 virus test (NR: not provided) Negative. On 02-APR-2021, the patient experienced fatigue/ feeling tired. On 15-APR-2021, the patient experienced suborbital bleeding around bilateral eyes. On 03-MAY-2021, the patient experienced death. On an unspecified date, the patient experienced significant GI bleed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died, and outcome of significant GI bleed, suborbital bleeding around bilateral eyes was unknown and not recovered from fatigue/ feeling tired. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0: 20210516526-covid-19 vaccine ad26.cov2.s-death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s). 20210516526-covid-19 vaccine ad26.cov2.s-significant GI bleed, suborbital bleeding around bilateral eyes. This event(s) is considered not related. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event(s) than the drug. Specifically: MEDICAL HISTORY</p>

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5/20/2021	1334843	MO	82	M	5/18/2021	5/19/2021	Informed of patient recently passing within 24 -36 hours of vaccine administration. patient had no signs of adverse side effects while at pharmacy.

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5/20/2021	1333192		76	M	2/26/2021	3/20/2021	Acute kidney injury; acute myocardial infarction; cardiac failure congestive; Confusional state; dyspnea; Respiratory distress; Sepsis; cardio-respiratory arrest; This case was received via VAERS (Reference number: 1213568) on 11-May-2021 and was forwarded to Moderna on 11-May-2021. This regulatory authority case was reported by an other health care professional and describes the occurrence of CARDIO-RESPIRATORY ARREST (cardio-respiratory arrest), ACUTE KIDNEY INJURY (Acute kidney injury), ACUTE MYOCARDIAL INFARCTION (acute myocardial infarction), CARDIAC FAILURE CONGESTIVE (cardiac failure congestive), CONFUSIONAL STATE (Confusional state), DYSPNOEA (dyspnea), RESPIRATORY DISTRESS (Respiratory distress) and SEPSIS (Sepsis) in a 76-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 022M20A) for COVID-19 vaccination. No Medical History information was reported. On 26-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 20-Mar-2021, the patient experienced CARDIO-RESPIRATORY ARREST (cardio-respiratory arrest) (seriousness criteria death and medically significant), ACUTE KIDNEY INJURY (Acute kidney injury) (seriousness criteria hospitalization and medically significant), ACUTE MYOCARDIAL INFARCTION (acute myocardial infarction) (seriousness criteria hospitalization and medically significant), CARDIAC FAILURE CONGESTIVE (cardiac failure congestive) (seriousness criteria hospitalization and medically significant), CONFUSIONAL STATE (Confusional state) (seriousness criterion hospitalization), DYSPNOEA (dyspnea) (seriousness criterion hospitalization), RESPIRATORY DISTRESS (Respiratory distress) (seriousness criteria hospitalization and medically significant) and SEPSIS (Sepsis) (seriousness criteria hospitalization and medically significant). The patient died on 20-Mar-2021. The cause of death was not reported. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. The patient presented to the ER and was treated for acute CHF, NSTEMI and sepsis with ceftriaxone and azithromycin. After placement of Trialysis catheter, he developed increasing respiratory distress

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and confusion and was transferred to the ICU where he received vasopressors, intubation and unsuccessful resuscitation after a code blue on 20-Mar-2020.
Company comment: This is a case of death in a 76-year-old male subject with unknown medical history, who died 22 days after receiving the second dose of vaccine. Very limited information has been provided at this time. No follow up is possible. Concomitant medication use was not provided by the reporter.; Sender's Comments: This is a case of death in a 76-year-old male subject with unknown medical history, who died 22 days after receiving the second dose of vaccine. Very limited information has been provided at this time. No follow up is possible.; Reported Cause(s) of Death: unknown cause of death.

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5/20/2021	1333218	PA	71	M	2/24/2021	3/19/2021	ED, Discharged , 3/13/2021 (4 hours), Hospital ED, MD Last attending o Treatment team Shortness of breath +1 more Clinical impression Chest Pain o Shortness of Breath o Dizziness Chief complaint, Patient presents with o Chest Pain, o Shortness of Breath o Dizziness. History of Present Illness , Patient is a 71 yr.. male with Hx of stage IIICM Metastatic Adenocarcinoma of the sigmoid Colon, Coronary disease, Hypertension, Dyslipidemia, Chronic Renal insufficiency, presenting to the ED with chest pain. Patient notes that he woke up this morning with pain in the right side of the chest with some associated shortness of breath. Notes symptoms. Additional information for Item 18: Notes symptoms are worse when he is up trying to exert himself and gets incredibly short of breath and fatigued. States he tried to do some workout in the garage but was unable. Denies chest pain worsening with exertion, but has been fairly constant since it began. Reports it is a dull ache. Pain is dissimilar from his previous heart attack. States he has had a mild cough, but no significant production. Denies any fevers, chills. No abnormal nausea or vomiting other than typical chemo induced side effects. Given continued issues, decided to come in for further evaluation. Review of Systems; Constitutional: Positive for fatigue. Negative for appetite change, chills, diaphoresis and fever. HENT: Negative for sore throat. Eyes: Negative for visual disturbance. Respiratory: Positive for cough and shortness of breath. Negative for choking and chest tightness. Cardiovascular: Positive for chest pain. Negative for palpitations and leg swelling. Gastrointestinal: Positive for nausea and vomiting. Negative for abdominal pain and diarrhea. Genitourinary: Negative for dysuria. Musculoskeletal: Negative for back pain and neck pain. Skin: Negative for rash. Neurological: Positive for light-headedness. Negative for seizures, syncope, numbness and headaches. ED to Hosp-Admission, Discharged, 4/5/2021 - 4/25/2021 (20 days) Hospital, MD, Last attending Treatment team Sepsis, due to unspecified organism, unspecified whether acute organ dysfunction present. Principal problem Discharge Summary, DO (Physician), Inpatient Discharge Summary; BRIEF OVERVIEW; MD, Discharge Provider: DO, Primary Care Physician at Discharge: MD, Admission Date: 4/5/2021, Discharge Date: 4/25/2021. Discharge Diagnosis; Medical Problems ;Hospital

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Problems; POA, (Principal) Sepsis, due to unspecified organism, unspecified whether acute organ dysfunction present, Yes, Essential hypertension Yes, Chemotherapy-induced peripheral neuropathy, Yes. Overview Signed 5/10/2019 2:03 PM by MD, Pins and needles and numbness in tips of finger and toes, Lung metastasis Yes. Hypoxia Yes. COVID-19 Unknown, Acute respiratory failure with hypoxia Yes, Palliative care encounter Not Applicable, Declining functional status No. DETAILS OF HOSPITAL STAY; Presenting Problem/History of Present Illness/Reason for Admission, Sepsis, due to unspecified organism, unspecified whether acute organ dysfunction present. Acute hypoxemic respiratory failure due to COVID-19, Respiratory failure. Sigmoid perforation with abscess. Hospital Course; 71-year-old male prolonged admission for acute hypoxic respiratory failure secondary to COVID-19. No history of colorectal adenocarcinoma with lung mets. Prior resection of bowel, prior chemotherapy. Required management in the ICU due to worsening respiratory failure over the time that he has been admitted to Hospital (20 days). He had remained on BiPAP therapy throughout that time, received appropriate corticosteroids, and antiviral therapies. Approximately 1-1/2 weeks ago he began to develop mild left lower quadrant abdominal pain. In the last 48 hours this is significantly worsened. CT abdomen and pelvis was obtained on Friday, which displayed pneumoperitoneum, sigmoid abscess with sigmoid perforation. There is a prior anastomotic site distal to this. Given his overall complexity he was to be medically managed to avoid the need for OR and intubation. He did well through the initial 24 hours of IV antibiotics, fluids and bowel rest. This afternoon he became increasingly dyspneic, required implementing nonrebreather mask, and subsequently developed severe rigors, tachycardia. I obtained a stat follow-up CT scan which shows similar findings of free air within the abdomen. Given signs of impending sepsis, BiPAP therapy was initiated, bolus IV fluids were given. Blood gas, blood counts, lactic acid are pending. He is receiving empiric Zosyn. I discussed this with general surgery, whom is well-known to the patient. In agreement the patient likely needs surgical intervention. However given his overall complexity and in light of the fact that this area surrounds the ureter, and

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we do not have urology coverage. It was felt he was most appropriate to be managed in Hospital. Case was discussed with Dr. at Hospital, patient will be transferred there via air transit. At this time his blood pressure appears stable, he is tachycardia, is currently on BiPAP which will be transitioned to CPAP for transport. He has received several doses of Dilaudid, for improved pain control. No further advancement of airway was performed prior to discharge. Case was discussed with family at length, all risks and benefits of transfer were discussed with wife and patient. It is recommended to involve pulmonary critical care services including surgical ICU care as if requiring surgery he is high likelihood for prolonged vent needs. Operative Procedures Performed: Treatments: See above; Procedures: Na Consults: pulmonary/intensive care and general surgery. Pertinent Test Results: CT abdomen pelvis with contrast [3279871876] (Abnormal) Resulted: 04/25/21 1811. Order Status: Completed Updated: 04/25/21 1812. Narrative: PROCEDURE INFORMATION: Exam: CT Abdomen And Pelvis With Contrast, Exam date and time: 4/25/2021 17:36, Age: 71 years old, Clinical indication: Abdominal pain; Additional info: Sepsis, bowel perf. HX of Covid19 +, malignant colon with lung metastasis. Bowel perf. TECHNIQUE: Imaging protocol: Computed tomography of the abdomen and pelvis with contrast. Radiation optimization: All CT scans at this facility use at least one of these dose optimization techniques: automated exposure control; mA and/or kV adjustment per patient size (includes targeted exams where dose is matched to clinical indication); or iterative reconstruction. Contrast material: 350 OMNI; Contrast volume: 80 ml; Contrast route: INTRAVENOUS (IV); COMPARISON: CT ABDOMEN PELVIS W CONTRAST 4/23/2021 16:46, FINDINGS: Tubes, catheters and devices: Catheter terminates in the right atrium in satisfactory position. Lungs: Moderate airspace opacities throughout the lung bases are similar to prior and consistent with Multilobar pneumonia consistent with the history. Liver: No hepatic masses. Gallbladder and bile ducts: Cholelithiasis. Pancreas: No ductal dilation. No masses. Spleen: No splenomegaly or focal lesions. Adrenal glands: No mass. Kidneys and ureters: 10 mm benign left renal cyst, no follow-up necessary. No renal masses or Hydronephrosis bilaterally. Stomach and bowel: Redemonstration of

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perforated proximal sigmoid diverticulitis. Small pneumoperitoneum is stable. Predominantly gas containing, 25 x 28 mm collection adjacent to the inflamed sigmoid colon similar to prior; a fistulous tract extends toward the midline containing gas and fluid, with suspected fistula to adjacent loops of small bowel. Moderate to severe descending and sigmoid diverticular burden. Minor right diverticular burden. No small bowel obstruction. A somewhat clumped appearance of small bowel in the right lower quadrant near the colon enteric fistula. Appendix: No evidence of appendicitis. Intraperitoneal space: Mesenteric edema around the small bowel, slightly increased, however no new mesenteric collection. There is no extravasation of enteric contrast into the collection adjacent to the sigmoid colon. Vasculature: Mild aortoiliac atherosclerosis. Lymph nodes: No significantly enlarged lymph nodes. Urinary bladder: Unremarkable as visualized. Reproductive: Unremarkable as visualized. Bones/joints: Degenerative changes in the spine. Multilevel disc space narrowing. Multilevel central canal and neuroforaminal stenosis in the lumbar spine. No acute fracture or subluxation. Soft tissues: Small fat-containing right inguinal hernia. Small fat-containing left inguinal hernia. Large ventral abdominal hernia containing gas, which has replaced the previous contents of fat and bowel loops. Volume increased compared to prior. IMPRESSION: 1. Redemonstration of perforated proximal sigmoid diverticulitis. Small pneumoperitoneum is stable. 2. Similar perisigmoid collection; colon enteric fistula, probably at least subacute in duration. The perisigmoid collection is prominently gaseous and there is no frank abscess. 3. Suspected mild enteritis the small bowel loops or loops associated with the fistula. No obstruction. 4. Additional findings as described are similar to recent prior imaging. COMMENTS: Any incidental renal lesion less than 1 cm or classified as too small to characterize, or any incidental cystic renal lesion characterized as simple-appearing, is likely benign. No follow-up imaging is recommended for these lesions per consensus recommendations based on imaging criteria. THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED BY MD, CT abdomen pelvis with contrast (Abnormal) Resulted: 04/23/21 1804, Order Status: Completed Updated: 04/23/21 1804, Addenda: THIS

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REPORT CONTAINS FINDINGS THAT MAY BE CRITICAL TO PATIENT CARE. The findings were verbally communicated via telephone conference with RN at 6:03 PM EDT on 4/23/2021. The findings were acknowledged and understood. THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED BY MD Signed: 04/23/21 1804 by, MD. Narrative: PROCEDURE INFORMATION: Exam: CT Abdomen And Pelvis With Contrast, Exam date and time: 4/23/2021 4:42 PM, Age: 71 years old Clinical indication: Abdominal pain; Localized; Left; Additional info: HX of colon cancer. Worsening left sided abdominal pain. HX of colon cancer. Worsening left sided abdominal pain. TECHNIQUE: Imaging protocol: Computed tomography of the abdomen and pelvis with contrast. Radiation optimization: All CT scans at this facility use at least one of these dose optimization techniques: automated exposure control; mA and/or kV adjustment per patient size (includes targeted exams where dose is matched to clinical indication); or iterative reconstruction. Contrast material: OMNIPAQUE 350; Contrast volume: 80 ml; Contrast route: INTRAVENOUS (IV); Other contrast: Oral, omnipaque 12mg premixed solution, 500mL pt unable to drink 1000mL; COMPARISON: 1. CT ABDOMEN PELVIS W CONTRAST 2/12/2021 11:06 AM, 2. CT ABDOMEN PELVIS W CONTRAST 11/13/2020 11:42:26 AM, 3. CT ABDOMEN PELVIS W CONTRAST 8/24/2020 10:14:40 AM, FINDINGS: Lungs: Bilateral lower lung consolidation. Liver: No mass. Gallbladder and bile ducts: Cholelithiasis, no biliary ductal dilatation. Pancreas: Normal. No ductal dilation. Spleen: Normal. No splenomegaly. Adrenal glands: Normal. No mass. Kidneys and ureters: Normal. No hydronephrosis. Stomach and bowel: Collection of fluid and gas adjacent to the proximal sigmoid colon where there are multiple diverticuli, extraluminal gas arises from a proximal sigmoid perforation which is proximal to the sigmoid anastomosis. No bowel obstruction, no wall thickening at the anastomosis. Appendix: No evidence of appendicitis. Intraperitoneal space: Pneumoperitoneum. Small collection of fluid and gas in the left pelvis and left lower abdomen, maximum short axis diameter approximately 2 cm, arising from the proximal sigmoid colon. Vasculature: No abdominal aortic aneurysm. Lymph nodes: No significant adenopathy. Urinary bladder: Unremarkable

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as visualized. Reproductive: Unremarkable as visualized. Bones/joints: No acute findings. Soft tissues: Ventral hernia containing bowel without entrapment. IMPRESSION: Perforated diverticulitis, small pericolic abscess; the sigmoid perforation is proximal to the sigmoid anastomosis. Physical Exam at Discharge; Heart Rate: (!) 131, Resp: (!) 42, BP: (!) 168/92 Temperature: 37.1 °C (98.7 °F) Weight: 107 kg (236 lb. 12.4 oz.), General appearance: alert, appears stated age, cooperative, severe distress and morbidly obese, Head: Normocephalic, without obvious abnormality, atraumatic, Neck: supple, symmetrical, trachea midline and thyroid not enlarged, symmetric, no tenderness/mass/nodules. Lungs: retractions and diminished breath sounds Heart: tachycardia, RR. Abdomen: Distended significantly tender in the left lower quadrant with guarding throughout. Extremities: Trace pretibial, Skin: Skin color, texture, turgor normal. No rashes or lesions or Ecchymosis areas throughout upper extremities. Neurologic: Alert and oriented X 3, no focal deficit. Discharge Instructions; Condition at Discharge, Discharge Condition: critical. Admission, Discharged 4/25/2021 - 5/1/2021 (6 days) Hospital, MD, Last attending Treatment team Respiratory failure, acute. Principal problem, Discharge Summary MD (Resident) Cosigned by: MD at 5/18/2021 1:24 PM; Final Summary for Deceased Patient, BRIEF OVERVIEW; Admitting Provider: MD; Discharge Provider: MD Primary Care Physician at Discharge: MD Admission Date: 4/25/2021, Discharge Date: 5/1/2021, Final Diagnosis, Principal Problem: Respiratory failure, acute. Active Problems: Malignant neoplasm of sigmoid colon. Sepsis, due to unspecified organism, unspecified whether acute organ dysfunction present COVID-19. Perforated viscus. DETAILS OF HOSPITAL STAY Presenting Problem/History of Present Illness/Reason for Admission Respiratory failure, acute, Hospital Course; Patient is a 71 yr.. male with history of metastatic colorectal adenocarcinoma with lung metastases, prior bowel resection and chemotherapy. The patient initially tested positive for Covid in early March. His symptoms at that time are mild and resolved. He was later vaccinated and that month. He started having severe symptoms again on 4/3 for which he presented to Hospital. Since that time, he has received full course of Remdesivir and steroids.

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He had a CT scan performed on 4/23 which revealed pneumoperitoneum secondary to presumed perforated sigmoid diverticulitis with focal sigmoid abscess. Patient was weaned down to minimal nasal cannula settings but somewhat suddenly earlier on 4/25 patient had increased work of breathing, became tachycardia, and had rigors. Hospital ordered repeat CT scan which showed similar findings in the abdomen. Patient had been maintained on Zosyn. Repeat labs were sent which were largely unremarkable. Given concerns for worsening sepsis and potential need for surgery, he was subsequently transferred Hospital. On admission to hospital, he had a normal lactic acid and no leukocytosis. He did not have evidence of peritonitis. The decision was made to treat his diverticulitis conservatively. However, early on 4/26 the patient started to develop a lactic acidosis. An extensive discussion was had with the patient and his wife regarding surgery and the possibility the patient may never be able to separate from the vent given his worsening Covid pneumonia. The patient elected to undergo an exploratory laparotomy with with segmental resection of distal descending and loop transverse colostomy. However, as the days progressed the patient had worsening respiratory status that required deep sedation, paralytics and proning all of which were unsuccessful in maintaining his oxygen saturation greater than 88%. His wife, knowing that he would not want to have a prolonged course on the ventilator, elected for transition to palliative extubating with comfort care on 4/30 and the patient expired roughly 10 minutes after extubation.

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5/20/2021	1333421		58	F	3/16/2021	3/18/2021	3/18, admited 2 days after covic vaccine with SOB, rib pain, emesis. Patient had metastatic ovarian cancer on chemotherapy who was admitted to the intensive care unit with severe sepsis with septic shock and acute hypoxemic respiratory failure requiring intubation mechanical ventilation. She was started on broad-spectrum antibiotics, but did not have an obvious source of infection. She remained on mechanical ventilation, with profound metabolic acidosis. She required high doses of norepinephrine and vasopressin drips, but on arterial blood gas had a pH of 6.98. The patient had a cardiopulmonary arrest in the intensive care unit. 1 round of ACLS protocol was performed, with return of spontaneous circulation. After discussion with the patient's mother by phone, she opted for DNR status, comfort care, and to allow for natural death. The patient was kept on mechanical ventilation, and she passed away.
5/20/2021	1333518	IA	64	M	4/3/2021	4/6/2021	He had a stroke and bleeding on the brain
5/20/2021	1333650	IL	69	F	2/5/2021	2/20/2021	passed away sometime after 2/16/21 and before 2/20/21 in her home. Cause of death ruled by Corner as Myocardial infarction and congestive heart failure. Sometime between 11 and 15 days after receiving dose 1. did not receive dose 2 due to her passing before she could receive it.
5/20/2021	1333734	TX	74	M	4/9/2021	4/23/2021	Approximately two weeks after vaccination I noticed his left foot and leg swelling. Patient advised me that he needed to go to the hospital because he was not feeling well and his oxygen level was low. We called 911 and was taken to the hospital. After at the hospital I advised a male nurse that I was concerned about his leg being swollen cause he had been given the Jansen Covid vaccine and I was concerned about blood clots. Everyday I would tell someone in the hospital (never saw a doctor I could talk to) about his swollen leg but did not really get anyone interested. Before he was moved to a Veteran's State Home, I overheard someone saying they were going to give him his anticoagulant. I'm filing this report in case the swollen leg was a result of blood clots due to the vaccine.

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5/20/2021	1332850			F	2/1/2021		Pulmonary embolism; This is a spontaneous report received from a Pfizer sponsored program, received by a contactable consumer (patient's relative). A 91-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, Lot number not provided), via an unknown route, in Feb2021 at single dose for COVID-19 immunization, administered at facility. Relevant medical history included COVID positive from an unknown date and resolved in Jan2021 (COVID test negative one month before receiving vaccine). No relevant concomitant medications were provided. Patient's relative stated that she died 10 days after receiving the COVID vaccine. The cause of death was not known but caller stated it could be due to pulmonary embolism. The facility did not wait for 3 months before giving the vaccine. Caller stated it should be prominent that patient should wait for 3 months after being tested positive for COVID and receiving the vaccine. It was unknown if an autopsy was performed. Information about Lot/Batch number has been requested.; Reported Cause(s) of Death: pulmonary embolism

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5/20/2021		1334827	FL		M	4/1/2021	4/1/2021	<p>~~severe reactions"; very weak; Felt Bad; shortness of breath; Fever; This spontaneous case was reported by a patient family member or friend and describes the occurrence of VACCINATION COMPLICATION ("severe reactions") and ASTHENIA (very weak) in a 71-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Reporter stated that the patient had a history of "health problems." No specifics were provided. Concomitant products included COLECALCIFEROL (VITAMIN D [COLECALCIFEROL]) and MELATONIN for an unknown indication. In April 2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. In April 2021, the patient experienced VACCINATION COMPLICATION ("severe reactions") (seriousness criterion death), ASTHENIA (very weak) (seriousness criterion death), FEELING ABNORMAL (Felt Bad), DYSPNOEA (shortness of breath) and PYREXIA (Fever). On 06-May-2021, FEELING ABNORMAL (Felt Bad), DYSPNOEA (shortness of breath) and PYREXIA (Fever) outcome was unknown. The patient died on 06-May-2021. The cause of death was not reported. An autopsy was not performed. Patient had no symptoms or side effects after the 1st dose. Patient was never hospitalized for the reported events. A 71-year-old male patient who received mRNA-1273 experienced Pyrexia, Feeling Abnormal, Dyspnea, Asthenia and Vaccination Complication and died on an unknown days after the second dose of vaccine. Patient had a history of unspecified health problems which may confound the event. Unlikely that the events are related to the vaccine. Very limited information has been reported at this time. Further information is not expected.; Sender's Comments: A 71-year-old male patient who received mRNA-1273 experienced Pyrexia, Feeling Abnormal, Dyspnea, Asthenia and Vaccination Complication and died on an unknown days after the second dose of vaccine. Patient had a history of unspecified health problems which may confound the event. Unlikely that the events are related to the vaccine. Very limited</p>

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5/19/2021	1329587							
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5/19/2021	1329587				M			
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5/19/2021	1329587				M	5/5/2021		
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5/19/2021	1329587				M	5/5/2021	5/6/2021	
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information has been reported at this time. Further information is not expected.; Reported Cause(s) of Death: Unknown cause of death

death; This is a spontaneous report from a consumer. A 39 years old male patient (brother in law, sister's husband) received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 05May2021 (Batch/Lot number was not reported) as 2nd dose, Single for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient experienced death on 06May2021. He received his second pfizer vaccination shot less than 24 hours before his death. Official cause of death hasn't been determined. He simply never woke up the next day and reporter's sister found him cold and blue in their bedroom. The patient died on 06May2021. An autopsy was performed and results were not provided. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: unknown cause of death

<u>RECVDATE</u>	<u>VAERS_ID</u>	<u>STATE</u>	<u>AGE_YRS</u>	<u>SEX</u>	<u>VAX_DATE</u>	<u>ONSET_DATE</u>	<u>SYMPTOM_TEXT</u>
5/19/2021	1329576	WA		M		4/1/2021	Received COVID-19 vaccination late Dec2020 or early Jan2021/contracted COVID-19 infection in a foreign country; Received COVID-19 vaccination late Dec2020 or early Jan2021/contracted COVID-19 infection in a foreign country; This is a spontaneous report from a contactable physician. A 58-year-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot/batch number and expiration date not available to reporter), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. It was unknown if other vaccine received in four weeks or if covid prior vaccination. It was reported that physician received COVID-19 vaccination late Dec2020 or early Jan2021. Traveled to another country (where he was originally from) sometime in early 2021, contracted COVID-19 infection in Apr2021, and unfortunately died sometime in Apr2021 while still in a foreign country. He had no known comorbidities. The patient underwent lab test which included covid tested post vaccination with unknown results on an unspecified date. It was unknown if any treatment received. The outcome of the events was fatal. The patient died in Apr2021. It was unknown if an autopsy was performed. The events Drug ineffective and COVID-19 occurred in a country different from that of the reporter. This may be a duplicate report if another reporter from the country where the events occurred has submitted the same information to his/her local agency. Information on the lot/batch number has been requested.; Sender's Comments: Based on the current available information and the plausible drug-event temporal association, a possible contributory role of the suspect product BNT162B2 to the development of events Drug ineffective and COVID-19 cannot be totally excluded. The case will be reassessed if additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to agency, as appropriate.; Reported Cause(s) of Death: Received COVID-19 vaccination late Dec2020 or

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								early Jan2021/contracted COVID-19 infection in a foreign country; Received COVID-19 vaccination late Dec2020 or early Jan2021/contracted COVID-19 infection in a foreign country.
5/19/2021		1329227	MA	82	F	3/1/2021	5/7/2021	My mother was in generally good health for her age, known as the strongest woman to many. She defied covid for over a year, despite living in an assisted living facility in one of 2020's "hot zones". After taking the vaccine, she died within 2 months. I definitely believe 100% the vaccine in the very least hastened her health as she began declining immediately after the first dose, with on/off flu like symptoms until her death.

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5/19/2021		1329662	FL		F			BLOOD CLOTS; This spontaneous report received from a consumer concerned 3 women with unknown race and ethnicity . The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number and expiry was unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date,3 women died from blood clots after getting (Janssen) covid 19 vaccine. It was unknown whether autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0 : 20210530454-COVID-19 VACCINE AD26.COVS-Blood clots . This event is considered unassessable. The event has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: BLOOD CLOT
5/19/2021		1331122	CT	61	M	3/31/2021	4/19/2021	Patient was vaccinated on 3/31/21. Noted to be positive for Covid on 4/19/21 and passed away on 5/8/21. Per the lab report, this is the information for the ordering provider: He had an emergency contact but no number. Phone number for patient is no longer operational.
5/19/2021		1330767	TN	78	M	1/28/2021	3/27/2021	Patient presented to the ER on 3/28/2021 with shortness of breath and lower extremity edema and complaining of lower back pain. O2 sat high 80s on room air. Worsening renal failure since last discharge from hospital on 3/23/2021. Patient was readmitted to hospital from skilled care facility after being discharged 5 days prior with acute on chronic stage IV kidney disease as well as acute on chronic diastolic heart failure and had slowly worsening with renal dysfunction and growing concern for dialysis. Patient had developed a cough, a fever up to 101, and 1 questionable sewed of either hemoptysis or hematemesis since being discharged to skilled nursing facility on 3/23/2021. Patient was transitioned to the hospice team and expired on 4/2/2021.

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5/19/2021	1330914	CO	97	M	12/28/2020	1/6/2021	PT deceased on 1/6/21 from "complications of CHF" Unknow if it is in fact related to the vaccine.
5/19/2021	1330712	IL	78	M	2/3/2021	4/30/2021	Family considers patients demise 5/8/2021 a result of vaccination with COVID-19 series given 2/3/2021 and 3/3/2021. He died from respiratory acidosis yet never had breathing problems prior tom vaccine.
5/19/2021	1330956	NC	73	M	4/19/2021	4/21/2021	on 4/20/21, 9 am (24hrs after receiving the second shot, he complained that the couldn't breath and his throat hurt, we gave him some tylenol,) then we call 911 by 3pm because he looked pale. by 6pm we were told that he was going uptown, because he might need a ventilator. Then at 12:30 a.m. on 4/21/21 we were told he was alert and in emergency diaylsis and he should be okay. Then they called us at 8 a.m. to say that he had passed away due to a heart attack.
5/19/2021	1331018	AR	81	M	3/1/2021	5/4/2021	admitted 5/5/21 with increased sob/cough/aches and pains. Dx with COVID 19 pneumonia on 5/1 . temp 98.3
5/19/2021	1329956	TX	59	F	5/1/2021	5/1/2021	DEATH AT HOME. REPORTED NOT FEELING WEEL SINCE 2ND DOSE.
5/19/2021	1329965	PR	77	M	2/19/2021	4/21/2021	Deterioration of condition.
5/19/2021	1330021	MI	68	M	1/22/2021	5/15/2021	Patient was vaccinated on 1/22/2021 and 2/12/2021 and had out of hospital cardiac arrest on 5/5/2021 where he was tested for COVID-19 and was positive. He had previously tested negative on 4/19/2021.
5/19/2021	1329905	PR	67	M	3/4/2021	3/19/2021	Died due to respiratory cardiac arrest.
5/19/2021	1330155	PR	88	M	2/23/2021	3/24/2021	Difficulty to breath, pain in the lungs, patient was rushed to the hospital and after addition, patient goes to cardiac arrest.

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5/19/2021		1330750	PA	87	M	3/6/2021	3/8/2021	ED to Hosp-Admission Discharged 3/8/2021 - 3/9/2021 (14 hours) Hospital MD Last attending ? Treatment team Dementia without behavioral disturbance (CMS/HCC) Principal problem Discharge Summary MD (Physician) ? ? Internal Medicine Inpatient Discharge Summary BRIEF OVERVIEW Admitting Provider: MD Discharge Provider: MD Primary Care Physician at Discharge: CRNP Admission Date: 3/8/2021 Discharge Date: 3/27/2021 Discharge Diagnosis Hospital Problems POA * (Principal) Dementia without behavioral disturbance (CMS/HCC) Yes Aortic stenosis Yes Atrial fibrillation (CMS/HCC) Yes Chronic obstructive pulmonary disease (CMS/HCC) Yes Congestive heart failure (CMS/HCC) Yes Coronary artery disease with history of myocardial infarction without history of CABG Not Applicable Depression Yes History of aortic valve replacement Not Applicable Hyperlipidemia Yes Hypertension Yes Peripheral vascular disease (CMS/HCC) Yes Ambulatory dysfunction Yes Dementia (CMS/HCC) Yes CKD (chronic kidney disease) Yes History of TIA (transient ischemic attack) Not Applicable Dementia with behavioral disturbance (CMS/HCC) Unknown DETAILS OF HOSPITAL STAY Presenting Problem/History of Present Illness/Reason for Admission AKI (acute kidney injury) (CMS/HCC) [N17.9] Dementia with behavioral disturbance (CMS/HCC) [F03.91] Generalized weakness [R53.1] Patient is an 87 y.o. male with past medical history of hypertension, hyperlipidemia AFib not on anticoagulation, sick sinus syndrome status post pacemaker, aortic stenosis status post valve replacement. Coronary artery disease status post CABG, CHF, history of peripheral vascular disease, history of carotid stenosis, severe vertebral artery stenosis, diabetes, CKD, dementia, chronic respiratory failure on 2 L nasal cannula post COVID-19 pneumonia 11/2020 was brought to the emergency room by the family due to worsening confusion and agitation, as per wife after the patient was discharged back in November in few weeks patient dementia started to get worse, more confused, more agitated and few times he was violent to his family members, well for the last few days patient's wife reported that his confusion was very bad so she decided to bring him to the ED for further evaluation management. Hospital Course -For the above

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presentation patient was admitted to the hospital services, patient was started on oxygen supplementation, Covid repeat test continue to be positive, started on IV antibiotics, IV hydration due to worsening kidney function, in the evening of 3/8 patient was found without any spontaneous respiration, patient was pronounced dead by the RN and CRNP finished the discharge defecate, please refer to RN documentation for more details.

5/19/2021	1330206	PR	92	F	2/1/2021	3/13/2021	Died of missive hart attack.
5/19/2021	1330231	PR	84	F	3/2/2021	4/26/2021	Decay, irregular pulse, cardiorespiratory failure are observed.
5/19/2021	1330319	LA	70	F	4/1/2021	4/2/2021	04/02/2021 - 04/21/2021 fever (100.5-105.9), chills, fatigue, night sweats ibuprofen

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5/19/2021		1330375	PA	68	F	3/2/2021	3/14/2021	ED to Hosp-Admission Discharged 3/14/2021 - 4/14/2021 (31 days) Hospital Physician Last attending ? Treatment team Severe sepsis (/HCC) Principal problem Discharge Summary MD (Physician) ? ? Internal Medicine HOSPITAL INPATIENT DISCHARGE SUMMARY HOSPITALIST GROUP . Patient: Date: 4/14/2021 Admission Date: 3/14/2021 Length of stay: 31 Days PCP: PA Discharging provider: MD Admission diagnosis: Primary Admission Diagnosis Hospital Problems POA * (Principal) Severe sepsis (/HCC) Yes Shortness of breath Yes Acute respiratory failure with hypoxemia (/HCC) Yes 2019 novel coronavirus?infected pneumonia (NCIP) Yes Elevated liver enzymes Yes Hyponatremia Yes Hypothyroidism Yes Essential hypertension Yes Hyperlipidemia Yes Disposition: Patient Expired on 4/13/2021 at 23:25 _ Hospital Course HPI: patient is a 68 y.o. female presented with covid pneumonia complicated with pneumomediastinum and pneumothorax Severe sepsis POA complicated by acute hypoxic respiratory failure, cytokine release syndrome, Covid pneumonia with superimposed bacterial PNA Complicated by pneumomediastinum, subcutaneous emphysema on 3/29 Right apical pneumothorax Status post ant.chest tube insertion 4/4 and lateral chest tube insertion 4/6, Completed Remdesivir therapy and is on Decadron. Completed 8 days of Cefepime for superimposed bacterial infection. Hyperglycemia without DM2 ICU Acquired Weakness Hypothyroidism HL HTN Patient was placed on comfort measures on 4/13/21. Family was at bedside including husband, son, daughter, and sister. Morphine gtt was infusing up until the patient passed at 2325. The patient appeared to be resting comfortably with no signs of pain or respiratory distress. The patient stopped breathing and this RN was called to the bedside around 1120. She was pronounced at 1125 4/13/21. Family was at bedside. Funeral home was notified and the body was sent to the morgue. _

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5/19/2021	1330410	WI	72	M	4/20/2021	4/24/2021	Rash presented several days after 2nd dose of vaccine. Seen in urgent care on 4/28 for this. On 5/8/21, patient had left weakness and numbness, dizziness, and loss of balance. Alteplase given,. Transferred to Medical Center, medical intensive care unit. Transferred to medical/surgical unit 5/9/21. Intermittently Febrile - T-max 39.5. CT for mild lethargy 5/9/21. 5/11 - mild respiratory distress and minimally responsive. Continued decline. TOD 1644 5/13
5/19/2021	1330411	TX	47	M	5/10/2021	5/11/2021	Within 12-24 hours, patient noted to have altered mental status - transferred to ICU where it was later discovered that patient had an intracranial hemorrhage
5/19/2021	1330552	IA	45	F	1/11/2021	1/29/2021	Blood clot in brain causing stroke then death
5/19/2021	1330697	OH	66	F	4/27/2021	4/28/2021	Patient died 4/28/2021
5/19/2021	1331243		55	F	4/26/2021	5/2/2021	Lightheaded, nausea resulting in heart attack
5/19/2021	1331183	AR	50	M	5/18/2021	5/19/2021	Death occurred outside of pharmacy 22.5 hours post vaccination. Cause of death being the vaccine is unknown.
5/19/2021	1330030	PR	84	F	2/8/2021	3/19/2021	Loss of apatite.
5/19/2021	1329933	PR	92	M	2/19/2021	3/4/2021	Deterioration of condition.
5/18/2021	1326063	FL	78	M	1/8/2021	2/12/2021	Died February 12, 2021
5/18/2021	1327444		86	M	4/3/2021	5/13/2021	seizure, encephalopathy, death
5/18/2021	1327397	MO	44	F		4/1/2021	Pneumonia that put her in the Hospital. Followed by brain,lung,kidney. & Death after over a month in the Hospital.
5/18/2021	1327132	NY	68	M	3/30/2021	4/1/2021	Cardiac Arrest
5/18/2021	1326951	FL	66	F	4/6/2021	4/7/2021	She been feels ill slightly ill ever since the shot. Always short of breathe. Now she died of a blood clot / heart attack while at night in her chair.

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5/18/2021	1326611	LA	82	F	2/2/2021	2/2/2021	Systemic: patient died-Severe, Additional Details: patient expired at the hospital not in the nursing home per, director of nursing, at Nursing Home.
5/18/2021	1326498	MA	69	M	5/8/2021	5/8/2021	5 minutes after vaccination, patient suffered cardiac arrest in clinic. CPR started immediately, shocked, EPI given. EMS transported to hospital patient expired in ED.
5/18/2021	1327446	VA	72	F	3/24/2021	3/26/2021	Patient's friend called office on 3/29/21 to notify PCP that patient had passed away on 3/26/21.
5/18/2021	1326251	MA	96	F	5/7/2021	5/9/2021	she passed away last night; She reported no side effects other than being tired.; This is a spontaneous report from a contactable consumer. A 96-years-old female patient (reporter's mother) received second dose bnt162b2 (BNT162B2), via an unspecified route of administration on 07May2021 (Batch/Lot number was not reported) at single dose for COVID-19 immunisation. Medical history included high blood pressure, heart disease, stent in heart. The patient was not pregnant. There was no known allergy. Concomitant medications included blood pressure and other medications. The patient previously received first dose bnt162b2 (BNT162B2) on an unknown date for COVID-19 immunisation. Patient received her second Pfizer vaccine on 07May2021. She reported no side effects other than being tired. It may not be related to the vaccine, but she passed away last night. Note that she had heart issues. The adverse events resulted in Emergency room/department or urgent care. Treatment for the adverse events included CPR and other life saving measures. There was no Covid prior vaccination. The patient was not Covid tested post vaccination. Death cause was unknown; may be listed as heart attack (as reported). The outcome of event Tiredness was unknown. The patient died on 09May2021. An autopsy was not performed. Information about lot/batch has been requested.; Reported Cause(s) of Death: she passed away last night

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5/18/2021	1326764	WA	57	M	4/20/2021	5/8/2021	First vaccine dose administered on 4/20/21. Patient was admitted on 4/29/21 with shortness of breath and pleuritic chest pain. CT scan revealed pulmonary embolism and doppler showed vascular access (Hero graft) thrombosis. Patient was treated with heparin and warfarin, and was discharged on 5/5/2021 after being converted to apixaban. Patient missed scheduled dialysis treatment (no call/no show) on 5/8/21 and 5/11/21. Subsequent welfare check found the patient expired at home.
5/18/2021	1325911	MD	61	F	5/6/2021	5/7/2021	stated that her mother in law died; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (stated that her mother in law died) in a 61-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 06-May-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 07-May-2021 The patient died on 07-May-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Not Provided Concomitant medications and treatment information was not provided. A 61-year-old female patient who received mRNA-1273 died 2 days after the first dose of vaccine. No medical condition or conmeds were provided. The cause of death was not reported. Very limited information has been reported at this time. Further information is being followed up.; Sender's Comments: A 61-year-old female patient who received mRNA-1273 died 2 days after the first dose of vaccine. No medical condition or conmeds were provided. The cause of death was not reported. Very limited information has been reported at this time. Further information is being followed up.; Reported Cause(s) of Death: Unknown cause of death
5/18/2021	1325423	IL	53	F	3/10/2021	3/15/2021	Swollen glands & cellulitis

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5/18/2021	1326271			M			Cardiac arrest; This is a spontaneous report from a contactable consumer reporting for her uncle. A male patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unspecified date in 2021, at single dose, for COVID-19 immunization. Medical history included COPD. Concomitant medications were not reported. A week after the patient got his COVID shot, he was dead, he had a cardiac arrest on an unspecified date in 2021, with fatal outcome. This just happened last month. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested. ; Reported Cause(s) of Death: Cardiac arrest
5/18/2021	1327755	MO	47	F	3/21/2021	4/23/2021	Hospitalized for COVID-19 pneumonia on 4/23, ICU on 5/3, passed on 5/17 of 2021
5/18/2021	1326587	WA	78	M	4/20/2021	5/8/2021	Wife came in for second dose appointment and handed over husbands vaccination card. Wife reported patient died on Saturday after waking up in the morning and deciding to sleep in for a bit longer. She reported getting out of bed and he was breathing and when she went back to wake him up he wouldn't wake. She called 911 and he was pulseless, she reported emergency aid "Shocked him" and worked on him for 45 minutes before asking her for permission to stop. Site will destroy vaccine card as the wife did not wish to keep it.
5/18/2021	1327468	MD	63	F	3/29/2021	3/30/2021	She did not have control of her bowels when sneezed or coughing. She complained of trouble breathing and in a lot of pain. She passed away on April 3 with pneumonia
5/18/2021	1328751	TX	41	M	12/20/2020	3/20/2021	He is a co worker and he passed away in his sleep I heard. One of 3 nurses that died in the medical center since the vaccine roll out
5/18/2021	1328722	TX	33	F	12/20/2020	2/7/2021	Was told she died in her sleep. This is one of 3 nurses in the medical center that passed away suddenly. Vaccine roll out was December 2020, unknown exact date or type

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5/18/2021	1327985	CA	57	M	5/7/2021	5/13/2021	Patient did not seek medical care following vaccination. Coworkers report patient was feeling ill on 13 May 2021. Coworkers report patient was experiencing difficulty swallowing, difficulty speaking, unable to use hand, and off balance walking. Patient expired between 14-17 May 2021 (coroners report pending).
5/18/2021	1328936	CO	78	F	5/16/2021	5/17/2021	pt. daughter called pharmacy on May 18, 2021 (approximately 5:00pm MST) stating pt. passed away and wanted info on reporting incident to authorities=Technician gave pt. daughter phone # to report incident.
5/18/2021	1327727	MA	94	F	3/1/2021	3/1/2021	She went to the hospital, had a stroke
5/18/2021	1327666	TN	75	F	2/8/2021	5/4/2021	Patient received second Pfizer vaccine on 2/8/2021. Became symptomatic with COVID like S/S on 4/30/2021. Was admitted to Hospital on 5/4/2021 and tested positive for COVID 19 upon admission. Patient was intubated on 5/12/21 and expired while still admitted to the hospital on 5/17/21.
5/18/2021	1327652	NY	56	F	5/13/2021	5/16/2021	Approximately 48 - 72 hours after vaccine was administered, she was found deceased in am of 05/16/2021
5/18/2021	1327629	FL	77	M	12/30/2020	1/1/2021	Pt with history of recovered Covid, developed sudden abdominal pain, distention, emesis, diagnosed with bowel infarct and pneumonia, one day after 1st covid vaccine. Died 1/5/21 in hospice.
5/18/2021	1327598	MN	68	F	3/26/2021	4/28/2021	EMS dispatched to scene of home with CPR in progress. Pt. was in VTACH and shocked X1, Epinephrine X 2, Bicarb X 1. Return of circulation which was lost enroute to ED. CPR started again. Blood/Frothy sputum noted from tube and mouth. pupils 3 mm, sluggish. mottled skin in extremities. Glasgow coma score of 3. In the ED Epi, bicarb, Ketalar, Lasix, CaCL, norepi Pt. transferred by helicopter to higher level of care,
5/18/2021	1327551	IA	60	F	5/14/2021	5/16/2021	Second vaccine 5/14/21 and death on 5/16/21

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5/18/2021		1327525	MA	82	F	2/6/2021		She received her first dose on 2/6/21 around 11:30 a.m. On 2/7/21 she was a bit tired and her arm was a little sore. Sometime after the afternoon of 2/7/21 and the morning of 2/8/21 she was found unconscious and unresponsive on the floor. As her dinner from the evening of 2/7/21 was still on the table unfinished and she was fully dressed we assume that whatever caused her to end up on the floor unconscious happened on 2/7/21. She was taken to the emergency room and it was determined that she was not going to survive. She never regained consciousness and was having seizures all the way to the hospital in the back of the ambulance. She was made comfortable and passed on 2/11/21.
5/18/2021		1328720	KY	48	M	4/1/2021	5/18/2021	Patient was admitted to the hospital on 04/15/2021. He was in the ICU and on a ventilator for majority of the time.
5/17/2021		1323260	ME	51	F	4/17/2021	4/27/2021	Patient did not show for 2nd dose appointment scheduled for 5/15/21. Clinic staff contacted caregiver who notified that patient had expired 10 days after her first dose of Moderna.
5/17/2021		1323317	IL	79	F	4/7/2021	4/28/2021	Hospitalization and death within 30 days of vaccination. Admitted to Hospital with COPD, Sepsis, UTI, Aspiration Pneumonia.
5/17/2021		1323117		72	F	3/9/2021	3/26/2021	Death ABDOMINAL PAIN BACK PAIN J18.9, J91.8 - Pleural effusion associated with pulmonary infection E87.1 - Hyponatremia N13.2 - Hydronephrosis with renal and ureteral calculous obstruction C79.9 - Metastatic disease (CMS/HCC)
5/17/2021		1323208		77	M	1/22/2021	2/16/2021	SYNCOPE FATIGUE
5/17/2021		1323178	TN	84	M	2/17/2021	2/17/2021	Worsening shortness of breath since the vaccination; collapsed in bathroom on day 10 post-vaccination
5/17/2021		1323163	NY	51	M	4/30/2021	5/4/2021	Patient was admitted to the hospital on 4/5/2021 for severe AKI with hyperkalemia. Patient had a prolonged hospital course due to kidney failure and AIDS. The patient developed acute respiratory failure on 5/1/21 and was transferred to the ICU, where he was found to be in septic shock. Patient passed away on 5/4/21 at 9:59am

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5/17/2021	1323124		73	F	3/26/2021	5/4/2021	This 73 year old female patient received the Covid shot on 3/26/21 died on 5/4/21.
5/17/2021	1323120		82	M	3/15/2021	5/10/2021	Death Acute Kidney Failure E87.5 - Hyperkalemia M54.9, G89.29 - Chronic back pain N17.9, N18.9 - Acute on chronic renal failure VOMITING DIARRHEA BACK PAIN DIZZINESS LEG SWELLING
5/17/2021	1323109		69	M	2/15/2021	3/8/2021	Death A41.50 - Gram-negative sepsis, unspecified K81.0 - Acute cholecystitis E86.0 - Dehydration E83.42 - Hypomagnesemia N39.0 - Urinary tract infection E87.2 - Respiratory acidosis R06.89 - Hypercarbia T85.518A - Cholecystostomy tube dysfunction, initial encounter D72.829 - Leukocytosis, unspecified type
5/17/2021	1323102		85	M	2/13/2021	5/11/2021	Death J98.4 - Cavitory lesion of lung R50.9 - Fever, unspecified fever cause
5/17/2021	1323098		83	F	3/24/2021	5/1/2021	This 83 year old black woman received the 2nd dose of vaccine on 3/24/21 and died early May 2021
5/17/2021	1323057	NY	65	M	4/4/2021	4/5/2021	Death
5/17/2021	1322956	OH	81	M	2/4/2021	5/15/2021	Patient got second dose of the vaccine on 2/4/2021. He was diagnosed with COVID 19 on 5/15/2021 (he was negative on 3/19/2021). He was hypoxic, developed changed in mental status. Died on 5/16/2021
5/17/2021	1322807	MI	85	M	3/11/2021	4/27/2021	Patient was seen by an outpatient provided and was referred to emergency department due to hypoxis and respiratory distress on 4/27/21. He was found to by COVID-19 positive at that time. He was admitted to the hospital for further management. on 4/28/21, his condition declined. He was intubated and transferred to the ICU. Patient went into severe acute kidney injury and eventually into multi-system organ failure. He was placed on comfort measures on and was pronounced dead on 5/15/21.

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5/17/2021	1322554			F			DEATH; This spontaneous report received from a company representative via social media concerned a female patient of unspecified age. The patient's weight, height, and medical history were not reported. The patient received Covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, Expiry: Unknown) dose not reported, 1 total, on an unspecified date, for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. In 2021, after 2 weeks of vaccination, the patient was deceased (unknown cause). It was unknown if the autopsy was performed or not. The action taken with Covid-19 vaccine ad26.cov2.s was not applicable. The outcome of the event was fatal. This report was serious (Death). This case, from the same reporter is linked to 20210517056.; Sender's Comments: V0; 20210516695-COVID-19 VACCINE AD26.COV2.S-Death. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/17/2021	1323351	IL	79	M	4/14/2021	5/12/2021	Death within 30 days of vaccination.

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5/17/2021	1322556	CA		U			DEATH; STROKE; This spontaneous report received from a consumer concerned eight patients with unknown race and ethnicity. The patients' weight, height, and medical history were not reported. The patients received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patients had stroke and died after getting the Janssen Covid-19 vaccine, the patients died from unknown cause of death and it was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0.20210516928-covid-19 vaccine ad26.cov2.s-Death,Stroke. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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5/17/2021	1322563	CA		M			BLOOD CLOTS; This spontaneous report received from a consumer who reported hearing a news report concerned a male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number not reported, expiry not reported frequency one total, dose, therapy start date were not reported administered for prophylactic vaccination. The batch number was not reported and has been requested.No concomitant medications were reported. On an unspecified date, the patient had blood clots. On an unspecified date in 2021, the patient was died due to blood clots. it was not reported whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died due to blood clot on an unspecified date in 2021. This report was serious (Death). This case, from the same reporter is linked to 20210523500.; Sender's Comments: V0. 20210522533-COVID-19 VACCINE AD26.COVS.S-Blood clots. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: BLOOD CLOTS
5/17/2021	1324469	CA	54	F	5/13/2021	5/14/2021	Pt received vaccination on 05/13. The following day developed fever. On 05/15 she developed sore throat and vomiting. Her sore throat progressed where she could not speak or talk. She was seen in the ER and in respiratory failure. She was intubated and developed septic shock. Labs notable for WBC 0.1, platelets 32. INR elevated at 2.2. She had renal failure and shock liver and evidence of DIC. Blood cultures grew gram negative rods. She eventually died from septic shock.
5/17/2021	1323372	MN	77	M	3/2/2021	5/16/2021	Patient received both doses of Pfizer vaccine (#1 on 2/9/21, #2 on 3/2/21) and was fully vaccinated when he presented to the ED on 5/9/21 w/ 3 week h/o cough, shortness of breath,. Tested positive for COVID19 by PCR on 5/10/21. Patient treated w/ Remdesivir, Dexamethasone, and convalescent plasma. Was on ventilator. Expired on 5/16/21 due to Acute Respiratory Failure with Hypoxia, Pneumonia due to COVID-19.

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5/17/2021	1322484	NV	37	M	5/5/2021	5/6/2021	About a week after his first dose he developed a skin reaction at the injection site. Redness, swelling, itching. The affected area was about 10 inches by 6 inches. The day following the second dose of the vaccine he developed chills, sweats, aches, and a low grade fever. He also developed the same skin reaction. He had these symptoms for 2 days (Thurs and fri). By Saturday his condition was improving. Sunday was even better, Monday evening he died. He was 37 with no known medical issues. He just died out of nowhere.
5/17/2021	1325015	VA	63	F	4/28/2021	4/28/2021	Severe headache nauseous
5/17/2021	1324268	VA	79	M	2/10/2021	3/6/2021	Lethargy, Exhaustion, Inability to Walk, Heart Attack and Death from Acute Cardiac Arrest
5/17/2021	1324154	IL	90	F	2/1/2021	5/2/2021	5/2/2021 - productive persistent cough and poor appetite. Received physician order to transfer to Hospital for evaluation.
5/17/2021	1324012	CA	62	M	4/19/2021	5/8/2021	Acute trouble breathing followed by fainting/loss of consciousness. Chest compressions were started as paramedics were on the way. Paramedics worked on my dad for over 30 minutes but were unable to revive him. They stated he went into cardiac arrest.
5/17/2021	1323752	KY	69	F	5/5/2021	5/9/2021	Clinic contacted patient date of death: 05/09/2021. No other information on symptoms, signs experienced prior to time of death.
5/17/2021	1323719	MT	41	F	3/11/2021	3/25/2021	Patient is a 41 y.o. female, reported history of asthma, obesity, polysubstance use, is transferred to the hospital via EMS in cardiac arrest. Per EMS report, the patient was found in an apartment complex by a neighbor unconscious. The initial report was that she was breathing however EMS was called back and then told that she was not breathing and not responsive. Estimated downtime was between 5 and 8 minutes before paramedics arrived and initiated CPR. Due to the patient's body habitus, it did take approximately 15 minutes to get the patient transported to the hospital. 3 rounds of epinephrine were given in the field. Her rhythm has been asystole prior to getting to the emergency department. Intraosseous access is obtained. There is an OPA in place.

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5/17/2021	1323673	MO	54	M	4/29/2021	4/30/2021	Subsequently developed respiratory distress and pneumonia after testing positive for COVID. Pt died due to illness.
5/17/2021	1323657	MI	85	M	1/6/2021	4/13/2021	Pt presented from a nursing home due to AMS. Was found to be COVID positive post vaccination. Pt was diagnosed with COVID pneumonia.
5/17/2021	1323654	CA	83	F	3/10/2021	3/10/2021	My mom died one month after the second moderna shot it made her very sick and she never recovered . Headache stomach ache chills fever shaking and death
5/17/2021	1323599	CA	80	F	3/5/2021	3/19/2021	Sudden death due to heart failure (patient without any underlying heart conditions or experiencing any symptoms prior to death). Called 911 when family noticing patient being unconscious; 911 arrived detecting weak heart beats and took the patients to the nearest emergency room. Heart stopped beating when arriving at emergency room.
5/17/2021	1323593	NJ	63	M	5/12/2021	5/12/2021	Family reported patient passed away in the evening.
5/17/2021	1323392	FL	47	M	5/13/2021	5/15/2021	None reported
5/17/2021	1323550	OH	87	F	2/22/2021	5/2/2021	Patient received Moderna COVID vaccine on 2/1/2021 and 2/22/2021. Pt. presented to Medical center within Health system with weakness and arm and leg swelling on 3/4/2021. Admitted for observation, tested negative for COVID and discharged on 3/5. Pt. presented to Medical Center, also within Health system on 5/2/2021 complaining of SOB. Stated that she has had non-productive cough for months, but felt it had worsened lately. Pt. found to be COVID positive with bilateral infiltrates. Pt. required 6L O2. Pt. was DNRCCA. Pt. not intubated but expired from cardiac arrest/COVID on 5/16/2021.

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5/17/2021	1323514	GA	54	M	5/14/2021	5/16/2021	Son came into Health Dept this morning to report that his father began throwing up and having diarrhea Saturday morning(05/15/2021) which progressed through the day. States did not want to go to the Hospital but wanted to wait to see his MD at the Dialysis center on Monday (05/17/2021). On Sunday(05/16/2021) nausea and vomiting and diarrhea was worse and now with cough noted. States was washing his hands and fainted, EMS was called and he died that morning.
5/17/2021	1323699	CA	83	M	1/28/2001	1/28/2021	My uncle, died on February 17, 2021. He was admitted on February 2, 2021 6 days after taking the COVID-19 Moderna vaccine (1/28/2021). After the shot was administered, he developed all the COVID-19 symptoms (loss of taste, smell, high temperature, and had trouble breathing). He was deprived of oxygen and had labored breathing and was acting confused. The home health nurse contacted his primary care physician and was instructed to bring him into the ER.
5/17/2021	1324523	AK	68	F	5/14/2021	5/15/2021	Witnessed Cardiac arrest at home. No bystander CPR; +30 min transport time, unsuccessful resuscitation. Code called upon arrival to hospital
5/16/2021	1322292	GA	61	M	4/23/2021	5/1/2021	Complained of chest pain at 3:50 pm may 15th. He went and layed down across his bed was coherent and talking, suddenly passed out. 911 was called and chest compressions were started. Ambulance arrived his condition was 60/40 bp and heart rate of 40. Taken to hospital where he never recovered and passed away.
5/16/2021	1321832	NV	48	F	4/30/2021	5/2/2021	Per her father on 5/2/21 she had kidney and liver failure and was admitted to the hospital. Was notified on 5/15/21 by her mother that she passed away. They are performing an autopsy to determine the cause.
5/16/2021	1321898	MD	63	M	5/1/2021	5/7/2021	patient died aprox 1 week after the 2nd dose . presumed cause of death stated by son was GI bleed. Not confirmed to be caused by the vaccine. Autopsy not performed according to the son.

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5/16/2021	1322255	WI	72	M	5/14/2021	5/15/2021	At approximately 8 pm pt. sucked in a deep breath, head began to roll and he began twitching on the right side of his body. Pt. only has muscle function in the right side of his body due to his stroke damage. His wife immediately approached him in his chair and asked him what was wrong and all he was able to state was "I don't know" before loosing consciousness and stopping breathing. 911 was immediately called and due to his wife being frail herself she was not able to remove him from his wheelchair to perform any CPR. EMS arrived and begin performing CPR until the DNR papers for pt. were located. Medical examiner came to the home and stated she did not feel that an autopsy was needed even though family had told her NUMEROUS times that pt. had received his second Covid vaccine the day prior. He was pronounced dead by the medical examiner and taken directly to the funeral home due to the DNR papers being present.
5/16/2021	1322310	MO	34	M	4/7/2021	4/7/2021	Death. Coroner said collapsed of unknown cause. Autopsy performed. Awaiting final report and toxicology report.
5/16/2021	1321517	PR	23	M	4/30/2021	5/1/2021	He did not told me about any symptoms. He just died the next day of the vaccine. Still today doesn't know why he died. He appeared to be in good health.
5/16/2021	1322176	MA	44	M	5/13/2021	5/14/2021	patient passed away ~24-48 hours after time of vaccination

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5/15/2021	1320312	CT		M	2/1/2021	4/9/2021	first dose on 21Jan2021 and second dose on 01Feb2021; passed away; This is a spontaneous report from a Pfizer-sponsored program from a contactable consumer (patient's wife). A male patient of an unspecified age received the 2nd dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), via an unspecified route of administration, on 01Feb2021, as single dose, for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. Previously the patient received the 1st dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech) for COVID-19 immunisation and experienced a terrible reaction. The patient passed away (death) on 09Apr2021. It was unknown if an autopsy was performed. The information on the lot/batch number has been requested.; Reported Cause(s) of Death: passed away
5/15/2021	1319776			M			DEATH; STROKE; EXTRA DOSE ADMINISTERED; This spontaneous report received from a consumer via social media concerned a male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown and expiry: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date, the patient administered extra dose and had a bad stroke within 12 hours of the 2nd dose. Later, the patient died. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of death on an unspecified date, and the outcome of extra dose administered was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0: 20210506977-Covid-19 vaccine ad26.cov2.s- Death, Stroke. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: STROKE

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5/15/2021	1319778	VA	66	F		4/28/2021	DEATH; BLOOD CLOT; This spontaneous report received from a health care professional concerned a 66 year old White and not Hispanic or Latino female. Initial information received from the health care professional on 05-MAY-2021 was processed with additional information obtained from live follow up with health care professional on 06-MAY-2021. The patient's height, and weight were not reported. The patient's concurrent conditions included high blood pressure, diabetes, high cholesterol, non smoker, non alcohol user and other pre-existing medical conditions included no known allergies, no drug abuse or illicit drug use. Lab work was done 3-4 months ago, the results of which were unavailable. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 202A21A, and expiry: Unknown) dose was not reported, 1 total, administered on 10-APR-2021 possibly left arm for prophylactic vaccination. Unspecified concomitant medications were reported. On 28-APR-2021, the patient developed right leg pain and right leg swelling also began around this time as well. On 04-MAY-2021, the patient died from blood clot. An autopsy was not performed. The reporter stated that the patient's death was related to Janssen covid-19 vaccination and blood clots. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of blood clot on 04-MAY-2021. This report was serious (Death).; Sender's Comments: V0:20210509157-JANSSEN COVID-19 VACCINE- Death, blood clot - These events are considered unassessable. The events have a compatible/suggestive temporal relationship, are unlabeled, and have unknown scientific plausibility. There is no information on any other factors potentially associated with the events.; Reported Cause(s) of Death: BLOOD CLOT

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5/15/2021	1320104			U			dropped dead; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported that a patient of unspecified gender in 20s received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection) via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as a single dose for covid-19 immunization. The patient medical history was not reported. The patient's concomitant medications were not reported. The reporter reported that someone in town in their 20s that had the Pfizer vaccine in the morning and dropped dead in the afternoon for no reason. Between all 3, there have been quite a bit of deaths in the last few months. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: dropped dead
5/15/2021	1320235			M			died from Pfizer vaccine of anaphylactic reaction; This is a spontaneous report from a non-contactable consumer. A 60-year-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as unknown, single for Covid-19 immunisation. Medical history included hypersensitivity (there was something he was allergic to it's what is used in contrast imaging). Concomitant medications were not reported. The patient had an anaphylactic reaction to the vaccination and through the anaphylactic reaction he passed away. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: Anaphylactic reaction

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5/15/2021	1320290	MI		M			Lungs filled up with fluid; could not breath after the second dose; This a spontaneous report from a contactable consumer via a Pfizer sales representative. An 89-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date as 2nd dose, single for COVID-19 immunization. Medical history included chronic obstructive pulmonary disease (COPD). The patient's concomitant medications were not reported. On an unspecified date, the patient died due to lungs filled with fluid and could not breath after the second dose. It was not reported if an autopsy was performed. Information on the batch/lot number has been requested.; Reported Cause(s) of Death: Lung filled up with fluid; could not breath after the second dose
5/15/2021	1320305			F	3/4/2021	3/22/2021	COVID-19 confirmed by positive COVID-19 test; COVID-19 confirmed by positive COVID-19 test; This is a spontaneous report from a non-contactable consumer. A 71-year-old female patient (reporter's mother) received 1st dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) at single dose via an unknown route on 04Mar2021 for Covid-19 immunization. Medical history and concomitant drug were not provided. It was unknown if the patient received any other vaccines within 4 weeks prior to the COVID vaccine. Prior to vaccination, the patient was not diagnosed with COVID-19. Patient contracted COVID a few days before her second dose (event onset date 22Mar2021). She felt symptoms about 3 days before she was scheduled to receive her second dose. Covid test on 23Mar2021 was positive. She was officially diagnosed with COVID on 25Mar2021, the day of her scheduled second dose, which she did not get. She died several days later. The adverse event result in doctor or other healthcare professional office/clinic visit. Treatment received for the event. The patient died on an unknown date with death cause of COVID. It was unknown if autopsy performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: COVID-19 confirmed by positive COVID-19 test; COVID-19 confirmed by positive COVID-19 test

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5/15/2021	1320362	MS	70	M	5/6/2021	5/7/2021	patient passed away, due to what was being told as possible blood clot in lungs; This is a spontaneous report from a contactable consumer. A 70-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 06May2021 (Lot Number: ER8633) (at the age of 70-year-old) as single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient did not experienced COVID-19 prior or post vaccination. The patient passed away, due to what was being told as possible blood clot in lungs (on 07May2021). The event was serious (fatal) and required emergency room visit. It was not reported if an autopsy was performed.; Reported Cause(s) of Death: blood clot in his lungs

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5/15/2021	1320378	FL	78	M	3/20/2021	3/1/2021	DVT was twice as bad; death/natural process; This is a spontaneous report from a contactable Nurse reporting for reporter's husband. A 78-year-old male patient received bnt162b2 (reported as COVID vaccine), dose 2 via an unspecified route of administration on 20Mar2021 (Lot Number: EN6201; Expiration Date: 30Jun2021) as 2nd dose, single (at the age of 78-year-old) for COVID-19 immunisation. Medical history included diabetes, Liver cirrhosis, thrombocytopenia, Kidney stone, sarcoidosis, blood pressure abnormal, high cholesterol, pacemaker and they putted the IVC filter for blood clot. Concomitant medications included insulin, simvastatin, hydrochlorothiazide and omeprazole (PROTONIX), all taken for an unspecified indication, start and stop date were not reported; and carvedilol (COREG) taken for blood pressure, start and stop date were not reported. The patient previously received the first dose of bnt162b2 (Lot Number: EN6201; Expiration Date: 30Jun2021) on 27Feb2021 at the age of 78-year-old for COVID-19 immunization and experienced pulmonary embolism and deep vein thrombosis (DVT) on 12Mar2021, and went into the hospital 12Mar2021. Then the patient had the second COVID shot on 20Mar2021 and the reporter had taken him right back into the hospital couple days later because the DVT got twice as worst. The patient experienced DVT was twice as bad on an unspecified date in Mar2021, which required hospitalization on 22Mar2021. The patient underwent lab tests, he had lab tests on 22Mar2021 when he went in and he probably had them on 23rd and 24th of Mar2021. The reporter didn't know what all the lab tests were done in the hospital. The patient died on 12Apr2021. The reporter stated they put Reason of death as natural process because she sent him in the Hospice. An autopsy was not performed. The outcome of event DVT was unknown. The reporter considered there was a causal relationship, when he got his second COVID shot on 20Mar2021 and then he went back in the hospital on 22Mar2021 and the DVT was twice as bad.; Sender's Comments: Based on a positive temporal association, a possible contributory role of the suspect BNT162B2 cannot be excluded for the reported DVT. 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

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						events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: death/natural process
5/15/2021	1320726 FL	86 M	2/17/2021	2/27/2021		One week after receiving the injection, patient went into complete kidney failure. Patient died on May 14, 2021
5/15/2021	1321140 CA	78 F	2/4/2021	2/12/2021		My mom, got her first Moderna shot on Feb. 4th, 2021 and developed thrombosis in the legs about a week later. She went to the doctor, who at first didn't want to see her and told her to elevate her leg. Pt. had a scheduled eye appointment on Feb. 12th with an other doctor and when she asked if she had any other issues, pt. showed her her leg. The eye doctor immediately told her to go to urgent care. When she did she received blood thinners and started injections in her stomach for 5 days. Feb. 18th pt. suffered a mini stroke and went to the hospital emergency room. She was transferred over to another facility in the afternoon and kept overnight. She had a phone appointment with the Dr. on Feb. 24th and on the 26th she received a heart monitor to wear for 2 weeks. She also had a check up about her leg, which was still swollen. On March 4, pt. received her second Moderna shot and she was feverish and very tired for days and weeks after. By March 18th her condition didn't improve at all and in fact she was felling really bad over night, so on March 19th she was admitted again to the hospital. She was monitored and kept over night, but during the early morning she suffered a stroke and a heart attack and passed way the next day.
5/15/2021	1321161 PR	57 M	5/6/2021	5/9/2021		Patient was vaccinated on May 6,2021. On Friday May 14 ,2021 a relative of the patient report that the patient died on May 9,2021..She report that the patient doesn't take the prescriptions needed for a vascular condition he have and was suppose to received medicines by mail on tuesday before vaccination

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5/15/2021	1326284	CA	54	F	4/26/2021	4/29/2021	Pt. passed away 2 days after vaccination. At time of vaccination pt. already in moribund state related to long term diabetes mellitus1 with ESRD, chronic foot wound since 2017, severe osteoarthritis. In March 2021 pt. hospitalized d/t severe pain. Findings were acute encephalopathy likely multifactoral, abnormal EEG and NSTEMI. Pt. refused further diagnostic in the hospital and resumed home hemodialysis with help of her spouse. Hospice care was considered by the couple shortly before the time of vaccination.
5/15/2021	1320319			U			Girl's family who got vaccinated died along with their dog due to have been being exposed to the members who got vaccinated; 11 year old, pre-period, girls family who got vaccinated; This is a spontaneous report from a contactable consumer. A 11-years-old patient of an unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The reporter reported that 11 year old, pre-period, girls family who got vaccinated died along with their dog due to have been being exposed to the members who got vaccinated. The patient died on an unspecified date. It was not reported if an autopsy was performed. The lot/batch number has been requested; Reported Cause(s) of Death: Girl's family who got vaccinated died along with their dog due to have been being exposed to the members who got vaccinated
5/15/2021	1321401	CA	76	F	5/12/2021	5/15/2021	Pt presented with coffee ground emesis and acute st elevation myocardia infarction. She was DNR. She was admitted and expired in a few hours.

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5/14/2021		1318152	SC	77	F	2/18/2021	2/19/2021	(Information gained secondhand from patient's close friend as patient was intubated and sedated at the time that potential relationship between events and vaccine administration recognized). 77 yo F with no known significant PMH (was independent in ADLs, active, line-danced twice/week) who developed nausea, headache, fatigue on first day after first dose of Moderna vaccine. Friend reports that patient complained of "just not feeling right" following vaccine administration. Complained of poor sleep, poor appetite, dyspepsia and began complaining of lower extremity swelling in the weeks following vaccine administration. Was no longer able to line-dance, etc. Was fatigued. Her friends became concerned and encouraged her to seek medical attention, patient reported that she had been prescribed "water pill" and told to "lay off salt,". Friends later found out that she had lied about doctor's visit and was self-medicating with over the counter "water pills" for all of the water weight she was gaining. Eventually developed worsening shortness of breath. Admitted to hospital on 5/4 with shortness of breath and worsening abdominal pain. Found to have systolic heart failure (EF 20-30%) and was in SVT. Also diagnosed with UTI and SMV thrombus. Grossly anasarctic on exam. Treated for heart failure with diuretic and for her UTI with antibiotics, was started on Heparin drip for SMV thrombus. Underwent left heart catheterization at OSH that was negative for significant CAD. Developed worsening septic shock and was transferred to our hospital for higher level of care. Unfortunately had ongoing decline, found to be fungemic. Eventually succumbed to her septic shock, passed away on 5/14/21. Patient had second dose of vaccine on 3/18/21 according to vaccine card in her purse. Friend states that because of symptoms she developed after first dose of vaccine, she was fearful of getting second dose. Friends insist that she was well before the vaccine---knee pain was limiting factor for her activity level, never shortness of breath. Of note, several friends tested positive for COVID on 2/11/21, the week prior to patient receiving her vaccine. Patient tested negative and reportedly got tested at frequent intervals and was always negative.

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5/14/2021	1317164	PA	88	M	4/7/2021	4/25/2021	Upon reviewing patient's need for 2nd dose, we learned that patient died on 4/25/21.
5/14/2021	1317043	AL	65	F	3/18/2021	5/3/2021	Spontaneous Cortical Non aneurysmal subarachnoid hemorrhage with diagnostic suspicion but not confirmation of cortical venous thrombosis, and spontaneous ventricular tachycardia.
5/14/2021	1317011	CA	87	M	4/27/2021	4/30/2021	death
5/14/2021	1316962	GA	82	M	1/11/2021	4/29/2021	Cause of Death: SENILE DEGENERATION OF THE BRAIN, CHRONIC SACRAL PRESSURE ULCER, DEPRESSION
5/14/2021	1316960	MI	85	F	2/8/2021	2/8/2021	ADMITTED TO HSOPITAL, EXPIRED
5/14/2021	1316707	WV	65	M	5/12/2021	5/13/2021	Patient became suddenly short of breath, unresponsive, attempted CPR unsuccessfully and patient expired.
5/14/2021	1316645	NY	80	F	3/4/2021	4/15/2021	Patient received dose 1 of the pfizer covid vaccine on 1/22/21 and dose 2 on 3/4/21. Patient was diagnosed with COVID on 4/22 at outside clinic after presenting with about a week of cough, nausea and fatigue. On 5/2/21 she presented to our emergency department with persistence of the above symptoms and hypoxia to the 70s on room air and again tested positive for COVID. Initially required BIPAP then HFNC. She was treated with broad spectrum antibiotics for 7 days and dexamethasone for 10 days. She was offered tocilizumab and remdesivir but refused. She clinically improved and was weaned down to 2L NC w/saturation of 93%. However on 5/13 she acutely desaturated and was found pulseless. Patient was DNR/DNI so was pronounced dead.
5/14/2021	1316583	NC	77	M	3/1/2021	3/22/2021	Couldn't Breath, Died due to Blood Clots on Lungs, Bilateral Pulmonary Embolism, Bleeding on the Brain.

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5/14/2021	1316353	MI		F			DIED AFTER COMPLICATION FROM THE JOHNSON AND JOHNSON COVID-19 VACCINE; This spontaneous report received from a patient via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, administered on 2021 for prophylactic vaccination. No concomitant medications were reported. On 2021, the patient died after complication from the Johnson & Johnson COVID-19 vaccine. The cause of death was unknown. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0;20210516437-covid-19 vaccine ad26.cov2.-Died after complication from the Johnson & Johnson COVID-19 vaccine. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: DIED
5/14/2021	1317203	CA	36	M	4/14/2021	4/15/2021	Started having pain in right hip on 4/15/2021. On 4/16/2021 complained more about right hip, said feels like he got hit by a truck, and that he felt like he was starting to get a cold. Then he died the night of 4/16/2021.

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5/14/2021	1316349			F			This spontaneous report received from a consumer via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown and expiry: Unknown) dose, start therapy date were not reported, 1 total administered for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient died from blood clot. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0. 20210514012-COVID-19 VACCINE AD26.COV2.S-Blood clot. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: BLOOD CLOT
5/14/2021	1317481 TX		81	M	1/27/2021	1/29/2021	Received vaccine 1/27/21, passed away in his sleep 1/29/21.
5/14/2021	1317744 WI		55	M	5/13/2021	5/13/2021	Death
5/14/2021	1317355		61	F	3/13/2021	5/13/2021	death
5/14/2021	1318046 CO		65	M	4/5/2021	4/27/2021	Per report from family, pt had been feeling unwell for 3-4 weeks prior to event on 4/27 where he collapsed and suffered a cardiac arrest. No interventions were performed until EMS arrived 10-15 mins later (again, per family report). Pt was revived following CPR, and suffered a 2nd episode of cardiac arrest (possible in the ED). Pt was noted to have PEA at that time. Pt was intubated and vented in ICU. Pt was cooled x24 hours (unsure of protocol name) and rewarmed over 24 hours more. Pt was weaned from all paralytics, etc. Per RN reports, pt failed all neuro tests except R eye went from 3 > 2 mm (4/29 +). Pt was transitioned to comfort care on 4/30 and passed within 5 minutes.

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5/14/2021		1317417	SC	92	F	4/13/2021	5/9/2021	Cardiac arrest at home Patient found down at home by son; son found patient drooling; initially thought she was sleeping but found her with her eyes open sitting in a recliner unresponsive at home. EMS arrived and CPR was initiated; patient was intubated and transferred to local hospital. CPR was performed approximately 10 minutes. Per family, patient was in normal state of health prior to incident
5/14/2021		1317401	PA	87	M	4/7/2021	5/11/2021	Upon reviewing patient's need for 2nd dose of Moderna, patient's power of attorney informed me that the patient passed away on 5/11/21 without any further information disclosed.
5/14/2021		1317389		66	M	2/17/2021	3/22/2021	Z79.01 - Chronic anticoagulation J18.9 - Left lower lobe pneumonia R29.6 - Multiple falls A41.9 - Sepsis (CMS/HCC) R09.02 - Hypoxemia J44.1 - COPD exacerbation (CMS/HCC) I50.9 - CHF exacerbation (CMS/HCC) R79.89 - Elevated brain natriuretic peptide (BNP) level
5/14/2021		1317378		99	F	4/9/2021	5/8/2021	This 99 year old female received the Covid shot on 4/9/21 and died on 5/8/21.
5/14/2021		1317367		82	M	3/4/2021	4/29/2021	U07.1, J12.82 - Pneumonia due to COVID-19 virus U07.1, J96.00 - Acute respiratory failure due to COVID-19
5/14/2021		1317359		94	M	2/16/2021	5/12/2021	death
5/14/2021		1319357	CT	72	F	3/11/2021	3/18/2021	Died of cardiac shock one week after second dose
5/13/2021		1314186	PA	79	M	3/20/2021	4/7/2021	? Sore Throat ? Cough ? Abdominal Pain Diarrhea Sinus congestion
5/13/2021		1313837	PA	68	M	4/7/2021	4/8/2021	He died 24 hours later after receiving the vaccine!
5/13/2021		1313860	RI	85	M	3/13/2021	4/13/2021	patient received Covid 19 vaccine Johnston and Johnston on 03/13/2021, became positive for covid on 04/13/2021, went to hosp, admitted
5/13/2021		1313888	IL	86	F	3/1/2021	3/15/2021	Health Department was notified of patient death. Health Department was not informed of cause of death. VAERS report completed.

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5/13/2021	1313922	MI	35	M	4/13/2021	4/15/2021	PT NO SHOW FOR APPT 5/11 FOR 2ND DOSE - CHECK OF agency system SHOWS PT REPORTED DECEASED 5/14- CHECK OF database SHOWS PT FOUND DECEASED AT HOMEN 5/14/21- AUTOPSY Completed

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5/13/2021		1313931	PA	79	F	3/24/2021	4/4/2021	ED Discharged 4/4/2021 (4 hours) Hospital Emergency Department Last attending ? Treatment team Generalized weakness +4 more Clinical impression Weakness - Generalized ? Chills Chief complaint ED Provider Notes Emergency Medicine Expand AllCollapse All HPI Chief Complaint Patient presents with ? Weakness - Generalized ? Chills HPI 79-year-old female, history of COPD for which she wears oxygen at night and as needed, also with a history of leukemia and obesity who presents to the ED complaining of generalized body aches, fevers up to 103, feeling generally unwell and weak, poor sleep, onset 3 to 4 days ago. Patient reports that she received her second COVID-19 vaccine approximately 1 week ago. Tolerated this without any particular symptoms. She has had 2 days of watery/nonbloody diarrhea. Does admit to nausea with several episodes of vomiting earlier today. She is denying any particular abdominal pain. Does believe she felt her urine burning earlier today but has had no gross hematuria. Denies any flank pain. No ill contacts although her husband has been at home with a slight cough. Patient does have a cough presently but it is nonproductive. She is denying any particular chest pain or subjective shortness of breath. No rash or unusual lower extremity pain, swelling, or redness. ED to Hosp-Admission Discharged 4/6/2021 - 4/17/2021 (11 days) Hospital Last attending ? Treatment team Severe sepsis (CMS/HCC) Principal problem Discharge Summary Internal Medicine Inpatient DeathSummary BRIEF OVERVIEW Admission Date: 4/6/2021 Discharge Date: 4/17/2021 DETAILS OF HOSPITAL STAY Presenting Problem/History of Present Illness/Reason for Admission Patient is an 79 y.o. female morbidly obese with past medical history of chronic lymphocytic leukemia follow-up that was initially scheduled oncology follow-up for April 7 now postponed to the next 2 weeks, COPD on 2 L oxygen support at home, GERD, depression and anxiety. She was recently seen in the ED on April 4, 2021 with complaint of shortness of breath, nonproductive cough, fever, chills, nonbloody diarrhea, vomiting and weakness and subsequently diagnosed with COVID-19. She had however received a second dose of COVID-19 a week before and was discharged home due to lack of significant findings on imaging chest x-ray and lack of

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requirement for higher oxygen support. She presented to the emergency via EMS for evaluation of progressive shortness of breath with associated with fever, chills, headache, persistent shortness of breath, cough productive of thick clear sputum, nausea, vomiting and diarrhea. She denies abdominal pain, chest pain, or dizziness. Denies recent antibiotic usage or recent travel. Apparently, she thought she was getting better upon discharge after being kept for about 12 hours in the last ED visit, however she was not feeling well after going to bed last night and asked the husband to call 911. Upon EMS arrival patient was saturating in the 80s and in respiratory distress. She received 1 DuoNeb and was eventually placed on 10 L oxygen support. She was noted to be in significant respiratory distress during speech. Hospital Course Patient was admitted to hospital due to shortness of breath, and was found to have severe sepsis on presentation due to COVID-19 pneumonia. She had evidence of acute on chronic hypoxic respiratory failure as well. She was started on IV antibiotics, as well as remdesivir and Decadron at high dose. Unfortunately she continued to have clinical deterioration, and ultimately required high flow oxygen therapy. She was then transferred to the ICU, and ultimately required intubation due to severe profound ongoing hypoxia despite optimal medical treatment. She did not respond to remdesivir or steroids or antibiotics. Post intubation, she also developed acute renal failure during the course of her admission. Multiple discussions were had throughout the hospitalization regarding goals of care, and initially patient and family wish to be continually aggressive. She received full medical treatment, including life support, with minimal improvement. Despite being on ventilator for roughly 5 days, she continued to have severe hypoxia. She was prone, and was unable to sustain oxygen saturations when supine even for short period. Her renal function continued to decline as well, and at that point discussion was had with family regarding goals of care again. They were explained that symptoms continue to be persistent, and her illness continues to progress despite aggressive medical therapy. Ultimately decision was made to not pursue dialysis, and to allow the patient to be kept comfortable and pass away naturally from this infection. She was terminally extubated on 4/17 and passed away

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at 11:16 AM due to COVID-19 and acute on chronic hypoxic respiratory failure. Operative Procedures Performed X-ray Abdomen 1 View Result Date: 4/13/2021 Narrative: Single view portable abdomen INDICATION: Nasogastric tube placement, encounter initial Supine portable view of the lower chest and abdomen demonstrates nasogastric tube with tip and side-port in the gas-distended stomach. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View Result Date: 4/16/2021 Narrative: XR CHEST 1 VW IMPRESSION: No significant change from the previous examination. END OF IMPRESSION: INDICATION: Worsening hypoxemia. TECHNIQUE: AP projection of the chest is acquired. COMPARISON: X-ray 4/13/2021. FINDINGS: The endotracheal tube, nasogastric tube, and right IJ central venous catheter are unchanged. Right-sided chest tube is unchanged. There is a small left pleural effusion. There is diffuse bilateral hazy airspace opacification. No change from prior. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View Result Date: 4/15/2021 Narrative: XR CHEST 1 VW PORT IMPRESSION: Tubes and lines as described. Small left effusion. Unchanged patchy bilateral airspace consolidation. END OF IMPRESSION: INDICATION: worsening hypoxemia. TECHNIQUE: AP projection of the chest is acquired. COMPARISON: X-ray 4/14/2021. FINDINGS: The endotracheal tube, nasogastric tube, and right IJ central venous catheter are unchanged. The right-sided chest tube is unchanged. There is no pneumothorax. There is a small effusion. There is diffuse bilateral patchy airspace consolidation. There is no significant change. Cardiac silhouette is normal size. There is calcification of the aorta. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View - Daily Result Date: 4/14/2021 Narrative: Chest radiograph HISTORY: Covid 19 infection. Mechanical ventilation. Comments: Frontal radiograph of the chest was obtained and compared to the prior study dated 4/13/2021. The heart is at the upper limits of normal. The mediastinum is within normal limits. Interstitial alveolar opacities are demonstrated bilaterally consistent with

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pneumonia. There is an endotracheal tube with the distal end approximately 4.3 cm from the carina. Nasogastric tube is noted directed towards the stomach. There is a right jugular central catheter. A right-sided pigtail catheter is seen. IMPRESSION: 1. Persistent bilateral interstitial alveolar opacities consistent with pneumonia. 2. Lines and tubes in place as described. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View, Portable Result Date: 4/14/2021 Narrative: PROCEDURE INFORMATION: Exam: XR Chest Exam date and time: 4/13/2021 11:46 PM Age: 79 years old Clinical indication: Hypoxia; Covid+ TECHNIQUE: Imaging protocol: XR of the chest. Views: 1 view. COMPARISON: DX XR CHEST 1 VW 4/13/2021 10:50 AM FINDINGS: Tubes, catheters and devices: Endotracheal tube tip located at the level of the carina. Pigtail drainage catheter tip remains superimposed over the lateral right mid lung zone. Nasogastric tube enters the stomach but tip not included on the image. Tip of right internal jugular central venous catheter in SVC. Cardiac leads superimposed over the chest bilaterally. Lungs: Compared to chest x-ray examination performed earlier on 04/13/2021 at 1051 hrs, new consolidation and/or atelectasis in the left lung base. No significant interval change in scattered patches of ground-glass opacity (GGO) within each lung. Patient has history of COVID-19. Pleural spaces: Small right apical pneumothorax (12 mm). New small left pleural fluid collection. No right pleural fluid collection. Heart/Mediastinum: Stable cardiac silhouette Bones/joints: Unremarkable for age. IMPRESSION: 1. Endotracheal tube tip located at the level of the carina. 2. Pigtail drainage catheter tip remains superimposed over the lateral right mid lung zone. 3. Small right apical pneumothorax (12 mm). 4. Compared to chest x-ray examination performed earlier on 04/13/2021 at 1051 hrs, new consolidation and/or atelectasis in the left lung base. 5. New small left pleural fluid collection. 6. No significant interval change in scattered patches of ground-glass opacity (GGO) within each lung. Patient has history of COVID-19. THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED BY MD X-ray Chest 1 View, Portable Result Date: 4/13/2021 Narrative: XR CHEST 1 VW PORT INDICATION: verify placement of

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right chest tube. Encounter: Subsequent. TECHNIQUE: AP portable erect projection of the chest is acquired. COMPARISON: Earlier today. FINDINGS: The left thoracostomy tube terminates near the lateral right midlung. No other change. Extensive pulmonary infiltrates. Stable life support lines. The previous right pneumothorax has predominantly resolved, only a thin crescent of air caps the right apex. END OF IMPRESSION: This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View, Portable Result Date: 4/13/2021 Narrative: XR CHEST 1 VW PORT IMPRESSION: Lines as described. There is a small right-sided pneumothorax. Unchanged bilateral airspace consolidation. END OF IMPRESSION: INDICATION: verify placement of CVC and post intubation. TECHNIQUE: AP projection of the chest is acquired. COMPARISON: X-ray 4/11/2021. FINDINGS: There is a right IJ central venous catheter. Tip is projected over the SVC. There is a small right apical pneumothorax. Endotracheal tube terminates 2 cm superior to the carina. The nasogastric tube passes beneath the diaphragm. Multifocal areas of patchy airspace consolidation bilaterally. Findings do not appear significantly changed from prior. The cardiac silhouette is normal size. There is calcification of the aorta. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View Result Date: 4/11/2021 Narrative: XR CHEST 1 VW PORT IMPRESSION: Mildly worsened bilateral airspace consolidation. END OF IMPRESSION: INDICATION: worsening respiratory failure, covid pneumonia worsening respiratory failure, covid pneumonia. TECHNIQUE: AP projection of the chest is acquired. COMPARISON: X-ray 4/8/2021. FINDINGS: The left costophrenic angle is partially excluded. The lungs are adequately expanded. There are large areas of patchy airspace consolidation bilaterally. Findings have mildly increased in severity. There is no effusion or pneumothorax. The cardiac silhouette is mildly enlarged. There is calcification of the aorta. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View Result Date: 4/8/2021 Narrative: XR CHEST 1 VW PORT INDICATION:

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Worsening hypoxemia, Covid pneumonia. Encounter: Initial. TECHNIQUE: AP portable erect projection of the chest is acquired. COMPARISON: 4/4/2021. FINDINGS: Scattered pulmonary infiltrates is developed bilaterally, greatest in the right upper and right lower lobe. No change in the heart, mediastinum, or bony thorax. IMPRESSIONS: Developing pulmonary infiltrates. END OF IMPRESSION: This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. X-ray Chest 1 View - Portable Result Date: 4/4/2021 Narrative: XR CHEST 1 VW PORT IMPRESSION: No evidence of acute pulmonary disease. END OF IMPRESSION: INDICATION: SOB, weak, cough SOB, weak, cough. TECHNIQUE: Portable AP projection of the chest is acquired. COMPARISON: 6/5/2020 FINDINGS: Heart size appears unremarkable. There is mild prominence of pulmonary arteries. This is stable. There is no focal consolidation or effusion. This report was created using Voice Recognition software. Thank you for allowing us to participate in the care of your patient. Transthoracic Echo (tte) Complete Result Date: 4/11/2021 Narrative: Gender: Female Age: 79 Procedure Date: 4/11/2021 10:19 AM Study Quality: Fair Ht / Wt / BSA: 66.00 in / 218.00 lb / 2.07 m2 Heart Rate: 77 bpm BP: 181 / 81 mmHg Indications: Arrhythmia Transthoracic 2D, Color Flow, and Doppler Echocardiogram Conclusions: The left ventricle is normal in size. Ejection Fraction 55% (normal range 50-70%). All wall segments showed normal motion. Mild concentric LVH. Trivial aortic regurgitation. No additional significant valvular abnormality. No prior study for comparison. Presentation and History: Indication: The patient presents for evaluation of arrhythmia. The patient has a history of obesity and chronic obstructive pulmonary disease. Findings: Procedure Information: Contrast agent, definity, is being given per protocol without apparent complications. Due to technical limitations in the assessment of the left ventricle, imaging was performed after the administration of intravenous Definity echocontrast, as per protocol. Left Ventricle: The left ventricle is normal in size. There is mildly increased left ventricular wall thickness. The left ventricular systolic function is normal. The visually estimated ejection

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fraction is 55% (normal range 50-70%). Wall Motion: All wall segments showed normal motion. Right Ventricle: RV not well visualized. RV grossly normal in size and function by subcostal view. Atria: The left atrium is borderline dilated. The right atrium is normal in size. Aortic Valve: Sclerotic appearing aortic valve with no significant aortic stenosis. Trivial aortic regurgitation. Mitral Valve: There is trace mitral valve regurgitation by color flow and doppler analysis. There is no mitral valve stenosis by color flow and doppler analysis. Pulmonic Valve: There is no evidence of significant pulmonic valvular stenosis or insufficiency by color flow and doppler analysis. Tricuspid Valve: There is trace tricuspid valve regurgitation by color flow and doppler analysis. Great Vessels: All visible segments of the aorta are normal in size. Venous: The inferior vena cava is normal in size and collapses greater than 50% with inspiration. Pericardium/Pleural: There is no evidence of pericardial effusion. Prior Study Comparison: No prior study for comparison. Measurements: Left Ventricle: IVSd: 0.85 cm (0.6-0.9/0.6-1.0) LVIDd: 5.10 cm (3.9-5.3/4.2-5.9) LVIDd Index: 2.46 cm/m² (2.4-3.2/2.2-3.1) LVIDs: 3.56 cm (2.0-3.6) LVPWd: 0.95 cm (0.7-1.1) Ao Root: 3.30 cm (2.1-3.5) LV Mass: 203.25 g (67-162/88-224) LV Mass Index: 98.19 g/m² (43-95/49-115) LVOT Diam: 1.90 cm (3.0+/-1.3) LVOT Pk Vel: 0.91 LVOT Mn Vel: 0.63 LVOT VTI: 0.20 LVOT Pk Grad: 3.00 LVOT Mn Grad: 2.00 LVOT Diam: 1.90 LVOT Area: 2.84 MV Pk E: 0.66 MV Pk A: 0.66 E/A: 1.00 E'Medial: 5.33 E/E' Med: 12.30 E' Lateral: 10.60 E/E' Lat: 6.20 Mitral Valve: MV Pk E: 0.66 MV Pk A: 0.66 MV Decel Time: 209.00 E/A: 1.00 E'Lateral: 10.60 E'Medial: 5.33 E/E' Med: 12.30 E/E' Lat: 6.20 PHT: 61.00 MVA PHT: 3.61 Decel Slope: 3.14 Aortic Valve: AoV Pk Vel: 1.65 AoV Mn Vel: 1.22 AoV VTI: 0.39 AoV Pk Grad: 11.00 AoV Mn Grad: 7.00 AVA Cont.VTI: 1.42 Tricuspid Valve: TR Pk Vel: 2.89 TR Pk Grad: 33.00 RA Press: 10.00 RVSP: 43.00 Great Vessels: Ao Root-2D: 3.30 cm (2.0-3.7) Ao Asc: 3.30 cm (2.1-3.4) Updated on 4/11/2021 5:10:04 PM with Status of Final electronically signed on 4/11/2021 5:10:04 PM with status of Final Ct Covid Chest Low Dose Without Contrast Result Date: 4/6/2021 Narrative: PROCEDURE INFORMATION: Exam: CT Chest Without Contrast; Diagnostic Exam date and time: 4/6/2021 4:21

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						AM Age: 79 years old Clinical indication: Cough and shortness of breath; Patient HX: +covid; Additional info: Cough. Shortness of breath, covid TECHNIQUE: Imaging protocol: Diagnostic computed tomography of the chest without contrast. 3D rendering (Not supervised by radiologist): MIP and/or 3D reconstructed images were created by the technologist. Radiation optimization: All CT scans at this facility use at least one of these dose optimization techniques: automated exposure control; mA and/or kV adjustment per patient size (includes targeted exams where dose is matched to clinical indication); or iterative reconstruction. COMPARISON: CT CHEST WO CONTRAST 3/8/2021 2:28 PM FINDINGS: Lungs: There are patchy peripheral ground-glass opacities which can be seen with atypical pneumonia. Pleural spaces: Unremarkable. No pneumothorax. No pleural effusion. Heart: No cardiomegaly. No pericardial effusion. Aorta: Atherosclerotic changes of the aorta. Lymph nodes: Unremarkable. No enlarged lymph nodes. Bones/joints: Unremarkable. No acute fracture. Soft tissues: Unremarkable. IMPRESSION: Patchy peripheral ground-glass opacities which can be seen with atypical pneumonia. THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED BY MD	
5/13/2021	1313933	KY	69	F	4/10/2021	4/11/2021	Dizzy weak breathing a lil heavy
5/13/2021	1313803	CA	43	M	5/6/2021	5/8/2021	Received vaccine on 5-6-21. On 5-8-21, complained of headache, bloating, fever, and constipation. Last seen alive at 9 PM on 5-8. Found dead at home at 7 PM on 5-9.
5/13/2021	1314135	OK	59	M	3/10/2021	3/14/2021	PATIENT'S SPOUSE REPORTS PATIENT WAS ADMITTED TO HOSPITAL ON 031421 FOR SEVERE SEPSIS WITH ACUTE ORGAN DYSFUNCTION, ACUTE METABOLIC ENCEPHALOPATHY, BILATERAL PNEUMONIA AND ACUTE HYPOXEMIC RESPIRATORY FAILURE THEN PASSED AWAY ON 3/27/21.

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5/13/2021	1313237		61	F		3/1/2021	<p>WAS ON VENTILATOR; SUSPECTED COVID-19 INFECTION; DEATH; This spontaneous report received from a media article via a company representative concerned a 61 year old female of unspecified race and unspecified Ethnic origin. The patient's height, and weight were not reported. The patient's concurrent conditions included exposure to covid-19. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, 1 total, administered on 10-MAR-2021 for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. A day later of vaccination patient traveled extensively and returned home nine days later. On an unspecified date in MAR-2021, the patient was not feeling well and had difficulty in breathing. Later, patient's sister drove her to the hospital where she had ups and downs but was eventually put on a ventilator. On an unknown date in APR-2021, the patient died due to unknown cause of death. It was unspecified if autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died an APR-2021 and the outcome of was on ventilator and suspected covid-19 infection was not reported. This report was serious (Death, Hospitalization Caused / Prolonged, and Life Threatening).; Sender's Comments: V0: 20210514186-covid-19 vaccine ad26.cov2.s-Death, was on ventilator, suspected covid-19 infection. This event(s) is considered not related. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event(s) than the drug. Specifically: MEDICAL HISTORY, UNDERLYING DISEASE; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>
5/13/2021	1314069	OH	43	F	5/12/2021	5/13/2021	DEATH

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5/13/2021	1313691	NV	58	F	4/26/2021	5/1/2021	Following the vaccination patient didn't feel well. Fever, chills, cold symptoms, incredibly irritable. 5/1 she awake with a terrible headache which continued all day. Around 9:30 pm she laid down and shortly after was unable to move her body. 5/4/21 at 4:19pm her time of death was called. Cause; brain death due to aneurysm and stroke due to passing blood clot in brain.
5/13/2021	1313600		84	F	4/27/2021	5/1/2021	K92.2 - Acute lower GI bleeding D64.9 - Anemia Z79.01 - Anticoagulated
5/13/2021	1313593		103	M	2/22/2021	5/1/2021	death
5/13/2021	1313585		65	M	4/29/2021	5/1/2021	K72.90 - Hepatic encephalopathy (CMS/HCC)
5/13/2021	1313560		57	M	3/26/2021	5/11/2021	I21.3 - STEMI (ST elevation myocardial infarction) (CMS/HCC)

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5/13/2021	1312812	VA		F		3/17/2021	BLEEDING IN BRAIN; INTUBATED; SEVERE HEADACHE; This spontaneous report received from a consumer via company representative concerned a 45 year old female with unknown race and ethnicity. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: not reported) dose 1 total, administered on 2021 for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On 17-MAR-2021, the patient experienced severe headache and went to the hospital and diagnosed with bleeding in brain. During hospitalization patient was intubated .On 18-Mar-2021,patient died due to bleeding in brain. Patient was hospitalized for 1 day. It was unknown whether autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of the intubated and severe headache was not reported. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: V0:20210517658-covid-19 vaccine ad26.cov2.s-Bleeding in brain, intubated. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: BLEEDING IN BRAIN

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5/13/2021	1312771	VA		U			FEMALE ISSUES; BLOOD CLOTS; This spontaneous report received from a consumer concerned multiple patients. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. No concomitant medications were reported. The batch number was not reported and has been requested. On an unspecified date, the consumer called and reported that he had read in newspaper that women had gotten blood clots and 3 passed away with female issues. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of female issues on an unspecified date, and the outcome of blood clots was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0. 20210510294 - COVID-19 VACCINE AD26.COV2.S- Female issues, Blood clot. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/13/2021	1312649	FL	95	M	5/6/2021	5/12/2021	On 5/12/2021 patient was complaining of generalized body aches, later in the morning when going to a pain management clinic, patient subsequently became nauseous and vomited several times during the course of the day. Reportedly had episode of dark emesis as well. Patient was then found by family around 10pm unresponsive, pale, w/ difficulty breathing, EMS was called, patient was found to be in cardiac arrest in asystole. Patient possibly had v-fib during transport and was defibrillated twice before becoming asystolic again. Patient was subsequently pronounced dead in the Emergency Department on 5/12/21 at 11:04pm.
5/13/2021	1314342	TN	35	M	4/13/2021	4/14/2021	He died. He got the shot then several hours later he was found DEAD in his sleep. We are still awaiting coroners reports.

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5/13/2021		1314214	OR	91	F	4/3/2021	5/4/2021	after first dose of the Moderna vaccine she became very ill and was hospitalized on 3/13 - 3/23. After 2nd dose of the vaccine she seemed to be doing ok but gradually declining and less and less to be able to do for herself, it slowed down greatly after the vaccine. There was a gradual decline, but on May 2 she woke up and was semi conscious and said she thought she was dyeing and was in pain and discomfort and was taken into the ER and she was DC'd and started hospice and two days before she passed she got the hospice care. My mother was in a semi coma and could not communicate properly. Many test were done at the hospital during her stay even though they never identified what the cause was. At the last ER visit they diagnosed her with pneumonia
5/13/2021		1313575		86	M	2/12/2021	4/20/2021	J18.9 - Left lower lobe pneumonia I48.91 - Atrial fibrillation with RVR (CMS/HCC) N17.9 - Acute kidney injury (CMS/HCC) N30.01 - Acute cystitis with hematuria
5/13/2021		1314994	AL	82	M	4/6/2021	5/7/2021	Heart Attack May 7, 2021, Death May 8, 2021
5/13/2021		1314224	NY	52	M	5/6/2021	5/7/2021	Patient was vaccinated with Moderna Covid Vaccine on Thursday, May 6, 2021. We were informed the following Monday that the patient had passed away unexpectedly on Friday, May 7, 2021. Family members did not reach out to us to ask any questions or to let us know what had happened. We do not know that this patient passed away due to vaccination with the Moderna Vaccine.

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5/13/2021	1315733		57	M		4/1/2021	DIED; This spontaneous report received from company representative (via social media) concerned a 57 year old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 206A21A, and expiry: UNKNOWN) dose was not reported, 1 total, administered on 12-APR-2021 for prophylactic vaccination. No concomitant medications were reported. In APR-2021 (7 days after vaccination), the patient died due to unknown cause. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: v0;20210518573-covid-19 vaccine ad26.cov2-Died due to unknown cause. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/13/2021	1315198	LA	80	F	4/28/2021	4/29/2021	My Mom had headache, body pain, chills and fever and very weak on the 29, and 30 of April. On May the 3,2021 I found my Mom Dead in Bed. My Mom was a very active lady for her age.
5/13/2021	1314985	MI	62	M	5/12/2021	5/13/2021	The 2nd dose of Moderna was administered on 05/12/2021 at 9:40 am, patient waited for 15 minutes he was feeling well and left the pharmacy at 09:50 am. The patient-caregiver contacted us at 12pm on 05/13/2021 stating that the patient passed away today. She stated he was feeling fine yesterday and had his breathing treatment at night and in the morning he didn't wake up.
5/13/2021	1314864	CA	64	F	5/4/2021	5/4/2021	She was found dead in her home one week after the injection. She died the day of the injection according to the coroners office. There was blood on the bed and down her chest.

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5/13/2021	1314846	WA	48	M	5/6/2021	5/7/2021	5/07 general ill feeling; runny nose, watery eyes. continued until 5/10. Wife denied fever or cough. continued until 5/10. 5/11 at work, patient collapsed. Was awake but non-responsive, breathing on his own, vomited shortly before EMS arrived. EMS arrived, patient stopped breathing, was bagged until arrival at hospital where he was intubated. 5/12 Patient was extubated and died in early AM 5/13. Medical records state cerebral brain hemorrhage.
5/13/2021	1314801	GA	84	M	1/11/2021	4/26/2021	Death: CHRONIC COMBINED SYSTOLIC - CONGESTIVE- AND DIASTOLIC -CONGESTIVE- HEART FAILURE, COVID-19

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5/13/2021		1314761	VA	69	F	4/14/2021	4/14/2021	<p>Patient DOD 4/19/21 Death Certificate Line A ?Adverse effect of Covid19 vaccine-5 day interval onset and death? Line B ?Anorexia nervosa? Line C ?Recurrent Major Depressive Disorder? Received her second Moderna dose from our Mobile team on 4/14/21 Since then I spoke with Dr. (Mobile); clients PCP, several times regarding this event. His nurse got an email from client on 4-12-21 that client had vaccination planned on 4/14 and may need to reschedule medical appointment planned 4-16 if she felt bad. The client was encourage to get vaccine and to keep appointment for Friday April 16th. The client emailed the office at approx 0300 Friday morning April 16 to cancel appointment because she felt to poorly from vaccination shot to come in (fevers; body aches). Dr next heard from police officer on Monday April 19th that she was found dead in her home. He requested the Medical Examiner (ME) evaluate but this request was denied. The client lived alone. Dr contacted family members but they did not have much interaction with the client and had no significant information to contribute. Dr said he speculates that the patients underlying anorexia nervosa likely put the client in a critical nutritional deficiencies / electrolyte imbalance condition and the side effects of vaccination were too much. He felt compelled to complete the death certificate as he did because the ME declined the case. From vaccine mobile team notes: team was there 2-3:30pm. All the answers to the health screening questions for the patient were "no" except for "have you ever had a severe allergic reaction to something?" To that question the answer was "yes. Immunization Information System record - lot # is underlined: Coronavirus COVID-19, mRNA,LNP-S,PF, 03/17/2021 1 of 2 100 mcg/0.5mL Full 022M20A IM LA Coronavirus COVID-19, mRNA,LNP-S,PF, 04/14/2021 2 of 2 100 mcg/0.5mL Full 006B21A IM LA</p>
5/13/2021		1314742	CA	68	M	3/22/2021	3/23/2021	<p>Patient's body was found on May 1st. Since the shot , he was complaining of tinnitus, sore legs, dizziness (passed out several times), loss of bowel control, and unable to maintain a stream of thought, which are stroke symptoms. He has had surgery for blood clots in the past. He seemed to get worse in the weeks following the Jansen shot.</p>

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5/13/2021	1314352	PR	54	F	2/3/2021	2/3/2021	Vomiting.
5/13/2021	1315725			U			PASSED AWAY BECAUSE OF CLOT; This spontaneous report received from a consumer concerned a patient of Unspecified Race, ethnic origin, age and sex. The patient's weight, height and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, expiry: unknown) dose, start therapy date were not reported for prophylactic vaccination. No concomitant medications were reported. The batch number was not reported and has been requested. On an unspecified date, the patient passed away because of clot. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210517449- covid-19 vaccine ad26.cov2.s-thrombosis. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: CLOT
5/13/2021	1314603	NJ	68	M	4/22/2021	4/23/2021	Illness set in either the day of the vaccination being administered or the day after, according to phone records. Signs include: nausea/vomiting, back aches, fever, chills, passing out, lack of appetite, extreme fatigue and low energy, bitter taste in the mouth and water tasting bitter.
5/13/2021	1314308	PR	92	M	3/2/2021	4/16/2021	Fever and respiratory problems.

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5/13/2021		1315815	NY	74	M	9/18/2020	1/27/2021	Dysphonia; Intentional product use issue; dyspnea on exertion; pulmonary edema; immune mediated pneumonitis; right ventricular failure; atrial fibrillation; hyperdynamic left ventricle; mitral valve incompetence; Interstitial lung disease; Tricuspid valve incompetence; Pulmonary fibrosis; Hypoxia; Hypotension; Unevaluable event; Headache; Therapeutic product effect incomplete; Drug ineffective; Vomiting; Asthenia; Diarrhoea; Nausea; pneumonia; Right atrial dilatation; Aortic valve sclerosis; Coronary artery disease; Malaise; Muscular weakness; Fatigue; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of HYPOXIA (Hypoxia), DYSPNOEA EXERTIONAL (dyspnea on exertion), PULMONARY OEDEMA (pulmonary edema), IMMUNE-MEDIATED LUNG DISEASE (immune mediated pneumonitis), RIGHT VENTRICULAR FAILURE (right ventricular failure), ATRIAL FIBRILLATION (atrial fibrillation), HYPERDYNAMIC LEFT VENTRICLE (hyperdynamic left ventricle), MITRAL VALVE INCOMPETENCE (mitral valve incompetence), INTERSTITIAL LUNG DISEASE (Interstitial lung disease), TRICUSPID VALVE INCOMPETENCE (Tricuspid valve incompetence), PULMONARY FIBROSIS (Pulmonary fibrosis), INTENTIONAL PRODUCT USE ISSUE (Intentional product use issue), DYSPHONIA (Dysphonia) and HYPOTENSION (Hypotension) in a 74-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Co-suspect product included non-company product AMIFAMPRIDINE PHOSPHATE (FIRDAPSE) for Myasthenic syndrome. The patient's past medical history included Pulmonary arterial pressure abnormal on 03-Jul-2018, Migraine (Ever since he was a kid), Headache, Small cell lung cancer metastatic (In liver and lymph nodes; brain metastases; right-sided pulmonary nodules), Metastases to liver, Metastases to lymph nodes (One measurable mediastinal lymph node; lymphadenopathy), Gait disturbance, Metastases to central nervous system, Muscular weakness and Radiotherapy (of his head and lung for his cancer). Concurrent medical conditions included Myasthenic syndrome (Cannot walk without FIRDAPSE). Concomitant products included PANTOPRAZOLE,

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ACETYLSALICYLIC ACID (ASPIRIN 81) and FUROSEMIDE for an unknown indication. On 18-Sep-2020, the patient started AMIFAMPRIDINE PHOSPHATE (FIRDAPSE) (Oral) 10 milligram three times a day. In January 2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 27-Jan-2021, the patient experienced HYPOXIA (Hypoxia) (seriousness criteria death, hospitalization and medically significant), PULMONARY OEDEMA (pulmonary edema) (seriousness criteria death and hospitalization), IMMUNE-MEDIATED LUNG DISEASE (immune mediated pneumonitis) (seriousness criteria death and hospitalization), RIGHT VENTRICULAR FAILURE (right ventricular failure) (seriousness criteria death, hospitalization and medically significant), ATRIAL FIBRILLATION (atrial fibrillation) (seriousness criteria death, hospitalization and medically significant), HYPERDYNAMIC LEFT VENTRICLE (hyperdynamic left ventricle) (seriousness criteria death, hospitalization and medically significant), MITRAL VALVE INCOMPETENCE (mitral valve incompetence) (seriousness criteria death, hospitalization and medically significant), INTERSTITIAL LUNG DISEASE (Interstitial lung disease) (seriousness criteria death and hospitalization), TRICUSPID VALVE INCOMPETENCE (Tricuspid valve incompetence) (seriousness criteria death, hospitalization and medically significant), PULMONARY FIBROSIS (Pulmonary fibrosis) (seriousness criteria death, hospitalization and medically significant), DYSPHONIA (Dysphonia) (seriousness criteria death and hospitalization), HYPOTENSION (Hypotension) (seriousness criteria death and hospitalization), PNEUMONIA (pneumonia), RIGHT ATRIAL DILATATION (Right atrial dilatation), AORTIC VALVE SCLEROSIS (Aortic valve sclerosis), CORONARY ARTERY DISEASE (Coronary artery disease), MALAISE (Malaise), MUSCULAR WEAKNESS (Muscular weakness) and FATIGUE (Fatigue). On 31-Jan-2021, the patient experienced DYSPNOEA EXERTIONAL (dyspnea on exertion) (seriousness criteria death and hospitalization), ASTHENIA (Asthenia), DIARRHOEA (Diarrhoea), NAUSEA (Nausea) and VOMITING (Vomiting). On an unknown date, the patient experienced INTENTIONAL PRODUCT USE ISSUE (Intentional product use issue) (seriousness criteria death

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and hospitalization), UNEVALUABLE EVENT (Unevaluable event), THERAPEUTIC PRODUCT EFFECT INCOMPLETE (Therapeutic product effect incomplete), DRUG INEFFECTIVE (Drug ineffective) and HEADACHE (Headache). The patient was hospitalized from 27-Jan-2021 to 15-Feb-2021 due to DYSPHONIA, then from 31-Jan-2021 to 15-Feb-2021 due to ATRIAL FIBRILLATION, DYSPNOEA EXERTIONAL, HYPERDYNAMIC LEFT VENTRICLE, HYPOTENSION, HYPOXIA, IMMUNE-MEDIATED LUNG DISEASE, INTENTIONAL PRODUCT USE ISSUE, INTERSTITIAL LUNG DISEASE, MITRAL VALVE INCOMPETENCE, PULMONARY FIBROSIS, PULMONARY OEDEMA, RIGHT VENTRICULAR FAILURE and TRICUSPID VALVE INCOMPETENCE. The last dose administered for AMIFAMPRIDINE PHOSPHATE (FIRDAPSE) was on 18-Feb-2021. The patient died on 19-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, PNEUMONIA (pneumonia), UNEVALUABLE EVENT (Unevaluable event), ASTHENIA (Asthenia), DIARRHOEA (Diarrhoea), THERAPEUTIC PRODUCT EFFECT INCOMPLETE (Therapeutic product effect incomplete), DRUG INEFFECTIVE (Drug ineffective), RIGHT ATRIAL DILATATION (Right atrial dilatation), AORTIC VALVE SCLEROSIS (Aortic valve sclerosis), CORONARY ARTERY DISEASE (Coronary artery disease), MALAISE (Malaise), MUSCULAR WEAKNESS (Muscular weakness), FATIGUE (Fatigue), NAUSEA (Nausea), HEADACHE (Headache) and VOMITING (Vomiting) outcome was unknown. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 03-Jul-2018, Pulmonary arterial pressure: pulmonary arterial pressure elevated (High) Pulmonary arterial pressure elevated. In 2021, Angiogram: no evidence for central pulmonary embolus. (Inconclusive) No evidence for central pulmonary embolus. Slight interval decrease in the patient's 2 previously identified right sided pulmonary nodules. Slight decrease in the one measurable mediastinal lymph node. The patient's other lymphadenopathy is probably also improved but difficult to measure due to the technique. Worsening airspace disease in a somewhat interstitial pattern. Pulmonary edema would be the first consideration. Infection would be the second consideration. Severe

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centrilobar and paraseptal emphysema with basilar predominately peripheral reticular opacities consistent with fibrotic lung disease.. In 2021, Chest X-ray: no infiltrate (Inconclusive) no infiltrate. In 2021, Echocardiogram: severe right atrial ventricular dilatation with... (abnormal) Severe right atrial ventricular dilatation with reduced RV systolic function ("D" sign). Small and under-filled left ventricle with hyperdynamic systolic function, estimated LVEF is 75%. Minimal aortic valve sclerosis with no stenosis. Moderate mitral and tricuspid valve regurgitation. Estimated PA systolic pressure is severely elevated (68.6 mmHg). Compared to the prior report dated 7/3/2018; there is a worsening right heart dilatation and function. There is increased mitral and tricuspid valve regurgitation. No significant change in estimated PA pressure.. In 2021, Heart rate: abnormal (abnormal) abnormal. In 2021, Pulmonary arterial pressure: 68.6 mmhg (High) Severely elevated. In 2021, Ultrasound scan: no evidence of deep venous thrombosis in the... (Inconclusive) No evidence of deep venous thrombosis in the bilateral lower extremities. In 2021, White blood cell count: no leukocytosis (Inconclusive) No leukocytosis. Concomitant medications included unknown statins. On 02-OCT-2020, Co- suspect drug chemotherapy is given to the patient to treat small cell lung cancer metastatic, Metastases to liver and Metastases to lymph nodes. On an unspecified date(s) in 2021, the patient had radiation of his head and lung for his cancer. Initially on 18-SEP-2020, the patient started with 10mg of firdapse, On 02-OCT-2020, the dose increased to 20mg. On 22-SEP-2020, while in the hospital the patient experienced blood pressure fluctuations. the patient experienced a headache that was "4/10. Treatment medications included acetaminophen; aspirin; caffeine and ibuprofen for headache, treated with prednisone 60mg and methyl prednisolone for immune mediated pneumonitis, On an unspecified date, the patient was treated with midodrine, patient was cautiously diuresed with IV furosemide bolus dosing followed by gtt (drip) given "soft pressures. the patient was treated with low dose diltiazem For paroxysmal a-fib (atrial fibrillation) and MAT (medication-assisted treatment). patient was initially given amiodarone 400mg daily x 7 days for blood pressure, then the dose reduced to 200mg, On an unspecified

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								date, patient was treated with low dose metoprolol (12.5 mg), patient was treated with Xarelto (rivaroxaban) 15 mg daily for stroke risk reduction. On an unspecified date, the patient's diuretic (presumed IV Lasix drip) was transitioned to torsemide 5 mg, orally daily. patient received atovaquone for PJP (Pneumocystis jiroveci pneumonia) prophylaxis and treated with empiric antibiotics for CAP (community acquired pneumonia). On unspecified date, steroid regimen was increased. On an unspecified date, the patient's respiratory symptoms improved and was weaned to 2 liters of oxygen. While hospitalized, the patient received non drug treatment like PT (physical therapy) and OT (occupational therapy), the patient was treated with supplemental O2 (oxygen) and IVF (intravenous fluids). Company Comment: Limited information regarding the events and the vaccination date has been provided at this time. A contributory role of the concurrent medical conditions and medical history is considerable. A causal relationship cannot be excluded. Further information has been requested.; Sender's Comments: Limited information regarding the events and the vaccination date has been provided at this time. A contributory role of the concurrent medical conditions and medical history is considerable. A causal relationship cannot be excluded. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
5/13/2021		1314395	PR	92	F	1/19/2021	1/20/2021	Fever, body aches, respiratory difficulties, had a cardiac arrest.
5/13/2021		1314461	TN	76	M	3/4/2021	3/5/2021	Passed away in his sleep 28 hours after vaccine. No illness prior.
5/13/2021		1314475	PR	95	F	2/3/2021		Unknown
5/13/2021		1314511	WI	76	M	2/15/2021	3/8/2021	had severe headaches that started a week after his 2nd covid shot., he was seen by NP on 2/25/21, was instructed to take ibuprofen short term, labs were drawn and were normal. On 3/8/21 suffered tonic clonic seizures, was unresponsive and taken to ER by EMS. remained unresponsive following the seizures and was placed on hospice care and died on 3/12/21.
5/13/2021		1314513	PR	82	F	3/1/2021	3/22/2021	Low arterial pressure, low saturation pressure.

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5/13/2021	1314542	FL	46	M	5/7/2021	5/8/2021	Death
5/12/2021	1310557	PR	79	F	3/4/2021	3/19/2021	Cardio respiratory arrest. During rounds, patient was found without vital signs
5/12/2021	1309191			F			PASSED AWAY; This spontaneous report received from a consumer via social media concerned a female patient of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration was not reported, batch number and expiry were unknown) dose, start therapy date were not reported, 1 total, administered for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date (a couple of days after vaccination), the patient passed away. The cause of death was unknown. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). This case, from the same reporter is linked to 20210508328.; Sender's Comments: V0: 20210506934 -COVID-19 VACCINE AD26.COV2.S - Passed Away. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/12/2021	1310174	TX	37	M	4/24/2021	5/2/2021	Death on 2 May 2021

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5/12/2021		1310493	CA	89	F	4/15/2021	4/15/2021	The son came on 05/06 to receive the 2nd dose of Pfizer vaccine and informed us that his mother passed away on 04/18 after 3 days of post vaccination. A home hospice patient with Stage 5 Chronic kidney disease and Stage 4 COPD (Oxygen dependent) came in on 04/15 around 4:30 pm to receive a first dose of Pfizer. After 15 mandatory waiting in the pharmacy, she went home. Around 5:00 pm, patient told her son that she is feeling nauseated. Hospice nurse was contacted. On 4/16, patient experienced hallucination. She told her son that her fingers were disappeared. Hospice nurse was contacted. Please note that vaccine adverse event is not clearly related to vaccine, since patient was on hospice, stage 5 CKD and stage 4 COPD.
5/12/2021		1310359	MO	70	F	3/18/2021	5/12/2021	patient had covid shot on 3/18/21 then had known exposure on 04/06/21, tested positive for covid on 4/8/21, was admitted on 4/9/21, then died on 4/27/21. there is no indication the vaccination had anything to do with her death, but wanted to report.
5/12/2021		1310308	GA	91	M	2/3/2021	4/15/2021	Patient hospitalized on 4/15/2021 after being fully vaccinated. Tested positive on 4/19/2021. Patient died on 4/27/2021.
5/12/2021		1310522	CA	59	F	5/5/2021	5/9/2021	At time of vaccination, patient had a temperature of 98.2 degrees Fahrenheit. Less than 24 hours later patient caregiver reports temperature of 102 degrees Fahrenheit. Monday morning, was notified that patient's spouse found the patient unresponsive during the day after complaining about stomach pains on Sunday 5/9/2021.
5/12/2021		1310163	KY	86	F	2/26/2021	4/18/2021	Patient died at nursing home facility. Patient had COVID back in 09/2020.
5/12/2021		1310067	IL	72	F	4/17/2021	4/18/2021	Death - Within 24 hours of receiving the vaccine the patient died.
5/12/2021		1309766	FL	100	F	1/20/2021	1/21/2021	Pt. developed emesis, vomiting blood afternoon after covid vaccine. She died within a few minutes. Resuscitation not attempted due to DNR status. Had recovered from covid months before.

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5/12/2021	1309632			U			patient got infected with covid; patient got infected with covid; This is spontaneous report from a non-contactable consumer. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified dates (Batch/Lot number was not reported) at 1st dose, single and 2nd dose, single for covid-19 immunization. The patient's medical history was not reported. There were no concomitant medications. While visiting abroad, patient got infected with covid and died on an unspecified date. Apparently, the patient received two Pfizer vaccines shots prior to his travel. It was unknown if an autopsy was performed. No follow-up attempts are possible, information about batch number cannot be obtained. No further information is expected.; Reported Cause(s) of Death: patient got infected with covid
5/12/2021	1309418	UT	73	F	2/9/2021	2/10/2021	Patient started 18-24 hours with loss of strength- inability to bear weight, and confusion with inability to communicate- both expressive and receptive, moaning and complete loss of awareness. The initial episode lasted approximately 4 hours. These episodes repeated for the next 3 days. She was taken to the Emergency Room by ambulance 3 days after the vaccine and a workup was completed. It was negative at the time of exam. She did have a mild anemia, but CT and laboratory work were otherwise negative. She had recovered strength and her memory. Later that evening she was again unresponsive except to painful stimuli and was like that over night. She was fatigued but was repulsive the next day. She never gained her full strength back. Over the next 4 weeks, she had progressively more of the periods of unresponsiveness and amnesia that stayed progressively longer and recovery was even less in-between the periods of unresponsiveness. She was placed on Hospice Care and succumbed on March 9, 2021, 1 month after her first vaccine.
5/12/2021	1310622	OH	48	M	1/6/2021	4/26/2021	Developed symptoms around 4/25, presented to ED with complaints of chest pain and something being stuck in his throat. Subsequently died on 4/27.
5/12/2021	1311363	FL	79	F	5/11/2021	5/12/2021	Developed a cough after an unknown amount of time. Ultimately died on 5/12/21 at 1631 hours.

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5/12/2021		1309628	VA		U			died 3 weeks later after getting the vaccine.; This is a spontaneous report from a Pfizer-sponsored program. A contactable nurse reported that a patient (unknown age and gender) received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number unknown) at single dose for COVID-19 immunisation on unknown date. Relevant history and concomitant drugs were unknown. The patient died 3 weeks later after getting the vaccine. It was unknown if autopsy was performed or not.; Sender's Comments: The causal relationship between BNT162B2 and the fatal event cannot be excluded as the information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: died 3 weeks later after getting the vaccine.
5/12/2021		1311693	NY	77	M	5/5/2021	5/11/2021	Patient was given the Janseen covid vaccine on 5/5. Apparently the patient 6 days later was reportedly agitated had hallucinations and trouble breathing. The patient proceeded to lay down to rest. The patient never awoke.
5/12/2021		1312481	PA	54	M	4/16/2021	4/17/2021	My husband stated that he did not feel good after the vaccine the next morning, later he went to pick up hay and died on someone's property from the acute coronary syndrome.
5/12/2021		1312456	IA	35	M	5/3/2021	5/4/2021	Death. While driving patient passed out and was found by County Sheriffs Office. EMT was called and could not save patient. M.E. Declared patient dead at 7:20 PM on May 4, 2021

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5/12/2021	1312219	MD	57	M	5/5/2021	5/5/2021	Patient was feeling fatigue, unwell the night after getting the vaccine. The next day he stayed home, did not go to work as he was not feeling well. Two days after getting the vaccine, he had trouble breathing, an ambulance was called and he was pronounced deceased hours later. He had a heart attack.
5/12/2021	1311196	PA	78	M	2/8/2021	2/26/2021	FEVER COUGH FATIGUE HEADACHES
5/12/2021	1311975	NY	82	M	2/11/2021	2/13/2021	After my father received the second COVID vaccination he started complaining of headaches. He had lung cancer, but he was in good condition. Within weeks his health deteriorated and when we bought him for a scan the beginning of March he had two small brain bleeds. The cancer had spread to the brain and he had a mass. They put a shunt in on March 18th because they said he had fluid, and this was the only treatment. Ten days later he was back in the hospital and after a week we had to take him home on hospice. I think the vaccine could of escalated his cancer this rapidly. Especially because he had two brain bleeds.
5/12/2021	1310651	CO	69	F	3/2/2021	4/13/2021	Patient received Moderna vaccine 3/2/2021 0.5 ml LD IM Lot: 029L20A and Moderna vaccine 3/30/2021 0.5 ml LD IM Lot: 019B21A. The patient was exposed to an infected person with Covid about 1 week after her second vaccine. She was admitted to the ICU with severe covid on 4/13/21. She was eventually transitioned to comfort care and died on 5/6/2021.
5/12/2021	1311665	NY	68	M	4/2/2021	5/7/2021	Subject suffered a massive heart attack while mowing the law. May be attributable to the Covid vaccine as the subject had been to the cardiologist prior to both vaccine and EKG and Stress test were perfectly normal

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5/12/2021	1311276	PA	72	F	2/9/2021	4/14/2021	Pneumonia due to COVID-19 virus ED to Hosp- Admission Discharged 4/14/2021 - 4/22/2021 (8 days) Last attending ? Treatment team Maxillary fracture Principal problem Final Summary for Deceased Patient Admission Date: 4/14/2021 Discharge Date: 4/22/2021 Final Diagnosis Principal Problem: Maxillary fracture (CMS/HCC) Active Problems: Pneumonia due to COVID-19 virus Demand ischemia (CMS/HCC) Dyslipidemia Essential hypertension Acute kidney injury (CMS/HCC) Glomerulonephritis, IgA Lactic acidosis Septic shock (CMS/HCC) Cytomegalovirus (CMV) viremia (CMS/HCC) Acute respiratory failure with hypoxia (CMS/HCC) Left femoral vein DVT (CMS/HCC) Malnutrition (CMS/HCC) Hypothermia DETAILS OF HOSPITAL STAY Presenting Problem/History of Present Illness/Reason for Admission Hypoxia [R09.02] Acute respiratory failure with hypoxia (CMS/HCC) [J96.01] Fall, initial encounter [W19.XXXA] COVID-19 [U07.1] COVID-19 virus infection [U07.1] Hospital Course Patient is a 72-year-old female with past medical history of hypertension, hyperlipidemia, recent hospitalization due to CMV viremia and an AKI and myelosuppression. Who presented to the emergency room after a fall in her house on 4/14. She had significant face pain and was hypoxic with an O2 saturation of 68% on room air on presentation. She was then found to be Covid positive. Initially admitted to the medical floor however required increasing amounts of oxygen and was ultimately transferred to the ICU on 4/16. She was maintained on nonrebreather oxygen until the evening of 4/21 when she was intubated and increasing vasopressor requirements. Given her worsening condition, her husband elected to palliatively extubate and pursue comfort care. Time of death was 10:02 AM on 4/22/2021. Disposition of the body: morgue
5/12/2021	1310861	CT	50	M	5/9/2021	5/10/2021	Cardiac Arrest, Death
5/12/2021	1310855	PR	100	F	1/2/2021	3/1/2021	Pneumonia.
5/12/2021	1310799	PR	84	M	1/26/2021	5/2/2021	Died of respiratory arrest.

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5/12/2021	1310729	OR	60	M	4/24/2021	4/29/2021	Patient stopped breathing five days after the vaccine (5/29/21) He was taken to Hospital by paramedics and was put on ventilator in Intensive Care. They took him off the ventilator and he died 6 days after (5/5/21).
5/12/2021	1310681	PR	80	M	1/11/2021	2/8/2021	Cardiac arrest.
5/12/2021	1312036	CA	68	M	3/10/2021	5/8/2021	Death

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5/11/2021		1306318	MD	40	F	4/23/2021	4/23/2021	Went back to sleep and never woke up; Arm soreness; Feeling bad; very flushed/looked red; very tired/fatigue/nappy women taking a lot of naps; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Went back to sleep and never woke up) in a 40-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 009C2117) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Neurofibromatosis, type 2 (acoustic neurofibromatosis) (Diagnosed at age 11, had tumor on nerves and all over body.), Blindness (All blind in left eye), Allergy NOS (unspecified allergy), Walker user and Feeding tube user. On 23-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 23-Apr-2021, the patient experienced DEATH (Went back to sleep and never woke up) (seriousness criterion death), PAIN IN EXTREMITY (Arm soreness), VACCINATION COMPLICATION (Feeling bad), FLUSHING (very flushed/looked red) and FATIGUE (very tired/fatigue/nappy women taking a lot of naps). The patient died on 23-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, PAIN IN EXTREMITY (Arm soreness), VACCINATION COMPLICATION (Feeling bad), FLUSHING (very flushed/looked red) and FATIGUE (very tired/fatigue/nappy women taking a lot of naps) outcome was unknown. The patient was on a feeding tube, lived independently but had a caretaker who came in every day. The patient had long list of medications for her conditions but concomitant medications were not provided by the reporter. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. Regarding the events of Pain in extremity, Fatigue, Flushing, Vaccination related malaise, based on the current available information and temporal association between the use of the product and the start date of these events, a causal relationship cannot be excluded. However, regarding the event of Death, Very limited information regarding this event has been provided at this time. Further information has been requested.; Sender's Comments: Regarding the events of Pain in extremity, Fatigue, Flushing, Vaccination

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							related malaise, based on the current available information and temporal association between the use of the product and the start date of these events, a causal relationship cannot be excluded. However, regarding the event of Death, Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
5/11/2021	1307002	MO	71	F		1/13/2021	No adverse reaction to vaccine. Pt positive for covid in april 2021. recieved 2 doses of pfizer vaccine (1/2021&2/2021)

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5/11/2021		1305027	TX		U			died after receiving the Moderna Covid-19 vaccine; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer and describes the occurrence of DEATH (died after receiving the Moderna Covid-19 vaccine) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Not Provided Concomitant medications were not reported. No treatment information was provided. Action taken with mRNA-1273 in response to the drug was not applicable. Company comment: This is a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. died on an unknown date after the first dose of vaccine. No Medical History or Concomitant medications were reported. Very limited information has been reported at this time. Further information is not expected. This case was linked to US-MODERNATX, INC.-MOD-2021-012533, US-MODERNATX, INC.-MOD-2021-020196, MOD21-10588, MOD21-086364, MOD21-086368 (Linked Report).; Sender's Comments: This is a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. died on an unknown date after the first dose of vaccine. No Medical History or Concomitant medications were reported. Very limited information has been reported at this time. Further information is not expected. US-MODERNATX, INC.-MOD-2021-012533: US-MODERNATX, INC.-MOD-2021-020196: MOD21-10588: MOD21-086364: MOD21-086368;; Reported Cause(s) of Death: Unknown cause of death
5/11/2021		1306337	LA	56	M	3/18/2021	3/20/2021	Patient death certificate lists "natural" causes, with the Immediate Cause of Death of Cardiopulmonary Arrest.

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5/11/2021	1306733	TX	78	M	2/26/2021	3/2/2021	On March 2, he woke up feeling bad and had a fever of 102.7. He took tylenol and liquids all day and the fever came down to around 100. The next morning he woke up complaining of excruciating pain in his left arm (site of the injection). He couldn't stand to have anything touch it, couldn't move it and couldn't sleep because of the pain. The next morning he woke up very weak, wasn't able to speak clearly, wasn't making sense. He had a telemedicine appointment scheduled that morning for another matter. The doctor took one look at him and said we should have him evaluated asap. I took him to the emergency room at Hospital. They did some tests and said he was septic and immediately put him into the ICU. He was started on IV antibiotics while the blood cultures were growing out. It was determined that the bacteria was Strep G but they were unable to identify the source. He was put on a ventilator and an echo cardiogram was done. It was believed that the source of the infection was his pacemaker and I was told the pacemaker would have to be removed. They couldn't do it at that hospital. He was transferred to another hospital. The doctors at that hospital determined the pacemaker was not the source. It was believed by some doctors that the source of infection was the injection site. The infection was cleared from his body and the ventilator was removed after 2 weeks. He lived another 2 weeks but never was able to recover. Until the day he was put on paliative care, he expressed pain in the arm where he had received the vaccination. He died at 5:30 a.m. on April 1, 2021.

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5/11/2021	1306869	NY	67	M	3/19/2021	5/2/2021	Brief HPI and Hospital Course: 67 year old male with unknown past medical history was brought in by EMS as post-cardiac arrest. Patient was found on unresponsive on sidewalk, possible collapse. ACLS started by EMS, approx 10-15 minutes. Initial rhythm was junctional PEA. Was given 2 epi and intubated by EMS and had ROSC, Initial ROSC rhythm was SVT which slowed to 90s on its own. On arrival to ED, left femoral central line placed. Tox screen was positive for cocaine and ETOH. Was placed on ACS protocol for possible NSTEMI. Tested positive for COVID19 on admission. Patient required pressor support on admission. Hypothermia protocol was initiated. Patient was rewarmed per protocol, normothermic as of 5/5. Brief Narrative of Events leading to Patient's Death: Patient remained normothermic with persistent septic shock, multi organ failure, ARDS secondary to COVID19. Multiple attempts to reach family members made by ICU team and palliative care team daily without answer. Patient made DNR by two-physician consent. Patient's BP low despite maximum levophed support.
5/11/2021	1306940	GA	86	F	1/4/2021	2/10/2021	Hospitalized and died due to COVID-19 after being fully vaccinated.
5/11/2021	1306986	NC	34	M	5/7/2021	5/10/2021	Patient expired of probable aneurysm at Hospital on 5/10/2021
5/11/2021	1308207	TX	40	M	4/20/2021	5/7/2021	#2 Moderna Vaccine given on 4/20/21 On 5/7/21 patient became SOB before syncope to cardiac arrest, event was witnessed and CPR started immediately. Patient expired 45 min later at Medical Center.
5/11/2021	1307384	MI	49	M	3/11/2021	5/8/2021	Was feeling fine the day before, went to sleep around midnight and passed away during the night while sleeping.

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5/11/2021		1304956		42	M			BLOOD CLOT; This spontaneous report received from a company representative concerned a 42 year old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number and expiry were unknown) dose, 1 total, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, between three to ten days later after vaccination the patient died due to blood clots. It was unknown, whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0;20210510772-covid-19 vaccine ad26.cov2.s-Thrombosis. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: BLOOD CLOT
5/11/2021		1308208	WA	58	M	4/21/2021	5/5/2021	Patient died from methamphetamine/opiate overdose
5/11/2021		1307897	NV	69	F	5/4/2021	5/7/2021	The decedent experience nausea, headache, and chest pain approximately 72 hours after receiving her second shot. She was found deceased later that day.
5/11/2021		1307657	OH	17	M	4/19/2021	4/23/2021	Death by suicide.
5/11/2021		1307637	AR	72	F	3/15/2021	4/19/2021	Patient received dose 1 on 2/12/2021 and dose 2 on 3/15/2021 from community pharmacy. Tested positive on 4/7/2021. Hospitalized for COVID on 4/19/2021. Discharged on 4/29/2021 to hospice. Passed away on 5/1/2021.
5/11/2021		1307636	CA	60	M	4/26/2021	5/8/2021	diabetic ketoacidosis on 5/8/21
5/11/2021		1307516	GA	94	F	1/11/2021	4/17/2021	Hospitalized and died due to COVID-19 after being fully vaccinated. From vital records: ACUTE RESPIRATORY FAILURE WITH HYPOXIA, PNEUMONIA DUE TO COVID-19

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5/10/2021	1302712		70	F	4/9/2021	5/5/2021	This 70 year old female received the Covid shot on 4/9/21 and went to the ED on 5/5/21 died on 5/5/21.
5/10/2021	1302134	MN	66	M	4/1/2021	4/8/2021	Patient had several ED visits within 6 weeks of receiving COVID vaccination. He first presented to the ED on 4/8/21, was admitted on 4/9/21 for 2 days. He was admitted again on 4/20/21 for 6 days. He presented to the ED on 5/8/21 with cardiac arrest and died.
5/10/2021	1302667		82	U	3/31/2021	4/8/2021	This 82 year old female received the Covid shot on 3/31/21 and went to the ED on 4/8 /21 and again to the ED and admitted on 5/7/21 with the diagnoses listed below and died on 5/9/21. J90 - Pleural effusion, not elsewhere classified N18.6 - ESRD (end stage renal disease) D61.818 - Pancytopenia A41.9, R65.20 - Severe sepsis
5/10/2021	1302631		86	M	1/20/2021	1/23/2021	This 86 year old male received the Covid shot on 1/20/21 and went to the ED on 1/23/21 and was admitted on 1/23/21 and again went to the ED and admitted on 4/4/21 and again to the ED on 4/26/21 with the diagnoses listed below and died on 5/4/21. D50.0 - Blood loss anemia I21.4 - NSTEMI (non-ST elevated myocardial infarction) (CMS/HCC) N17.9 - AKI (acute kidney injury) (CMS/HCC) S09.90XA - Closed head injury, initial encounter W19.XXXA - Fall, initial encounter S01.01XA - Laceration of scalp, initial encounter S06.5X9A - Subdural hematoma (CMS/HCC) S06.5X9A - Traumatic subdural hematoma (CMS/HCC) Z74.09, Z78.9 - Impaired mobility and ADLs
5/10/2021	1302513	AZ	87	M	3/1/2021	3/2/2021	Death listed as a heart attack. No symptoms, but took an abnormally long nap just prior to the attack.

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5/10/2021		1302490	SC	64	M	3/12/2021	4/24/2021	On 4/26/21 The patient presents to our clinic with concerns for back pain, fever, shortness of breath, fatigue and coughing. We performed a covid19 antigen test which resulted positive. Based on this and his history and examination we recommended he go straight to the hospital for further evaluation and treatment. He was admitted to medical center where a PCR was performed and confirmed positive. He was discharged on 4/29. Per his wife, they felt he was discharged too soon and he went to another hospital. He passed away 5/10/2021. This report is being made in regards to the claim by the CDC that "no one that has been infected with covid19 4 weeks after having the janssen vaccine has been hospitalized." This patient was not only hospitalized but passed away.
5/10/2021		1302438	WI	76	F	4/22/2021	4/30/2021	Patient received the first Pfizer immunization on 4-22-2021. She passed away on 4-30-2021. Her husband notified the pharmacy. Patient had been hospitalized for a period of time before the vaccination for 'bleeding internally' due to an unknown cause.
5/10/2021		1302705		49	U	4/6/2021	5/5/2021	This 49 year old female received the Covid shot on 4/6 /21 and went to the ED on 5/5 /21 with the following diagnoses listed below and died on 5/5/21.
5/10/2021		1302383	TX	49	M	4/27/2021	5/4/2021	He felt very bad the night he received the 2nd shot of Pfizer covid-19 vaccine on April 27. He even joked he probably would die that night. He also complained that despite his protest, the person who administered the shot insisted to inject on his shoulder joint. He developed a bigger-than-quarter-size bruise on his right inner arm the next day. He was feeling tired the following days. On May 4 around 3:30, I heard he was making loud noises. I came to his side immediately. At the time I thought he was making louder than usual snores. I nudged him gently but he didn't respond. After about 15 seconds, the sound stopped, and he had no breath. I then called 911 within 10 seconds, tried to do CPR on him. It took EMS 6 minutes to arrive even though we live very close to a fire station in a well-accessed urban area. EMS worked on him for about 30 minutes before transported him to hospital. They continued to work on him for a while. He never regained breath.

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5/10/2021	1302239	MD	61	F	4/14/2021	4/28/2021	Patient developed paroxysmal atrial fibrillation. Upon date of death- pt husband reported SOB, incontinence, gasping for air, slumped forward and died upon 911 arrival.
5/10/2021	1302793	GA	73	M	1/18/2021	3/30/2021	Hospitalization and Death
5/10/2021	1302209	AR	82	M	2/12/2021	5/1/2021	death from covid 3 months after completing series
5/10/2021	1302428	MD	49	M	5/5/2021	5/5/2021	The patient was last seen well at 3:30 PM. He was found unresponsive, face down in his own vomit, cyanotic, apneic by family. Patient was unable to be resuscitated. He was pronounced dead at 6:51 PM.
5/10/2021	1301967			F			BLOOD CLOT IN HEART; This spontaneous report received from a consumer concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, 1 total, administered on 2021 for prophylactic vaccination. The batch number was not reported and it has been requested. No concomitant medications were reported. On 2021, the patient died due to blood clot in heart. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0 20210506615-COVID-19 VACCINE AD26.COV2.S- blood clot in heart. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: BLOOD CLOT IN HEART

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5/10/2021	1301965	SC	49	F		4/27/2021	DEATH; This spontaneous report received from a company representative concerned a 49 year old female. The patient's height, and weight were not reported. The patient's pre-existing medical conditions included the patient had no known drug allergies. The patient received covid-19 vaccine ad26.cov2. s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, frequency 1 total, administered on MAR-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On 27-APR-2021, the patient died from unknown cause of death after 4 weeks of Johnson and Johnson vaccination. An autopsy was performed on an unspecified date and there was no sign of high blood pressure, heart disease, or diabetes to patient as per report. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0. 20210505962-covid-19 vaccine ad26.cov2.s -Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH; Autopsy-determined Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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5/10/2021	1301919	MI	76	M	3/29/2021	4/1/2021	Death; This case was received via FDA VAERS on 04-May-2021 and was forwarded to Moderna on 04-May-2021. This regulatory authority case was reported by an other health care professional (subsequently medically confirmed) and describes the occurrence of DEATH (Death) in a 76-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 008B21A) for COVID-19 vaccination. No Medical History information was reported. On 29-Mar-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 01-Apr-2021 The patient died on 01-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. Symptom Text : Death reported to Health department from Medical Examiner office, no further details provided Company comment:This is a 76-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 008B21A) who died 3 days after the second dose of vaccine. No Med history and no concomitant medication were provided. Very limited information has been reported at this time. Further information is not expected.; Sender's Comments: This is a 76-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 008B21A) who died 3 days after the second dose of vaccine. No Med hx and no conmeds were provided. Very limited information has been reported at this time. Further information is not expected.; Reported Cause(s) of Death: Unknown cause of death

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5/10/2021		1301797	PA	62	F	4/7/2021	4/7/2021	Renal failure; Liver failure; Unresponsive; Died; Stomach pain; Nausea; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of UNRESPONSIVE TO STIMULI (Unresponsive), DEATH (Died), RENAL FAILURE (Renal failure) and HEPATIC FAILURE (Liver failure) in a 62-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Primary biliary cirrhosis. On 07-Apr-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 07-Apr-2021, the patient experienced ABDOMINAL PAIN UPPER (Stomach pain) and NAUSEA (Nausea). On 08-Apr-2021, the patient experienced UNRESPONSIVE TO STIMULI (Unresponsive) (seriousness criterion hospitalization). On 23-Apr-2021, the patient experienced DEATH (Died) (seriousness criterion death), RENAL FAILURE (Renal failure) (seriousness criterion hospitalization) and HEPATIC FAILURE (Liver failure) (seriousness criterion hospitalization). On 23-Apr-2021, RENAL FAILURE (Renal failure) and HEPATIC FAILURE (Liver failure) had resolved and NAUSEA (Nausea) outcome was unknown. The patient died on 23-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, UNRESPONSIVE TO STIMULI (Unresponsive) and ABDOMINAL PAIN UPPER (Stomach pain) outcome was unknown. The concomitant medication included liver medications, as reported by the reporter. On 07Apr2021 around 1230pm, the patient experienced stomach pain and nausea which the family attributed to her liver medications. The patient went to sleep later that evening. The next day, 08Apr2021, the patient was found to be sleeping around 8am but was unresponsive around 1:30pm. She was taken by ambulance to the local hospital. The patient was eventually placed on life support and passed on 23Apr2021. No other treatment medication were reported. Company comment: Very limited information regarding this events has been provided at this time. However, based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot

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								be excluded. Further information has been requested.; Sender's Comments: Very limited information regarding this events has been provided at this time. However, based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. Further information has been requested.; Reported Cause(s) of Death: unkown cause of death
5/10/2021		1302213	IN	72	M	3/16/2021	3/19/2021	Short of breath, died March 20, 2021
5/10/2021		1303196	MI	66	F	3/17/2021	3/24/2021	per medical report from hospital- "presented to emergency room at outside facility secondary to worsening shortness of breath. The patient states that about 1 week ago she started feeling ill directly after receiving her first covid vaccine. the patient states her medical issues actually began approximately 2 months ago when she developed sudden onset positional urinary retention as well as urinary incontinence and constipation. She states that she thought maybe her known spinal stenosis had worsened causing her bladder dysfuncton.She states she tries to sit on a commode or a toilet and is unable to void however when lying flat she has to wear adult briefs as she has no control over her bladder at all. There is no p
5/10/2021		1302294	PA	89	M	3/30/2021	4/15/2021	fever and generalized weakness bilateral pneumonia secondary to COVID-19 infection Failure to Thrive, Severe Sepsis antibiotics: Levaquin, ceftriaxone and Remdesivir, insulin: Humalog and respiratory therapy: O2
5/10/2021		1302844	TX	29	M	5/6/2021	5/7/2021	Lethargy began the day of vaccine and shortness of breath along with abdominal and chest pain followed the next day. Decedent was found deceased the next evening.
5/10/2021		1304689	PA	50	M	4/1/2021	4/14/2021	Blood clot

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5/10/2021	1304434	NM	48	M	3/30/2021	3/30/2021	Patient found dead after receiving vaccine. At 11:44 on 3-30-2021 Medical Investigator was able to return call after leaving scene where there was no phone service. Police were on the scene requesting Medical Investigator Contact was made between Medical Investigator and member of the police force. Narrative was that the patient, who is handicap with considerable health issues which he was born with, and his parents had been to healthcare facility to receive COVID vaccination. Returning they had traveled in order to arrive at their residence. The decedent had asked to be dropped off close to parents home. The parents arrived at the residence and after waiting ten to fifteen minutes walked searching for the decedent. He was located unresponsive and 911 was initiated.
5/10/2021	1304120	VA	95	M	4/16/2021	4/16/2021	Pt c/o not feeling well and very weak right after receiving injection, and fell less than 3 hours later, would/ could not eat/drink or walk as usual, became confused and bedbound the same day of vaccination and appetite further deteriorated while weakness and confusion increased.
5/10/2021	1303474	GA	84	F	12/28/2020	2/15/2021	Death. Date of death unknown
5/10/2021	1303208	GA	62	M	4/7/2021	4/7/2021	Recieved obituary on patient. Called pt. ER contact and she stated that she was unaware how patient died. Pt. died at home but states that pt. had been having flu-like symptoms in bed with chills after vaccination. Pt. ER contact is unaware of pt. medical history or current medications. Pt. ER contact that pt. PCP was not us but another medical facility. Called funeral home and spoke to employee and she stated that the coroner cause of death listed was acute MI. Employee stated that she does not have a certified copy of death certificate at this time.
5/10/2021	1303190		74	F	3/12/2021	4/11/2021	This 74 year old female received the Covid shot on 3/12/21 and went to the ED on 4/11/21 with the diagnoses listed below and died on 5/3/21. ABDOMINAL PAIN VOMITING

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5/10/2021		1303175		60	M	4/15/2021	4/23/2021	This 60 year old black male received the Covid shot on 4/15/21 and went to the ED on 4/23/21 with the following diagnoses listed below and died on 4/27/21. K92.2 - Gastrointestinal hemorrhage, unspecified
5/10/2021		1303041		77	M	2/22/2021	4/28/2021	This 77 year old male received the Covid shot on 2/22/21 and went to the ED and admitted on 4/28/21 with the diagnoses listed below and died on 5/5/21. cause of death unknown at time of report
5/10/2021		1302927	NV	69	F	5/4/2021	5/7/2021	Pt contacted our office at approx 12:30PM on 5/10/21 stating that she thought she was having a reaction to the second vaccine. We received a call from the Deputy Sheriff at approx 4:50 PM to inform us that this pt has passed away approx. 4 hours prior. COD: pending. We have not other information at this time
5/10/2021		1302958	GA	64	M	1/10/2021	2/21/2021	Hospitalization and Death
5/10/2021		1303327	GA	67	M	1/4/2021	3/13/2021	Hospitalization and Death
5/10/2021		1303031		68	M	3/17/2021	5/1/2021	This 68 year old black male received the Covid shot on 3/17/21 and died 5/21.
5/10/2021		1303162		77	F	4/22/2021	4/24/2021	This 77 year old female received the Covid shot on 4/1/21 and went to the ED on 4/11/21 and admitted on 4/12/21 and again to the ED on 4/24/21 with the below listed diagnoses and died on 5/9/21. J18.9 - Pneumonia, unspecified organism
5/10/2021		1303069		75	F	3/24/2021	5/6/2021	This 75 year old female hospice patient received the Covid shot on 3/24/21 died on 5/6/21.
5/10/2021		1303074	WV	64	M	4/8/2021	4/10/2021	1st dose in series on 03-18-2021; 2nd dose in series on 04-08-2021 2 days after 2nd dose, he developed severe pain in both legs. He was taken to the hospital where clots were diagnosed in both legs and groin area. A previously undiagnosed lung nodule was found and he was given a cancer diagnosis. He was discharged home on apixaban (Eliquis) and comfort measures 2 days after admission. Over the following weeks, he had a permanent lung drain placed. He died on May 5th or 6th at home. No autopsy performed.

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5/10/2021	1303119	CA	80	F	2/3/2021	2/4/2021	<p>The morning after Mom's first dose of the Pfizer shot, Dad woke up and found Mom lying on the floor next to the bed. Mom said, "I can't move my arm." Dad called paramedics who checked her. They said her vital signs were normal and left. On 2/9/21 in the morning my da awoke to see that Mom had large amounts of bubbly saliva pouring from her mouth onto her pillow. Dad called paramedics, who said this was a diabetic reaction. Mom had NEVER had anything happen like this before. Mom was very sleepy, could not be aroused, and made only gurgling noises. She was admitted to the hospital for care and therapy. She pulled her own IV out. Mom had to be restrained in the hospital and sedated, due to confusion and worsening dementia. By 2/18 when we spoke by phone mom's speech was abnormally slow and very repetitive. "I'm very tired today" was spoken many times. In morning time mom was able to follow basic conversation. Not so later in the day. Mom came home from rehab on 2/26/21. She was able to walk steadily and independently at home after her therapy. After a week or so, Mom began hitting the in-home caregiver. Dad's presence would calm her. In a short time Mom seemed not to know dad anymore, and would hit him and the caregiver when they helped her. She also pulled all covers off the bed and pulled clothes out of the closet, throwing them all over the room during the night. Mom was usually walking around the house during each night. On 4/16/21 Mom and dad were napping sitting up on the couch in the morning. Mom fell forward and hit her head on the hearth. Dad and caregiver gave first aid and called paramedics, who took her to the ER. Mom came home on 4/17/21. On 4/18/21 Mom pulled her catheter out in the early morning. In the afternoon Mom's appearance was concerning, so Dad called paramedics. They said that Mom's BP had dropped very low and took her to the ER. Mom was combative the next day in the hospital. Dr. adjusted her medications periodically to ensure that mom's care would be manageable when she would eventually be sent home. Minimal therapy was done due to dementia. By 5/3/21 doctor said that Mom is bed bound and needing total care. Her blood sugar spiked high despite special diet. Staff waiting for insulin order from doctor. 5/4/21 Doctor called Dad to say that Mom had died during the night.</p>

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5/10/2021	1303145		98	F	2/13/2021	4/30/2021	This 98 year old female received the Covid shot on 2/13/21 and went to the ED and admitted on 4/30/21 with the diagnoses listed below and died on 5/9/21. J44.9 - COPD (chronic obstructive pulmonary disease) S72.002A - Left displaced femoral neck fracture W19.XXXA - Fall, initial encounter S09.90XA - Head injury, initial encounter
5/9/2021	1301355	KY	42	F	5/6/2021	5/6/2021	She began having shortness of breath after getting her second shot. He parents found her dead in her bed this afternoon. No other known comorbidities.
5/9/2021	1301096	MD	61	M	5/6/2021	5/7/2021	32 hours after the vaccine, he suffered a massive heart attack due to a blood clot and a massive clot in the right arm. He went to the hospital and under went surgery at 12 am on Saturday. The coronary surgeon mentioned that this was not from heart disease as all vessels were clear. Rather, this was due to an embolism due to an unknown origin. A further work up concluded that he also had blood clots throughout his body (both lungs, one kidney, heart, liver, legs, arms, and possibly brain). By 12 p.m. we were asked back to the hospital as he was worsening. Treatment options included a heparin drip, which caused a brain hemorrhage. He was just at the doctors two times this week, on Tuesday and Wednesday and was fine no issues found. They went through with the 2nd dose and came to our home on Thursday.

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5/8/2021	1299352	PA	86	F	3/30/2021	3/31/2021	Patient was admitted to the emergency room the morning after receiving the vaccine and died on 07Apr2021; Nasal swab Positive; This is a spontaneous report from a contactable consumer. An 86-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), via an unspecified route of administration on 30Mar2021 (Batch/Lot number was not reported) (at the age of 86 years old) as single dose for COVID-19 immunization. Medical history included gastro-intestinal problem. The patient was not pregnant at the time of vaccination. The patient's concomitant medications were not reported. No other vaccine in four weeks. No COVID prior vaccination. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient was admitted to the emergency room on 31Mar2021 the morning after receiving the vaccine. The patient was hospitalized for two days. It was unknown if treatment was given. This event (Patient was admitted to the emergency room the morning after receiving the vaccine and died on 07Apr2021) resulted in emergency room/department or urgent care, hospitalization and life threatening illness (immediate risk of death from the event) and patient died. The patient died on 07Apr2021. The patient's nasal swab was positive on 31Mar2021. The outcome of the event nasal swab was positive was unknown. It was not reported if an autopsy was performed. Information on batch/lot number has been requested.; Reported Cause(s) of Death: Patient was admitted to the emergency room the morning after receiving the vaccine and died on 07Apr2021
5/8/2021	1300291		93	F	1/28/2021	2/1/2021	Passed away in home days after vaccine, was in perfect health as far as can be expected by 93 year old, before vaccine.

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5/8/2021	1298832			U			DEATH; This spontaneous report received from a company representative concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown and expiry date: Unknown) dose, 1 total administered, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient died after getting Janssen vaccine. The patient died from an unknown cause of death. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210507041-covid-19 vaccine ad26.cov2.s-Death. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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5/8/2021	1298885	PA	89	M	3/20/2021	3/27/2021	Was not eating; Hematuria; became extremely fatigue/ not improving extreme fatigue/he could hardly make it to the grocery store door back to the car without total exhaustion; weak/he could hardly make it to the grocery store door back to the car without total exhaustion; Pancytopenia; father who passed away; This case was received via an unknown source (no reference has been entered for a health authority or license partner) on 28-Apr-2021 and was forwarded to Moderna on 28-Apr-2021. This spontaneous case was reported by a nurse (subsequently medically confirmed) and describes the occurrence of DEATH (father who passed away), PANCYTOPENIA (Pancytopenia), HAEMATURIA (Hematuria), DECREASED APPETITE (Was not eating), FATIGUE (became extremely fatigue/ not improving extreme fatigue/he could hardly make it to the grocery store door back to the car without total exhaustion) and ASTHENIA (weak/he could hardly make it to the grocery store door back to the car without total exhaustion) in an 89-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 048A21A) for COVID-19 vaccination. The patient's past medical history included Atrial fibrillation and Heart failure. Concomitant products included RIVAROXABAN (XARELTO), FUROSEMIDE, PRAVASTATIN and CARVEDILOL for an unknown indication. On 20-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 27-Mar-2021, the patient experienced FATIGUE (became extremely fatigue/ not improving extreme fatigue/he could hardly make it to the grocery store door back to the car without total exhaustion) (seriousness criterion hospitalization) and ASTHENIA (weak/he could hardly make it to the grocery store door back to the car without total exhaustion) (seriousness criterion hospitalization). On 29-Mar-2021, the patient experienced PANCYTOPENIA (Pancytopenia) (seriousness criterion hospitalization). On 01-Apr-2021, the patient experienced HAEMATURIA (Hematuria) (seriousness criterion hospitalization). On 09-Apr-2021, the patient experienced DECREASED APPETITE (Was not eating) (seriousness criterion hospitalization). On 31-Mar-2021, ASTHENIA (weak/he could hardly make it to the grocery store door back to the car without total exhaustion) had resolved. The patient died on 15-Apr-

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5/8/2021

1298020 DE

76 F

3/20/2021

4/3/2021

2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, PANCYTOPENIA (Pancytopenia), HAEMATURIA (Hematuria), DECREASED APPETITE (Was not eating) and FATIGUE (became extremely fatigue/ not improving extreme fatigue/he could hardly make it to the grocery store door back to the car without total exhaustion) outcome was unknown. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 29-Mar-2021, Full blood count: low (Low) lowplatelets, low wbc and low hemoglobin. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable as the patient passed away.; Sender's Comments: Very limited information regarding this events has been provided at this time. However, this patient's advanced age and underlying medical conditions (Atrial fibrillation and heart failure) remains a confounder. Further information can't be requested.; Reported Cause(s) of Death: Unknown cause of death

She had no pain from the initial shot but then that night she stated she felt horrible, aches and pains and her cough worsened. a week later she said that the symptoms were just as bad, she was extremely tired also. Nauseated as well. She did not believe that she had a fever.

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5/8/2021	1299369			M			got infected with covid and died yesterday; Looks like the vaccine may not be as effective with the new variants.; This is a spontaneous report from a non-contactable consumer. A male patient (infectious disease doctor) received two doses of BNT162B2 (Solution for injection, lot number: unknown, Expiration date: Unknown) on unknown dates . The patient travelled and got infected with covid and died yesterday (02May2021). The reporter stated that it looked like the vaccine might not be as effective with the new variants. After two Pfizer vaccines shots , this doctor travelled to see his parents and succumbed to the new variant. Outcome of the event was fatal. No follow up attempts are possible; Information about Lot and batch number could not be obtained. No further information is expected.; Reported Cause(s) of Death: got infected with covid and died yesterday.
5/8/2021	1299650	PA	96	M	4/1/2021	4/2/2021	COVID-19 infection with pneumonia: Present on admission. Patient was treated with remdesivir and convalescent plasma.
5/8/2021	1300070	NY	73	F	4/1/2021	5/1/2021	Pt. arrived the hospital on 5/1/21 c/o SOB. Within a few hours, she went into cardiac arrest and was resuscitated. Pt. was placed on a Ventilator. She expired on 5/4/21.

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5/8/2021	1299367			M			received his second dose of the vaccine and then died; got very ill; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient had unspecified underlying health issues. The patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunization and experienced COVID-19. The reporter's mom's cousin who was in his late 70s/ early 80s, had some underlying health issues. He received his second dose of the vaccine, got very ill, and died. Reporter was unsure if he received Pfizer vaccine or different brand. The outcome of got very ill was unknown. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: received his second dose of the vaccine and then died
5/8/2021	1299850	PA	68	M	4/15/2021	4/22/2021	He became very ill and died this past Wednesday because he was told to get the shot even though he wasn't feeling well. There is no excuse for perpetuating the myth that everyone should get the shot no matter what. A negative covid test and thorough physical should be required before people take this vaccine.

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5/7/2021		1295200	NC	69	M	3/19/2021	3/23/2021	Pt received Covid-19 vaccine on 3/19 then presented to ED with fever and shortness of breath on 3/23 admitted to the hospital found to be COVID 19+ and requiring 2L oxygen via NC. Treated with dexamethasone, remdesivir and empiric antibiotics. Following admission, O2 requirement increased, received tocilizumab then required transfer to the ICU on 3/29. On 3/31 developed right leg ischemia, underwent thrombectomy and heparin infusion then on 4/1 patient intubated due to increased need for respiratory support and had bilateral chest tubes placed, post-intubation course complicated by shock with AKI requiring pressor support, prolonged encephalopathy. On 4/24 with worsening shock, hypoxemic resp failure, AKI requiring pressors and CRRT with broad spectrum antibiotics and resumption of stress dose steroids, the family was transitioned to comfort measures and passed away on 4/29.
5/7/2021		1296030	NV	33	M	4/25/2021	4/25/2021	Unknown cardiac event. Found on sidewalk down. Revived but resulted in extensive neurological damage. Was put in life support. Never came to. Passed away 05/05/2021.
5/7/2021		1296016	KS	88	M	3/27/2021	3/30/2021	My father died, 20 days after his 2nd vaccination. Not sure if it is related to the vaccine, but a sister reported Arthritis pain, 3 times as bad, after the 2nd vaccination and recommended I report this. My father started having severe back pain, 3 days after the second immunization. I took him for an XRay and the hospital said he had Compression Fractures of the vertebrae, but they could not tell if they were new or old, so needed to do an MRI. Said it also looked like he had a Bowel Obstruction, but I told them he had been having normal BM's up to the previous day. He lived until the 17th of April and never had another BM. They said bring him to the ER. The ER decided to do a CAT Scan, but Dad was not interested in any further treatment. He just wanted to go, so we put him on palliative care and he passed away, 20 days after the 2nd vaccination.
5/7/2021		1296012	NE	51	M	5/6/2021	5/6/2021	Arrived to emergency department via ambulance from nursing home with complaints of "looking like he was about to have a seizure". Patient became unresponsive and a code was called. ACLS performed but the patient did not recover from cardiac arrest.

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5/7/2021		1295932	WA	66	F	2/25/2021	2/25/2021	Aspirating severe
5/7/2021		1295905	NM	80	M	5/3/2021	5/3/2021	The medical investigator was contacted regarding the death of this 80 year old man within hours of receiving his first dose of the Pfizer vaccine for COVID-19. Little information is known about the facility and actual vaccination administered at the time of this report. However, patient was reported by his next-of-kin to be an otherwise healthy 80 year old without COVID-19 symptoms. He did have a tobacco smoking history. By postmortem computed tomography scans, patient was found to have evidence of catastrophic complications of cardiovascular disease, with apparent aortic dissection and large blood collections in the left chest cavity as well as the pericardial sac. In my medical opinion, these findings were most consistent with a complication of his underlying cardiovascular disease.
5/7/2021		1295712		90	M	1/29/2021	2/12/2021	cough, body aches, fever--COVID +, afib, tachycardia, acute coronary syndrome
5/7/2021		1295648	WI	67	F	4/7/2021	4/10/2021	Patient DIED 10 days after 2nd dose of Covid vaccine.
5/7/2021		1295543	MA	54	M	4/2/2021	4/15/2021	death. Patient had inactive cirrhosis from successfully treated Hepatitis C. He had chronically low platelet from cirrhosis and was also a clotter as evidenced several year ago with portal vein thrombosis travelling down to his mesenteric veins causing a similar lower GI bleed by clotting his colonic veins. He required several months of anticoagulants with blood thinner at that time. One week prior to his COVID-19 vaccination there ia picture of deceased with evidence of bilateral suborbital bleeding. Patient told family that he felt poorly after injection. The day he was found there was evidence of significant GI bleeding. His corpse is currently at medical examiner's office with no plans for autopsy.
5/7/2021		1295164	NJ	74	M	4/14/2021	4/15/2021	Patient's wife called today to inform us that her husband passed away on 04/17/2021. Patient experienced some side effects after receiving both doses of Moderna vaccine such as body ache and feeling of lethargy. Patient was taken to the hospital around 04/16/2021. Exact cause of the death is not known as wife did not want to get autopsy done.

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5/7/2021	1295072	MA	67	M	3/30/2021	4/3/2021	Acute renal failure, admitted to the hospital on 4/6/21. Underlying source never identified, died on 4/9/21.
5/7/2021	1294841			U			Death; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product use was not provided by the reporter. The reporter informed there were 2 deaths of those who had received their second dose of Moderna vaccine, same day, same location who died 2 hours after vaccine administration. Treatment information was not provided. This is a patient who received mRNA-1273 (COVID 19 Vaccine Moderna) (batch no. unk) and died after he received the second dose of vaccine. No Medical History information was reported. Concomitant product use was not provided by the reporter Very limited information has been reported at this time. Further information is expected.; Sender's Comments: This is a patient who received mRNA-1273 (COVID 19 Vaccine Moderna) (batch no. unk) and died after he received the second dose of vaccine. No Medical History information was reported. Concomitant product use was not provided by the reporter Very limited information has been reported at this time. Further information is expected.; Reported Cause(s) of Death: Unknown cause of death
5/7/2021	1297569	MD	87	F	4/13/2021	4/15/2021	Extreme exhaustion, weakness. Ultimately death on 4/29/2021

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5/7/2021		1296067	AZ	76	F	1/5/2021	1/31/2021	Patient completed 2-dose Pfizer series on 1/31/21 and passed away on 2/13/21. Pt presented to ER on 2/11/21 with SOB, weakness, diffuse abdominal pain and diarrhea that started that day. Pt tested positive for COVID and was transferred out to a higher level of care. 1st dose: 1/5/21, 2nd dose: 1/31/21
5/7/2021		1295555	MN	41	M	4/30/2021	5/1/2021	Patient found dead
5/7/2021		1297282	OH	90	M	4/6/2021	4/7/2021	Confusion Lethargic In mobile Memory loss Motor skill loss
5/7/2021		1297350	NY	73	M	3/11/2021	3/12/2021	My father in law died one day after his COVID vaccine. His doctor did not seem to care. She ruled it natural causes. She did not order an autopsy. He did have underlying heart conditions, but the timing of his death was suspicious.
5/7/2021		1297262	CA	38	M	5/3/2021	5/5/2021	The patient had developed a rash, fatigue, difficulty breathing, stomach pain, possible fever and began to cough up blood. He took Tylenol and a Chinese herbal medication called Lianhua Qingwen Jiaonang on 5/5/21. It is unclear when his symptoms began, as he did not share that information with his wife until 5/5/21.
5/7/2021		1296807	CA	66	F	3/19/2021	3/19/2021	In the hours following the first dose on 3/19/2021, sustained fever between 100 - 102 degrees, headaches, chills, clammy. The symptoms continued all day on the 3/20/2021. Sometime after 5:30 am on the 3/21/2021 she could not breathe. Pulse oximeter registered 57. contacted ambulance, within their arrival 10-15 minutes later, pulse oximeter was down to 43. Lips were blue skin was pale and clammy. At hospital she received high doses of oxygen and was treated for other symptoms.
5/7/2021		1296678	PR	63	F	4/8/2021	4/10/2021	April 8, 2021- Vaccinated with the Johnson and Johnson vaccine. April 10, 2021 ? Fever, strong headache, unable to hold on, diarrheas, respiratory difficulty. April 14, 2021- She lost her balance and fall, hitting her face. Had a CT scan and no mass nor bleeding was found, only sinus. Discharged home. SARS-CoV-2 test ? Negative results April 18, 2021- Found dead in her sofa. No thromboembolism nor bleeding

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5/7/2021		1296636	CA	52	M	4/1/2021	5/2/2021	Started getting achy and feverish. Diarrhea, vomiting. Told me, I'm as sick as I've ever been in my life. Died. Just want to know if he died from Covid or an adverse reaction from Johnson and Johnson vaccine he received in jail. No one wants to test his blood. He's at the mortuary awaiting cremation, and I thought it best if some government entity drew some blood to determine if he's a Covid or vaccine reaction fatality. Before they cremate his body.
5/7/2021		1296477	MO	61	F	2/1/2021	4/11/2021	Case had COVID-19 in November 2020 as part of an outbreak in the SNF she lives in. She recovered then received her first COVID-19 vaccination on 1/4/21. She received her 2nd dose of Moderna on 2/1/21. On 4/11/21 she became ill and was transferred to the hospital where she tested PCR positive for COVID-19. She continued to decline and was intubated. She died on 4/28/21 while still in the hospital. The diagnosis on her death summary from the hospital is COVID-19 pneumonia.
5/7/2021		1296394	GA	87	M	1/18/2021	4/4/2021	Hospitalization and Death
5/7/2021		1296304	MS	59	F	4/15/2021	4/18/2021	History 59-year young lady with history of COPD coronary artery disease CHF was evaluated at a local hospital and transferred with diagnosis of pneumonia. Patient O2 sat was in the 70s she was placed on CPAP. In route patient complained of chest pain abdominal pain and back pain subsequently had a cardiorespiratory arrest. Patient was being bagged after ET intubation in the field by EMS with chest compressions. Breath sounds well equal on arrival. Glucose was greater than 100 on fingerstick. Providers were initially able to obtain a pulse with return of spontaneous circulation but blood pressure was at best 50 systolic. Patient was begun on an epinephrine infusion and norepinephrine ordered. The patient then deteriorated into V-tach, All additional heroic measures failed and the patient expired.
5/7/2021		1296284		58	M	4/7/2021	4/11/2021	Patient had an ED visit and/or hospitalization within 6 weeks of receiving COVID vaccine.
5/7/2021		1296253	GA	81	M	2/3/2021	3/23/2021	ACUTE HYPOXIC RESPIRATORY FAILURE, ATYPICAL PNEUMONIA, MULTIPLE MYELOMA

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5/7/2021	1296197	CT	90	M	3/30/2021	4/5/2021	Wife reports patient was vaccinated on 3/30/21. She stated patient only had blurred vision following vaccination which lasted a about 2 days. On 4/4 family members visited and it was noted that 1 member tested positive for Covid on 4/5/21 and her spouse was home sick on 4/4/21 and was later positive on 4/5/21. Around 4/5/21 patient began having more frequent episodes of delusion and confusion. Speech slurred and slouched in chair. Patient would be demanding when asking for water when water was in his hand. Talking to her but looking at the ceiling. She stated she thought he was having "mini strokes." Increased weakness with standing. Slid to floor multiple times from chair. She reports loss of appetite and trembling. Saw MD on 4/12. "Could hardly breathe." MD ordered doxycycline and an inhaler. Patient to Hospital on 4/13/21. Diagnosed with Covid on 4/13/21 via PCR. Discharged from hospital to Skilled Nursing Facility on 4/16/21. Sent back to Hospital on 4/18/21 and passed away on 5/1/21. Wife states that death certificate indicates "Utonic Hypercapnic respiratory failure, acute/chronic CHF, hypoxemic respiratory failure and HTN, DM, prostate CA and COVID PNA. No autopsy performed. Medical PCP.
5/7/2021	1296193	GA	80	F	1/11/2021	3/22/2021	HOSPITALIZATION AND DEATH
5/7/2021	1296415	MS	70	F	4/13/2021	4/27/2021	The nurse was called by the family letting us know that the patient had passed away at home. No further details were provided,
5/7/2021	1296113	MI	83	F	3/3/2021	4/8/2021	Stroke lead to death

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5/6/2021	1291614	CA		U			had a friend who dropped dead after getting the vaccine; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (had a friend who dropped dead after getting the vaccine) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product use was not provided by the reporter. Action taken with mRNA-1273 in response to the event was not applicable. This is a patient of unknown age and gender who received mRNA-1273 vaccine (batch no. unk) who died on an unknown date after receiving the first dose of vaccine No medical hx or concomitant products Very limited information has been reported at this time. Further information is being followed up; Sender's Comments: This is a patient of unknown age and gender who received mRNA-1273 vaccine (batch no. unk) who died on an unknown date after receiving the first dose of vaccine No medical hx or concomitant products Very limited information has been reported at this time. Further information is being followed up; Reported Cause(s) of Death: Unknown cause of death
5/6/2021	1293194		86	M	4/7/2021	4/28/2021	I63.9 - Acute CVA (cerebrovascular accident) (CMS/HCC) I63.9 - Cerebrovascular accident (CVA), unspecified mechanism (CMS/HCC)
5/6/2021	1293184	ME	66	F	4/1/2021	4/5/2021	Summary:66-yof with past medical history of ESRD HDD Monday Wednesday Friday, COPD not on home oxygen, hypertension, depression, hyperlipidemia, who comes to the ED with 4 weeks duration of generalized malaise, fatigue, and loose stool. Incidentally she reports her daughter tested positive for Covid on Sunday and she was exposed at that time, but sx pres for several wks . She was noted have a fever of 102.3. Ferritin 1086. Her O2 sats declined to 92 percent the emergency room. She also tested positive for Covid 19.

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5/6/2021		1292940	WA	82	M	1/8/2021	4/9/2021	tested positive for covid
5/6/2021		1292810		94	F	2/19/2021	2/19/2021	hallucinations, CHF, Pleural effusion, bilateral
5/6/2021		1292411	AL	75	F	5/3/2021	5/5/2021	Death resulted two days after 2nd dose in series.
5/6/2021		1292213	TN	51	F	4/28/2021	5/3/2021	DEATH. My sister took the vaccine on April 28th and DIED on May 3rd.
5/6/2021		1292206	NY	61	M	3/27/2021	3/27/2021	Extreme blood clots in lungs and legs
5/6/2021		1292046	NJ	86	F	2/16/2021	2/16/2021	Same day as when patient received the 2nd vaccine, she was overcome with generalized fatigue and nausea. By the 4th day, her legs would not hold her when she tried to stand getting out of bed. She was nauseous to the point of not being able to eat or drink. Infact, she did not have the strength or desire to eat or drink. By the 5th day post vaccine (02/20/21), I took her to the Emergency room because she was so fatigued, she just slept, and couldn't stay awake to eat or drink. She was able to get to the car with a walker, but that was the last time she walked. After time at hospital and then Skilled nursing, she passed away on 03/21/21. She never regained the ability to toilet herself, eat on her own, failed to eat and drink, and eventually was put on hospice because she lost 30 pounds over the month from failure to eat or drink, even though I was there or the nurse was there to feed her every meal, and try to get her to take fluids. Her fatigue was just overwhelming. When she first arrived at the emergency room, she: ? Presented with 2 days of weakness and AMS; fever, nausea and generalized fatigue ? Word finding difficulty; without stroke or acute abnormal on CT or MRI; according to the Hospital
5/6/2021		1291811	TX	59	F	4/30/2021	4/30/2021	day one threw 3 dizziness, day 4 throwing up, diarrhea, then death
5/6/2021		1293257		74	M	2/27/2021	4/8/2021	J96.01 - Acute respiratory failure with hypoxia (CMS/HCC) R57.9 - Shock (CMS/HCC) A41.9 - Sepsis, unspecified organism
5/6/2021		1293272		61	F	4/21/2021	5/5/2021	This 61 year old white female received the covid-19 vaccine on 4/21/21 and died on 5/5/21.

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5/6/2021	1291923	NH	58	F	5/5/2021	5/5/2021	I had a patient come in at 10:05am for a Moderna Covid vaccine. Just before 11am we received a call from the patient's roommate that the patient arrived home and collapsed, it was also mentioned her blood pressure was high. We explained that they needed to call 911 but the patient did not want to go to the hospital. We explained that this patient must go to the hospital and get evaluated. They did end up calling 911. Approximately 45 minutes later I received another call from the patient's roommate that EMS did not believe this was a reaction from the vaccine. The roommate mentioned that she was in fact mistaken about the blood pressure and it was actually low (92/54 mmHg). She also mentioned that the patient was vomiting. Around 1:45pm I received a call from the roommate to tell me that the patient had died.
5/6/2021	1293657	CA	34	M	5/5/2021	5/6/2021	34 y/o male with no PMHx presenting in cardiac arrest from home. Per pt's wife, he received 2nd dose of the Pfizer vaccine roughly 24 hours prior. He complained of arm soreness yesterday afternoon and some chills this morning, took Tylenol for these symptoms. She found him unresponsive in bed after speaking to him roughly 2 hours earlier. Per EMS, patient was in asystole upon their arrival. He received ~ 30 minutes of prehospital ACLS and an additional 20 minutes in the ED and remained in asystole throughout.
5/6/2021	1293211		86	F	2/26/2021	3/29/2021	J18.9 - Pneumonia I95.9 - Hypotension R09.02 - Hypoxia I48.91 - Atrial fibrillation with rapid ventricular response (CMS/HCC) A41.9 - Sepsis, unspecified organism
5/6/2021	1293404		91	F	2/26/2021	4/19/2021	Altered mental status R77.8 - Elevated troponin N39.0, R31.9 - Urinary tract infection with hematuria, site unspecified D64.9 - Anemia, unspecified type R40.2431 - Glasgow coma scale total score 3-8, in the field (EMT or ambulance) (CMS/HCC)
5/6/2021	1294303	CA	87	F	4/27/2021	4/28/2021	Vomiting and diarrhea starting 4/28/21 (day after vaccine). Came to ED today for these symptoms, feeling weak, had a cardiopulmonary arrest and died.
5/6/2021	1294116	MN	55	M	1/19/2021	1/25/2021	Five days post vaccine patient had a massive cerebral hemorrhage resulting in death.

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5/6/2021		1293909	CA	32	F	4/20/2021	4/23/2021	Per family, pt reported fatigue and elevated glucose, nausea and diarrhea 3-4 days after immunization. She was seen by her PCP following week and again was experiencing elevated blood glucose.
5/6/2021		1294370	TN	67	M	3/25/2021	4/4/2021	Patient received the COVID-19 vaccine on Thursday, March 25, 2021. On Tuesday April 6, 2021 he had a massive stroke, blood clot to left side of his brain. On Friday morning April 9, 2021 doctor's advised he had another stroke due to bleeding in the brain (paralysis on right side and racing heart beat). He died on Saturday, April 10, 2021 @ 5:45 AM.
5/6/2021		1293571		55	F	3/9/2021	3/18/2021	This 55 year old female received the Covid shot on 3/9/21 and went to the ED on 3/18/21 with shortness of breath and abdominal pain and again to the ED on 4/2/21 and again to the ED on 4/8/21 and admitted and died sometime thereafter.
5/6/2021		1293530		62	U	4/6/2021	5/4/2021	death
5/6/2021		1293523		79	F	2/18/2021	2/26/2021	This 79 year old female received the Covid shot on 2/18 and went to the ED on 2/26 and was admitted on 2/26 with chest pain and abdominal pain and again to the ED on 3/14 and admitted on 3/14 with hyperkalemia, acute renal injury, chest pain and died on 05/04/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
5/6/2021		1293462		64	M	3/29/2021	3/29/2021	This 64 year old male received the Covid shot on 3/29/21 and went to the ED on 3/29/21 and was admitted for left-sided nontraumatic intracerebral hemorrhage and died on 5/4/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
5/6/2021		1293454	IL	89	M	4/1/2021	4/1/2021	he felt tired the day of but continued doing his daily activities, on april 6 morning a friend couldn't reach him by phone and went to his home and found him on the floor, the hospital said he had a brain bleed, acute hypoxia, the bleed was on the left side of his brain, the doctor stated it was a cerebral bleeding that cause him to fall.

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5/6/2021	1293449		81	M	3/11/2021	4/2/2021	This 81 year old white male received the Covid shot on 3/11/21 and went to the ED on 4/2 and was admitted on 4/4 with shortness of breath, pericardial effusion, pulmonary edema, CHF and again to the ED on 4/30 and admitted on 4/30 with abdominal pain, hyponatremia, renal insufficiency and again to the ED on 5/1 with pericardial effusion and died on 5/4/21.
5/6/2021	1293409	WY	81	F	3/18/2021	3/31/2021	Started feeling sick day of 2nd dose of the Moderna vaccine. never felt good. personal journal entries testify of this. never felt good before she died. Had a massive thrombophlebotic stroke 10 days later causing death.
5/6/2021	1293944	AZ	74	F	4/27/2021	5/6/2021	Patient suffered cardiac arrest today
5/6/2021	1294259	OR	81	F	1/6/2021	1/13/2021	Her initial shot was 1/6/21. 7 days later tested positive for Covid through 2 rapid tests at the facility. They also sent 1 culture to the lab which confirmed positive on 1/18/21. I visited her on 1/18 and 1/20 and noticed something extremely wrong with her. She couldn't communicate. I called her PCP who immediately called the facility to rush her to the ER. Her Test results showed a small stroke on the front right lobe. She was hospitalized for about 10 days. She never regained her strength and her accomplishment in physical therapy of 125 feet, being reduced to never walking over 25 feet again. When her time was up, she transferred to a memory care unit. She just passed away 5/5/21.

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5/5/2021	1289333	KY	80	F	3/2/2021	3/3/2021	<p>March 2 - second Moderna bruising appears March 3 - spontaneous bruising appears March 4 - visit with primary care doctor, blood work shows significant drop in platelets March 9 - first visit with oncologist/haematologist & hospitalized March 9-19 - hospitalized for tests, treatment to increase platelets, & many blood panels. No official diagnosis, treat as ITP. Follow up visits with oncologist/haematologist to keep an eye on platelets as they increase. March 30-Apr 4 - ER visit due to swelling of ankles, feet, and left arm. Tests show superficial blood clot, fluid on lungs, and pneumonia. Oncologist said that "we have no official diagnosis", that she's being treated for ITP. April 6-14 - follow up visit to oncologist/haematologist show elevated kidney enzymes, then later liver enzymes, low sodium. April 14 - decision to move to short term rehab for regular PT and OT. Continued swelling (fluid in third spaces.) April 21 - visit to cardiologist to perform cardioversion, successful (during first week of hospital stay, heart rhythm med had to stop). April 23 - facility nurse discovered significantly low Hemoglobin and a blood transfusion was ordered. April 24 - returned to short term rehab facility. April 25 - discovered my mother on O2 and state of health was different, extremely weak and not moving, arm hurting badly. I insisted that her oncologist is contacted. Transported to ER. Discovered her blood work abnormal. After stabilizing her, rushed to the hospital ICU. April 26 - Discussed with her ICU doctor the history of what you have read above. He explained that the covid-19 vaccination has a tendency to affect three proteins specifically that clot and thin blood. I begged him to "get it out of her system." Her bleeding was significant and platelets dropped, again. Still has her mental facilities. Responding well to aggressive treatment: albumin transfusion, plateletpheresis, and CRRT. Pleural catheter to remove fluid from the lungs. Mention of Sepsis. April 27 - Lifted her head up today, opened her eyes, making doctors very happy. Her cardiologist and the ICU doctor both said they were "confused" and everything happening to my mom was "a mystery." Though going in to the evening, her nurse expressed to me that she's worried. The ICU oncologist called me at home in the evening. He asked me if she had been having a fever on a regular basis. He said he thought it could be TTP or a rare disease called HTH, but both</p>

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5/5/2021	1289604	LA	55	F	5/4/2021	5/5/2021	results wouldn't be back for one week. He planned to consult with a doctor. He explained to me that the blood was attacking itself and "confused," and that her organs were shutting down. He indicated that the blood work wasn't indicating significant infection. He referenced how the vaccination has made her auto immune system "go crazy." April 28 - I get a call very early from the nurse that she has been fighting with my mother's blood pressure all night, trying to keep it elevated. She told me to come to the hospital, because she had taken a turn for the worse. I arrive to find my mother's eyes wide open, breathing shallow, and blood pressure steady, but drops without assistance from medication. She continues to have her mental facilities. She passed away, organs shutting down, and blood pressure dropped.
5/5/2021	1289460	GA	63	M	4/28/2021	5/1/2021	Patient was found deceased in her home the next morning after getting her vaccine the day before
5/5/2021	1289460	GA	63	M	4/28/2021	5/1/2021	Only information known is what is in the obituary, Obituary states died suddenly on 5/1/21 after an illness.
5/5/2021	1289664	IL	68	M	2/3/2021	2/8/2021	2/4/21 Woke with bad headache continued all day 2/5,2/6 Bad headache continued-Tylenol no help 2/8 AM Loss of conschance. Loss of ability to speak. Taken to hospital. Briefly gained conschanceness. Still unable to speak. 2/27 Died.
5/5/2021	1289450	GA	96	F	1/14/2021	3/22/2021	Hospitalized and died due to COVID-19 after being fully vaccinated.
5/5/2021	1289414	KY	97	F	2/3/2021	5/1/2021	Patient tested positive on 04/20/2021 via PCR. Upon arriving to hospice care, patient tested positive via rapid on 04/29/2021. She died in hospice care on 05/01/2021.
5/5/2021	1289390	GA	64	F	2/19/2021	3/28/2021	Patient hospitalized and died of pneumonia caused by COVID-19 after being fully vaccinated.

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5/5/2021	1289378	NY	78	M	3/31/2021	3/31/2021	Patient had second dose of Pfizer vaccine in morning. That afternoon began complaining of abdominal pain with subsequent vomiting (x2) and possible diarrhea. Patient could not sleep that evening . Awoke next morning with continued abdominal pain throughout the day and ultimately was found unresponsive in bed. Transported to hospital where he was pronounced dead. Subsequently autopsy was performed which revealed significant pre-existing hypertensive and atherosclerotic cardiovascular disease with evidence of acute myocardial infarction. There is no clear evidence that this is related to the vaccination, however it is being reported due to potential public health interest and temporal proximity to vaccination.
5/5/2021	1289324	KY	74	F	4/14/2021	4/15/2021	Generally not feeling well after first shot. Shortness of breath the day after getting the second shot. The patient died the day after getting the second shot.
5/5/2021	1289022	WI	62	M	4/21/2021	4/29/2021	Patient passed away on 4/29/2021. A member of our staff noticed his name on the obituary section of our local news. We do not know of any other details.
5/5/2021	1288839	VA	93	M	2/20/2021	4/23/2021	Systemic: Blood Disorder (diagnosed by MD)-Severe, Additional Details: Patient passed away on 4/23/21 and had blood clots throughout body. Patient did not have any other symptoms that were reported. Patients family requested a VAERS report be submitted.
5/5/2021	1288833	NC	47	F	4/2/2021	4/14/2021	My wife (age 47) died on 14Apr2021 of a sudden death. She was found at home unresponsive and pulseless. Her medical history is non-contributory for a sudden cardiac death. A full autopsy is pending.

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5/5/2021	1288660	TN		F		4/15/2021	PASSED AWAY; This spontaneous report received from social media from a consumer via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration not reported, batch number: Unknown) frequency one total, dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On 15-APR-2021, the patient passed away due to unknown cause. It was unknown if the autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of unknown cause on 15-APR-2021. This report was serious (Death).; Sender's Comments: -Covid-19 vaccine ad26.cov2.s -PASSED AWAY. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: PASSED AWAY

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5/5/2021	1288452			F		4/1/2021	found dead/ sudden death; This is a spontaneous report from a contactable physician. A 56-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE lot/batch number and expiration date not reported) via an unspecified route of administration on an unspecified date at a single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient was found dead with her dog by her side on Thursday night just days after she took the second dose of the Pfizer COVID-19 vaccine. The reporter noted, "Covid-19 has turned all of our lives upside down in a way that we never imagined, and now it's safe to say that we won't even be able to say goodbye to our daughter." The (Name) mother also blamed the vaccine for the sudden death of her "healthy" daughter. While a post-mortem was expected to be held to learn more about her death, some of the family members believed she simply suffered a heart attack, while her mother was connecting her sudden death to the vaccine. The patient died in Apr2021. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The limited information in this report precludes a full assessment of the case; therefore a possible contributory role of the Pfizer suspect product BNT162B2 to the reported Death cannot be completely excluded. Information on relevant medical history, concomitant medications, and post-mortem result would be needed for a thorough medical evaluation of the patient's sudden death. 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: found dead/ sudden death

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5/5/2021	1287928			F			DEATH; This spontaneous report received from Pfizer via social media from a consumer concerned a female of unspecified age. The patient's height, and weight were not reported. The patient's past medical history included unknown cause of death. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, 1 total, administered on 22-MAR-2021 for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient died. It was unknown if the autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0- 20210461305- Covid-19 vaccine ad26.cov2.s-death.This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/5/2021	1289681		92	M	2/17/2021	5/3/2021	I63.9 - Stroke (CMS/HCC) R53.1 - Acute left-sided weakness
5/5/2021	1289387	MI	65	F	4/5/2021	4/10/2021	Patient had a subarachnoid hemorrhage and died at hospital on the afternoon of saturday April 10

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5/5/2021	1288450	PA	49	F	4/11/2021	4/12/2021	Feeling Tired; Headaches; Passed away; found dead in her bed; Was not feeling well; This is a spontaneous report from a contactable consumer. A 49-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), dose 2 via an unspecified route of administration on 11Apr2021 (lot number: ER8729) at the age of 49 years old, as single dose for COVID-19 immunisation. The patient's medical history was not reported. Concomitant medications included naproxen sodium (NAPROSYN) taken for an unspecified indication from 05Apr2021 to an unspecified stop date; and benzonatate taken for an unspecified indication from 05Apr2021 to an unspecified stop date. The patient previously received first dose of BNT162b2 on 21Mar2021 (lot number: EP6955) at the age of 49 years old, for COVID-19 immunization and experienced fatigue, legs were hurting, dry cough, and really bad headaches. No other vaccines received in four weeks. The caller's friend (patient) got her second dose on a Sunday (11Apr2021). Monday, (12Apr2021), the patient went to work, but left because she wasn't feeling well. The reporter stated that the reporter did not speak to her friend (patient) directly on this day but was told that her friend (the patient) was feeling tired and having headaches. The reporter stated that her friend died early Tuesday morning 13Apr2021. The patient underwent lab tests and procedures which included COVID-19 PCR test: negative on 05Apr2021. The patient died on 13Apr2021. An autopsy was performed, and results were not provided. Outcome of events 'was not feeling well', 'feeling tired', and 'headaches' was unknown.; Reported Cause(s) of Death: Passed away; found dead in her bed
5/5/2021	1290360	CA	102	F	5/4/2021	5/4/2021	Statement from health worker from Mobile Vax Team: "We arrived at the patient's home and daughter explained patient was on hospice, had difficulty breathing and was on fentanyl and morphine but they definitely wanted to go ahead with the vaccination. Nursing student, who gave the vaccine said she saw the patient breathing. She wasn't blinking from my observations. We left after 15 minutes. I left my purse there by mistake so about 40 minutes later we called and the daughter informed us that her mother had passed away. Death verified by hospice nurse.~~

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5/5/2021	1289375		80	M	2/17/2021	5/1/2021	Hospital Course: Patient admitted to the ICU in cardiogenic shock. Intra-aortic balloon pump. Multiple vasopressors. Intubated-mechanical ventilation. Appropriate sedation. EMD arrest 5/2 spontaneous recovery. Family meeting wife and daughter agreed to A1 designation. 0725 recurrent hypotension nonresponsive to vasopressors, calcium, serum bicarbonate. Pronounced dead at 0754.

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5/5/2021	1290766			M	4/26/2021		<p>Passed out; Abdominal pain; Trouble breathing; Sweats; Didn't feel well; Fatigue; death; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (death) and LOSS OF CONSCIOUSNESS (Passed out) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included No adverse event. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, the patient experienced LOSS OF CONSCIOUSNESS (Passed out) (seriousness criterion medically significant), ABDOMINAL PAIN (Abdominal pain), DYSPNOEA (Trouble breathing), HYPERHIDROSIS (Sweats), VACCINATION COMPLICATION (Didn't feel well) and FATIGUE (Fatigue). The patient died on 26-Apr-2021. The reported cause of death was Passed out. It is unknown if an autopsy was performed. At the time of death, LOSS OF CONSCIOUSNESS (Passed out), ABDOMINAL PAIN (Abdominal pain), DYSPNOEA (Trouble breathing), HYPERHIDROSIS (Sweats), VACCINATION COMPLICATION (Didn't feel well) and FATIGUE (Fatigue) outcome was unknown. No treatment information provided by the reporter and no history of concomitant medication was reported. Regarding the events of loss of consciousness, malaise, abdominal pain, dyspnea, hyperhidrosis and fatigue, based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. However regarding the event of death, Very limited information regarding this event has been provided at this time. Further information has been requested; Sender's Comments: Regarding the events of loss of consciousness, malaise, abdominal pain, dyspnea, hyperhidrosis and fatigue, based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. However regarding the event of death, Very limited information regarding this event has been provided at this time. Further information has been requested; Reported Cause(s) of Death:</p>

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								passed out
5/5/2021		1290733	MO	94	F	1/11/2021	1/27/2021	Found unresponsive but still breathing at assisted living. Sent by ambulance to the hospital
5/5/2021		1290421	CT	68	M	3/6/2021	3/6/2021	Fever, Diarrhea, chills, sweating, weakness beginning 7 hours after injection. Hospitalized due to these symptoms on March 10, and died on March 13.
5/5/2021		1290874	MI	68	M	1/13/2021	2/24/2021	Shortly after receiving this first dose,my husband's breathing went downhill, two months later he was dead. They could not find the cause. I told them I knew the cause. It was the Covid shot! I reported it to his pulmonologist and to the hospital staff. He was stable with all other conditions until he got this shot!
5/5/2021		1290282	KY	89	F	2/25/2021	4/4/2021	04/04/2021 - Assessed at start of shift. Family at bedside and aware of condition. Left after assessment. Unable to arouse. BP 97/64 P 71 R 30 and shallow O2 sat 80% with O2 per NC in place at 2 LPM. Afebrile at 97.7. MS given at this time. Upon entering room at 2245 Pulse faint and R very shallow at 4. Resp. and pulse ceased at 2300.
5/5/2021		1290276	GA	70	U	1/10/2021	2/19/2021	Hospitalized and died due to COVID-19 after being fully vaccinated.
5/5/2021		1290257	WI	59	M	4/16/2021	4/18/2021	Pt. called his daughter on Sunday April 18 and told her was not feeling well and said it was from the effects of the (one shot) COVID-19 vaccine. You would have to contact her directly for more information. He was found dead in his room by the manager around 5 pm on April 22nd. Manager told me his body was cold to the touch so she thought he may have passed the previous day on April 21st. Daughter told me earlier today that a doctor is running some tests to try to determine the cause of death. You would need to contact her for the doctors name. My own impression is that the emphysema was not severe enough to have caused his death as he could walk up to half a mile.

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5/5/2021	1289866	IL	62	M	4/13/2021	4/15/2021	On 4-15-21, patient started having breathing problems and shortness of breath. He had a cough that he had productive phlegm. He continued to get worse. On 4-18-21, he fell getting out of the shower and slumped onto the floor, stating that he couldn't breathe. His wife and neighbor took him to the local ER. His condition improved with oxygen. He was admitted on 4-18-21 and then was transported by Air Evac to ICU. He was placed on the ventilator prior to leaving on 4-21-21 and transferred to hospital. His condition continued to deteriorate and he passed away on 4-25-21.
5/5/2021	1290197	PA	73	F	4/10/2021	4/11/2021	Cardiac arrest, seizures death
5/5/2021	1291385	TX	77	M	3/2/2021	3/5/2021	Three days after vaccination, the patient was working outside when he suddenly died. Specific events are not known as he was alone at his work site. No bodily injuries were found. He was simply passed out and unresponsive when found. He had been deceased for hours upon his discovery.
5/5/2021	1290195	CA	66	F	3/23/2021	4/1/2021	Covid19 vaccine: The patient received her second dosage of Moderna on 3/23. Patient called family medicine triage on 4/1 regarding arm/shoulder pain from her vaccine site that was not improving. Pain started out near injection site but last couple days has been spreading to shoulder, some possible swelling, per patient. Finding it hard to sleep. Denies redness, warmth. Feels warm but no chills, doesn't have thermometer at home. The patient refused to call the COVID hotline. She was calling for an in-person appointment and was triaged for her symptoms. The next in-person appointment was not until Saturday 4/3, and it was given to the patient. She did not want to go to the ED. She suffered a witnessed massive heart attack the same day in her home and her partner called 911. Per partner's report, walked around a little that day, in discomfort. Then came home and laid down with more arm pain. She had acute L arm pain and then agonal breathing - passed in order of 2-3 minutes. Likely cardiac arrest after MI for few days. She was BIBA the EMTs continued CPR for ~20 minutes but was unable to revive patient. She was pronounced dead on 2023.

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5/5/2021		1290186	NY	64	F	5/5/2021	5/5/2021	Vaccine was administered at 12:10pm The patient was observed for 15 minutes and sent over to her oncologist for an appointment. A CT scan was ordered- CT done (no contrast) in the same building with daughter transporting. Daughter states mother became unresponsive after CT scan. She alerted the doctor and staff who responded. They moved her to an exam room. Noted agonal breaths on vital signs. CPR started. CPR stopped shortly after per the families request. Death pronounced at 2:34pm.
5/5/2021		1290128		36	M	4/1/2021	4/1/2021	Patient collapsed at home with cardiopulmonary arrest. He had been complaining of shortness of breath 1 week prior to the event, starting when he received his covid vaccination. The differential diganosis was pulmonary embolism, myocardial infarction or arrythmia. CPR was started immediately and patient received tPA during ACLS without return of spontaneous circulation.
5/5/2021		1290096	FL	59	F	4/6/2021	4/20/2021	4/20/21: patient arrived to ER per EMS status post PEA arrest. Per ER records, patient became unresponsive while sitting in bed witnessed by husband at home. According to husband, they had come home, she sat on the bed and complained she was not feeling good. She then fell back on the bed and began to seize. Subsequently she had intermittent episodes of alertness and was able to speak to the husband followed by unresponsiveness. At time of EMS arrival pt. was unresponsive. EMS noted BS 120s, SBP 50s. En route to hospital, pt. had a CP arrest for which epinephrine was given, CPR initiated with ROSC. Pt. arrived to the ER on a NRB mask attempting to speak. Subsequently, pt. had several CP arrests with asystole, and
5/5/2021		1289723	CA	38	F	5/3/2021	5/4/2021	Death. Approximately 12 hours after administering the vaccination shot, patient experienced a medical emergency and lost her pulse. Paramedics attempted to resuscitate her for about 80 minutes. Her heart was unable to be restarted. She was declared deceased at 3:00 AM locally.

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5/5/2021		1290448	OR	60	M	5/4/2021	5/4/2021	5/4 : Resident with PICC line following course of IV ABX for osteomyelitis. Resident was administered Jassen vaccine at 1100am. Resident had PICC line and PIV removed at aprox 1700. He was followed up by nursing staff at 2000 at which time he complained of swelling, redness, and heat to the PICC site. On-call provider was notified and ordered transportation to Emergency Department for evaluation. Facility was notified of passing at 0200 on 5/5
5/5/2021		1289756	PA	86	F	4/5/2021	4/24/2021	Patient passed away before receiving second dose, husband states not COVID related death.
5/4/2021		1285387	MI	60	F	4/8/2021	4/8/2021	From what I understand the night of the dose she had chills and a headache. She had several bad headaches since that vaccine up until her death on April 21st. She was given the J&J vaccine on April 8th at the CVS. Died on April 21. at home. I just saw an article today, May 4th that about 1-2 hours from her death, another female in her 30's got the J&J vaccine on the SAME DATE April 8 and she died on APRIL 19th. Pretty close in deaths and same vaccine. IS IT CONNECTED?
5/4/2021		1285510	NY	60	M	4/12/2021	4/13/2021	60 yo male with BMI 30 and vodka x 2-3 bottles per day. In hospital 4/9-14 for obstructive uropathy of undetermined origin. In hospital on 4/12 and got J & J there. 4/13 with no prior history developed a DVT. D/C'd on 4/14 on Eliquis. Found unresponsive 4/19. At autopsy, found pulmonary thromboemboli

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5/4/2021		1285561	MI	79	M	3/12/2021	4/4/2021	The patient presented with chest pain around 5 pm on 4/4/21. Patient reported "pain came out of nowhere." Patient reported pain was non-exertional and non-positional. He described it as "a constant burning sensation" located in the center of his chest with radiation upwards toward his jaw and shoulders, bilaterally. He was transferred to COVID unit, became hypotensive, hypoxic was seen by house MD. Lung exam crackles bilaterally. IV fluids stopped, patient was given 40 mg Lasix, Morphine 2 mg and started on a small dose nitroglycerine drip. POX 70s, low 80s so Bipap ordered. Patient developed v tach and arrested, resuscitated, defibrillated, received multiple meds, intubated by anesthesia, transferred in ICU on Levophed and Epinephrine. Arrested in ICU. Lines were placed by ICU team, arrested again in ICU. Was maxed out on 4 pressors, despite CPR, pulse could not be obtained, patient was pronounced dead 4/6/21 at 3:31am. 1. Triple vessel CAD 2. Moderately severe LV dysfunction with and EF 30% 3 The recent NSTEMI is secondary to the occlusion of the SVG-OM1. There is a large thrombus in the SVG which makes PCI of this vessel unlikely to be successful. 4 The native OM1 is chronically occluded. It may be possible to attempt to open this with CTO techniques, however, at this time continued medical treatment. 5. Perclose
5/4/2021		1285713	TX	85	F	4/10/2021	4/15/2021	Died unexpectedly in my arms. On the 15th. Could not breathe We tried to use inhaler and did not work.
5/4/2021		1285872	PR	80	F	4/24/2021	4/26/2021	80 yo woman with hx of HTN, anxiety dneies any other conditions, presented to ER due to epigastric pain, vomiting x1. In Er presented with elevated heart rate, EKG with sinus tachycardia, regular rythm. CXR with COPD changes. There are bibasilar infiltrates suspicious for pneumonitis in the appropriate clinical setting. PATient admitted to unit for further treatment and workup. WBC 16.91 4/27/2021
5/4/2021		1285906		77	F	3/25/2021	4/1/2021	Patient had an ED visit and/or hospitalization within 6 weeks of receiving COVID vaccine.
5/4/2021		1286074	IL	59	M	4/23/2021	4/23/2021	We were notified by company on 4/28/21 that patient had died between the afternoon of 4/23 and Saturday morning 4/24/21. No other information was given to us.

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5/4/2021	1285361	TX	53	M	4/1/2021	4/22/2021	I am unsure if this illness was related to his recent vaccination. However, after seeing reading this article about possible link between covid vaccination and the development of myocarditis, I felt compelled to report: https://www.reuters.com/world/middle-east/israel-examining-heart-inflammation-cases-people-who-received-pfizer-covid-shot-2021-04-25/ . The patient in question is a 53 year old man with a history of previous carotid artery dissection and hyperlipidemia transferred to our hospital from an outside facility for presumed myocarditis. He rapidly decompensated, required intubation, multiple vasopressors, was initiated and ultimately expired.
5/4/2021	1285947	GA	80	M	1/21/2021	4/21/2021	Hospitalized and died of COVID-19 after being fully vaccinated.
5/4/2021	1285303	WI	78	M	3/23/2021	4/18/2021	Patient admitted to Hospital on 4/16/2021 with 2 weeks of generalized weakness, chills, poor oral intake and nonproductive cough. Chest x-ray shows consolidation. Patient tested for covid-19 which returned positive on 4/18/21. Patient remained hospitalized and started on steroids and vitamin c/e after covid testing returned positive. Patient respiratory status worsened requiring high flow nasal cannula and BiPAP as needed. Patient did not want to be intubated and decided to go to comfort care. Patient passed away on 5/3/21 in the hospital.
5/4/2021	1285193	AL	73	M	4/8/2021	4/25/2021	Multiple Blood Clots in Right Lung, clots passed through his heart and caused his death
5/4/2021	1284956	PA	68	F	4/30/2021	5/1/2021	My mom was found dead at home 24 hours after having vaccine

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5/4/2021	1284940			F			<p>girl died after getting second dose of Moderna vaccine it was thought to be fault of Tylenol.; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (girl died after getting second dose of Moderna vaccine it was thought to be fault of Tylenol.) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant and treatment information was provided. Company comment:This is an age unknown, female patient who received mRNA-1273 vaccine (batch no. unk) who died, after receiving second dose of vaccine. No medical history and conmeds were provided. Existing comorbidities probably could have been the causative factor in her death. Very limited information has been reported at this time. Further information is expected.; Sender's Comments: This is an age unknown, female patient who received mRNA-1273 vaccine (batch no. unk) who died, after receiving second dose of vaccine. No medical history and conmeds were provided. Existing comorbidities probably could have been the causative factor in her death. Very limited information has been reported at this time. Further information is expected.; Reported Cause(s) of Death: Reporter mentioned that a girl died after getting second dose of Moderna vaccine.that it was thought to be fault of Tylenol.</p>

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5/4/2021	1284937	NY	81	M	1/18/2021	1/31/2021	<p>passed away(death); temperature 99.7F; tired; left arm swelling; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (passed away(death)) in an 81-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 012L20A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Diabetic and Asthma ((but everything was under control).). On 18-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 31-Jan-2021, the patient experienced PERIPHERAL SWELLING (left arm swelling) and FATIGUE (tired). On 31-Jan-2021 at 10:30 AM, the patient experienced PYREXIA (temperature 99.7F). The patient died on 25-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, PERIPHERAL SWELLING (left arm swelling), PYREXIA (temperature 99.7F) and FATIGUE (tired) outcome was unknown. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 31-Jan-2021, Body temperature: 99.7 f (abnormal) elevated. On 31 Jan 2021, the patient was tired and went to bed early. At 10:30 pm, the patient's wife reported the patient's temperature as 99.7 degrees Fahrenheit and was given acetaminophen. The patient's left arm had swelling. The patient's son (doctor) prescribed antibiotic for treatment. On 01 Feb 2021, the patient was taken by ambulance to hospital. He was at hospital for 24 days and was on a ventilator. Treatment included Tylenol antibiotic. Company comment: Very limited information regarding the events has been provided at this time. Further information has been requested...; Sender's Comments: Very limited information regarding the events has been provided at this time. Further information has been requested...; Reported Cause(s) of Death: Unknown cause of death</p>

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5/4/2021	1284865	TN		F			hemorrhage stroke; This is a spontaneous report from a Pfizer-sponsored program, received from a contactable nurse. A 55-year-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number and expiration date not provided), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient's medical history included CVA. The patient's concomitant medication included oral clopidogrel bisulfate (PLAVIX) for CVA at 25 mg, 1x/day (25 mg once everyday). It was reported that a patient who had the Covid vaccine, 3 days later the patient had hemorrhage and she passed away. It was clarified that patient had a hemorrhage stroke and passed away. The reporter did not know the date the patient passed away, but this was called on the office on 16Apr2021. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: Based on the temporal relationship, a causal association between the reported hemorrhagic stroke and the suspect drug, BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), cannot be completely excluded. Of note, patient has a medical history of CVA. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: hemorrhage stroke

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5/4/2021	1284864	WV	96	F	1/29/2021	2/1/2021	blood clot in her leg; blood clot in her leg; Cardiac arrest; Heart attack; This is a spontaneous report from a contactable consumer (patient's daughter). A 96-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), dose 2 via an unspecified route of administration on 29Jan2021 (Lot Number: EL9265) as SINGLE DOSE for COVID-19 immunization. Medical history included blood clots in her legs from an unknown date and unknown if ongoing , diabetec, bone infection, surgery and anemic; all from an unknown date and unknown if ongoing; and a family history of gangrene from an unknown date and unknown if ongoing of her mother. Concomitant medications included apixaban (ELIQUIS) taken as blood thinner and furosemide (FUROSEMIDE) taken for an unspecified indication; both start and stop date were not reported. The patient previously had BNT162B2 (Lot Number: EL1283) dose 1 on 08Jan2021 for COVID-19 immunization. The facility where the most recent COVID-19 vaccine was administered was in the military facility. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. On 15Mar2021, the patient died due to a heart attack and cardiac arrest. The patient developed a blood clot in her leg and had to have her leg taken off. The date of surgery was 05Feb2021, not early Mar2021 like was originally stated at the hospital. The patient was admitted either on 01Feb2021 or 02Feb2021 and discharged on 23Feb2021. They had a bunch of bad weather and then they put the patient in the nursing facility for about a month and when she was brought home she had a heart attack and died due to cardiac arrest. She doesn't know about the blood clot and this being related to the COVID vaccines but the patient had surgery a week after she had her second shot. The heart attack was on 15Mar2021. The patient had a history of blood clots in her legs before and she had problems with that so that might of made it worse but she doesn't know for sure. The patient died on 15Mar2021. An autopsy was not performed. The outcome of the event blood clot in her leg was unknown. No follow-up attempts are possible; information about lot/batch number has been obtained.; Reported Cause(s) of Death: heart attack; cardiac arrest

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5/4/2021		1284730	FL	68	M	3/18/2021		Death; This case was received via an unknown source (no reference has been entered for a health authority or license partner) on 28-Apr-2021 and was forwarded to Moderna on 28-Apr-2021. This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a 68-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 18-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. No treatment information was provided. No concomitant medication was provided.; Sender's Comments: This is a 68-year-old, male patient who received mRNA-1273 vaccine (batch no. unknown) who died, on an unknown date after receiving first dose of vaccine. No medical history or conmeds were provided. Existing comorbidities probably could have been the causative factor in his death. Very limited information has been reported at this time. Further information is expected.; Reported Cause(s) of Death: unknown cause of death
5/4/2021		1286114	NJ	73	M	3/31/2021	4/6/2021	At 11:30am on April 6th my dad had a type A Aortic Dissection. He was rushed in an ambulance to Hospital. 4 hours later, they evaluated him and sent him by medivac to Hospital for emergency open heart surgery. Dr. performed the surgery which my dad survived. He continued to have additional complications in the ICU including a right brain stroke which may have happened during surgery. While in the ICU, he contracted pneumonia and his lungs and kidneys began declining. 20 days after the aortic dissection he died in the hospital.

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5/4/2021	1284727	IL	67	F	3/18/2021	3/23/2021	heart attack; Bood clot; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of MYOCARDIAL INFARCTION (heart attack) and THROMBOSIS (Bood clot) in a 67-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On 18-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 23-Mar-2021, the patient experienced MYOCARDIAL INFARCTION (heart attack) (seriousness criteria death and medically significant) and THROMBOSIS (Bood clot) (seriousness criterion death). The patient died on 23-Mar-2021. The reported cause of death was Heart attack and Clot blood. It is unknown if an autopsy was performed. Not Provided No concomitant medication were reported. No treatment information was provided.; Reported Cause(s) of Death: Heart attack; Clot blood

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5/4/2021	1284731	NY		M			<p>Died due to his many medical conditions; could not administer second vaccine; This spontaneous case was reported by a pharmacist (subsequently medically confirmed) and describes the occurrence of GENERAL PHYSICAL HEALTH DETERIORATION (Died due to his many medical conditions) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included Rehabilitation therapy (Patient was in rehabilitation center) and General physical health deterioration (It is reported that patient had history of many medical conditions, unspecified.). On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced GENERAL PHYSICAL HEALTH DETERIORATION (Died due to his many medical conditions) (seriousness criterion death) and PRODUCT DOSE OMISSION ISSUE (could not administer second vaccine). The patient died on an unknown date. The reported cause of death was medical conditions. It is unknown if an autopsy was performed. At the time of death, PRODUCT DOSE OMISSION ISSUE (could not administer second vaccine) had resolved. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. No treatment information was provided.; Sender's Comments: This is a male patient of unknown age who received mRNA-1273 vaccine (batch no. unknown) who died on an unknown date after receiving first dose of vaccine. Patient had history of many medical conditions. No conmeds were given. Reporter could not administer second vaccine. Very limited information has been reported at this time. No further information is expected.; Reported Cause(s) of Death: medical conditions</p>

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5/4/2021		1287846	CA	79	M	3/23/2021	3/28/2021	The person who received the vaccine got very sick 5 days after the receiving the vaccine. The patient was talking at 2:00 pm on the 28th and he was on a ventilator a few hours later. The doctors were never able to determine why he got so sick suddenly. He passed away on April 6th.
5/4/2021		1286085	NY	86	F	2/9/2021	4/20/2021	Patient had a brain hemorrhage on April 20th and died on April 25th.
5/4/2021		1284660	FL		U			CLOTS; This spontaneous report received from a physician concerned a patient of unspecified age and sex. The patient's weight, height and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration not reported, batch number: Unknown) frequency one total, dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient died due to clot. It was unknown if autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died to clots on an unspecified date. This report was serious (Death). This case, from the same reporter is linked to 20210457363.; Sender's Comments: V0: 20210456400-Covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: CLOTS
5/4/2021		1286108	IL	79	F	4/7/2021	4/28/2021	Hospitalization 4/8/2021-4/16/2021 with discharge home on hospice and death 4/28/2021. Admitting diagnosis: Acute respiratory distress, COPD, acute hypercapnic hypoxic respiratory failure, Hypomagnesemia; HTN; probable UTI with concerns for Severe Sepsis; Altered mental status with concerns for metabolic encephalopathy along with dementia.
5/4/2021		1287685	MI	88	M	3/22/2021	4/29/2021	WEEKNESS IN THE RIGHT SIDE OF BODY

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5/4/2021	1286795	AZ	57	F	5/3/2021	5/3/2021	Patient reported feeling "shaky" day of 2nd vaccine dose. Patients family reports that patient wasn't feeling well the night of and called EMS to her home. Patient passed away this morning around 5am.
5/4/2021	1286760	TX	58	F	4/10/2021	4/11/2021	fever, shortness of breath, respiratory distress, pneumonia, liver failure, death.
5/4/2021	1286690	NY	85	M	4/21/2021	4/22/2021	As per nursing notes documented on 4/22/21 at 6:17 am, resident observed in bed with no respirations at around 5:10 am. Patient completed a 7 days course of Levaquin for UTI. Patient was on Vancomycin IV 750 mg every 12 hours and Zosyn 2.25 mg every 6 hours for possible pneumonia.
5/4/2021	1286679	AL	71	U	4/24/2021	4/1/2021	Neck pain and stiffness starting shortly after vaccine admin of 2nd dose
5/4/2021	1286659	TN	82	M	4/15/2021	4/15/2021	Shortness of breath, hypoxia, + COVID-19
5/4/2021	1286629	NY	69	M	2/4/2021	2/4/2021	had second dose of Pfizer vaccine on 2/4 at 15:00, had back pain, nausea and vomiting around 18:00, went to the ER around midnight with abdominal symptoms and stable VS, and went unresponsive and was pronounced on 2/5 at 6:23 am. Dr. did the autopsy over the weekend. At autopsy, he has remote myocardial infarcts and what appears very recent myocardial infarct. Quick tox was negative for drugs. No hemorrhage or signs of inflammation in the injection site (right shoulder). No other findings. Cause and manner of death are currently pending for extensive histology and viral testing. F/u from OCME on 2/22/2021: histology slides and decedent has myocardial infarct. He will be signed out as such. Covid swab is negative
5/4/2021	1286158	NC	75	F	3/6/2021	4/16/2021	Pt had an appointment with her cardiologist 4/15/2021 and no changes in patient's health noted states daughter. Patient performed yard work at noon 4/16/2021 and developed chest tightness that was relieved by rest. After patient's nap at noon no more chest discomfort occurred. Patient went to bed that night and husband noted she was sleeping comfortably with no breathing difficulties at midnight. At 3 am husband found patient cold and she had expired.

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5/4/2021		1286592	NY	74	M	2/19/2021	2/19/2021	received both of his doses of the Pfizer COVID vaccine . Had a migraine after the first dose, and a mild headache after the second dose. Unclear whether or not he suffered chronic migraines, although there was paperwork at the death scene stating that he had an appointment for a MRI on 3/1/21. No recent influenza-like symptoms are reported. He was found dead in his home on 2/22/21, seated at a chair at his desk. Autopsy findings include an enlarged and dilated heart, granular kidneys, with the right kidney very shrunken and about half the size of the left kidney, and prostate hypertrophy. There is no trauma. The airway is not edematous. Ancillary studies that are pending include microscopy, toxicology (basic testing plus vitreous chemistries), a COVID swab, a respiratory viral panel swab, HIV testing, and neuropathology. The cause and manner of death on the death certificate will both be ?pending further studies? until these studies are completed.
5/4/2021		1286144	NY	49	M	4/21/2021	4/23/2021	Shortness of breath followed by sudden collapse followed by death.
5/4/2021		1286213	KY	83	F	4/1/2021	4/23/2021	Presented to ED on 4/23/21 with weakness, malaise, poor appetite and nausea; elevated temperature, tachycardia, lactic acidosis, chest XRAY patchy infiltrates. COVID test positive. Respiratory failure and COVID19 pneumonia. Patient referred to hospice.
5/4/2021		1286232	MI	70	M	5/4/2021	3/25/2021	patient passed away before second dose
5/4/2021		1286275	NJ	26	F	4/12/2021	4/1/2021	Death due to a Subarachnoid hemorrhage
5/4/2021		1286303	MI	69	M	4/3/2021	4/9/2021	patient passed away
5/4/2021		1286341		81	F	4/23/2021	5/3/2021	Patient was very ill and homebound. Her son has to physically carry her to move her from one place to another and she is considered homebound.
5/4/2021		1286431	CA	73	M	4/8/2021	4/23/2021	Patient reported to ER on 4/23/21 with complaint of chest pain. Symptoms started that morning. Felt fine the evening before. No fevers, chills or productive cough. He also had associated shortness of breath.

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5/4/2021		1286457	NY	100	F	4/8/2021	4/8/2021	Received first dose of Pfizer vaccine in left deltoid on 4/8/21 at 7:30 am. At 10:00 am, she called her niece and complained of extreme fatigue. At 12:00 pm, she complained of worsening fatigue and blurry vision. At 3:40 pm, she complained of loss of appetite but denied fever and chills. The niece was unable to reach her by phone after 4 pm, so she came over to the decedent's residence at 6:15 pm to check on her. The niece found her lying face up in bed ?gasping for air.? She then became unresponsive and EMS was called. The decedent was pronounced at 8:11 pm after unsuccessful resuscitative efforts. Autopsy showed hypertensive and atherosclerotic cardiovascular disease with marked partially calcific coronary atherosclerosis; marked pulmonary edema; and pleural effusions. The brain was saved for neuropathology given the history of blurry vision.
5/3/2021		1281242	FL	81	F	4/9/2021	4/20/2021	Weakness loss of appetite 1wk after trouble breathing body hiccups heart attack death (almost 2 wks after)
5/3/2021		1281744		68	F	4/7/2021	4/13/2021	This 68 year old female received the Covid shot on 4/7/21 and died on 4/13/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
5/3/2021		1282259	CA	99	F	2/15/2021	2/17/2021	Death
5/3/2021		1281824	KY	59	M	4/6/2021	4/13/2021	Pt. in cardiac arrest on 04/13/2021. Pt. was pronounced dead at Hospital on 04/13/2021.
5/3/2021		1281798		83	M	3/22/2021	4/5/2021	This 83 year old black male received the Covid shot on 03/22/2021 and went to the ED on 4/5/21 and was admitted on 4/8/21 with CHF, bilateral lower extremity edema, chronic kidney disease and died on 5/1/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.

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5/3/2021	1281778		73	F	2/27/2021	4/29/2021	This 73 year old female received the Covid shot on 2/27/21 and went to the ED on 4/29/21 and was admitted on 4/29/21 with respiratory distress, cardiac arrest and other symptoms and died on 5/1/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
5/3/2021	1281748	NY	68	M	3/9/2021	3/18/2021	~~Janssen COVID-19 Vaccine EUA" 3/18 twitching of foot...severe leg pain 7:45 PM 3/19 involved in a motor vehicle accident with cardiac arrest and a dissecting aortic aneurysm 12:45 PM
5/3/2021	1282396		87	M	2/26/2021	5/2/2021	death
5/3/2021	1281713		73	F	2/27/2021	4/29/2021	This 73 year old black female received the Covid shot on 2/27/21 and went to the ED on 4/29/21 and was admitted on 4/29/21 with respiratory distress, cardiac arrest and other symptoms and died on 5/1/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
5/3/2021	1281690		67	M	2/24/2021	4/29/2021	Death Non-STEMI (non-ST elevated myocardial infarction) (CMS/HCC) Chronic renal failure
5/3/2021	1281673	FL	81	F	12/28/2020	1/1/2021	stroke leading to death
5/3/2021	1281552		62	M	4/15/2021	4/17/2021	I cannot confirm the type of vaccine the pt received as it didn't occur in our health system. Pt experienced out of hospital cardiac arrest a few days after vaccination. Pt resuscitated; however never regained consciousness. Coronary angiogram revealed normal coronary arteries.
5/3/2021	1282517	NY	77	M	3/22/2021	3/28/2021	Patient visited his doctor/pulmonologist on 3/18/21 and had a negative covid test- NO SYMPTOMS Patient became very sick AFTER the Moderna Covid Vaccine was administered on 3/20/21. Within 10 days he developed a serious cough/phlegm, he became weak, disoriented, had a hard time walking/ambulating, lifting his arms and communicating. He was diagnosed with Covid Pneumonia. Patient had underlying conditions (heart, lung and kidney disease)

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5/3/2021	1281531	TX	35	M	4/5/2021	4/12/2021	Received 2nd dose of vaccine, 5 days later his left leg started hurting and swelling. He had severe headache afterwards, dizzy and blurred vision. 04/24/2021 he complained of not feeling right, coughed and passed out. Had fever and chills when he came to. Wife called 911 and was talking and walking. Was awake and talking in ambulance, oxygen level was low. Once arrived at hospital, he became restless and passed away within 3 minutes. Autopsy was performed due to his age - 35 and no pre-existing illnesses - was determined he died of Pulmonary Thrombo Embolism
5/3/2021	1280996	MN	76	M	3/1/2021	5/1/2021	Had average Saturday at home, no illness. Layed in bed talking. Became nauseated, got up to vomit. Went back to bed, talking again. Said something wasn't right. Massive Heart Attack and Immediate Death. Police arrive in 2 minutes to begin CPR. Medic soon after. Efforts to resuscitate unsuccessful.

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5/3/2021	1281046	TX	65	M	3/27/2021	3/27/2021	Arthralgia; Chills; Cold sweat; Dyspnoea; Fatigue; Feeling of body temperature change; Nausea; Pain; Pain in extremity; Pallor; Unresponsive to stimuli; This case was received via FDA VAERS (Reference number: 1150577) on 27-Apr-2021 and was forwarded to Moderna on 27-Apr-2021. This regulatory authority case was reported by an other health care professional (subsequently medically confirmed) and describes the occurrence of ARTHRALGIA (Arthralgia), CHILLS (Chills), COLD SWEAT (Cold sweat), DYSPNOEA (Dyspnoea), FATIGUE (Fatigue), FEELING OF BODY TEMPERATURE CHANGE (Feeling of body temperature change), NAUSEA (Nausea), PAIN (Pain), PAIN IN EXTREMITY (Pain in extremity), PALLOR (Pallor) and UNRESPONSIVE TO STIMULI (Unresponsive to stimuli) in a 65-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 017B21A and 014M20A) for COVID-19 vaccination. Concurrent medical conditions included Lactose intolerance. Concomitant products included DIPHENHYDRAMINE, VITAMIN D3 and ZINC. On 27-Mar-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 27-Mar-2021, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On 27-Mar-2021, the patient experienced ARTHRALGIA (Arthralgia) (seriousness criterion death), CHILLS (Chills) (seriousness criterion death), COLD SWEAT (Cold sweat) (seriousness criterion death), DYSPNOEA (Dyspnoea) (seriousness criterion death), FATIGUE (Fatigue) (seriousness criterion death), NAUSEA (Nausea) (seriousness criterion death), PAIN (Pain) (seriousness criterion death), PAIN IN EXTREMITY (Pain in extremity) (seriousness criterion death), PALLOR (Pallor) (seriousness criterion death) and UNRESPONSIVE TO STIMULI (Unresponsive to stimuli) (seriousness criterion death). 27-Mar-2021, the patient experienced FEELING OF BODY TEMPERATURE CHANGE (Feeling of body temperature change) (seriousness criterion death). The patient was treated with PARACETAMOL (TYLENOL) at an unspecified dose and frequency. The patient died on 31-Mar-2021. The cause of death was not reported. It is unknown if an autopsy was performed. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if

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						available): On an unknown date, Blood chloride: 104 (Inconclusive) 104. On an unknown date, Blood creatinine: 1.4 (Inconclusive) 1.4. On an unknown date, Blood glucose: 421 (Inconclusive) 421. On an unknown date, Blood lactic acid: 9.7 (Inconclusive) 9.7. On an unknown date, Blood potassium: 4.1 (Inconclusive) 4.1. On an unknown date, Blood sodium: 139 (Inconclusive) 139. On an unknown date, Blood urea: 13 (Inconclusive) 13. On an unknown date, Calcium ionised: 1.18 (Inconclusive) 1.18. On an unknown date, Haematocrit: 42 (Inconclusive) 42. On an unknown date, SARS-CoV-2 test: negative (Negative) Negative. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. Paracetamol was taken for the treatment of pain. Patient's wife called 911 and she stated the told her pull him into floor and EMS arrived as soon as she got in the floor to start CPR. Action taken with the mRNA-1273 in response to the event is not applicable.; Sender's Comments: Very limited information regarding these events has been provided at this time. The fatal outcome may be related to the patient's pre-existing comorbidities. Further information required.; Reported Cause(s) of Death: Death
5/3/2021	1281533 PA	71 F	4/11/2021	4/14/2021	Blood clot in the lungs, Death	
5/3/2021	1283410 WI	85 F	3/10/2021	3/15/2021	Patient had a stroke on March 15, 2021 as described as a blood clot in her brain. Medical personnel were unable to correct it surgically and she passed away that evening in the hospital. Death was the final result.	
5/3/2021	1282520 TN	61 F	1/11/2021	3/25/2021	62F with stage 2 mycoses fungoides, peripheral neuropathy, HTN, HLD, admitted from hepatology clinic on 3/25/21 for worsening liver injury and URI symptoms, found to be COVID positive. Liver biopsy with evidence of severe hepatitis with bridging necrosis. Course complicated by increase encephalopathy 3/31/21 concerning for acute liver failure, requiring stay in COVID ICU, transferred to hepatology service on 4/2/21. DDx remains viral hepatitis, autoimmune hepatitis, and drug-induced liver injury now on steroid therapy as of 3/31/21 and NAC. Pt. had worsening ALF and encephalopathy, transitioned to comfort care. Pt died early morning of 4/4/21	

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5/3/2021	1284449	TX	82	F	4/12/2021	4/14/2021	Approximately 40 hours after second Pfizer vaccine, patient complained of pain in lower right leg, and a cold foot, lethargy, weakness, feeling unwell. 3 days later, shortness of breath, difficulty breathing, rapid heartbeat, and confusion began. Went to Medical center on 4/20/21, diagnosed with DVT, PE and clots in and around the heart and passed away on 4/21/21 of cardiac shock in the setting of pulmonary and arterial thrombosis.
5/3/2021	1285078	CA	92	M	1/11/2021		Patient was a well and active 92 year old man, who walked 2 miles daily with a walker. He received Covid vaccine dose 1 on 11 Jan. On or before 30 Jan, he noted pains in one leg while walking. Newly dilated veins on the lower leg were noted. On Feb 2 a doppler US revealed a superficial saphenous vein venous thrombosis, also new onset A flutter. Aspirin begun. On Feb 5 he woke with a cold foot (same side) and was found to have an arterial thrombus from SFA through distal posterior tibial. He underwent emergency thrombectomy, went to rehab for recovery, on Feb 23 suffered intracranial hemorrhage and died on Mar 10.
5/3/2021	1284252		68	F	4/20/2021	4/22/2021	patient suffered from a massive right ICA stroke on 4/22 (2 days after vaccine). stroke progressed to cerebral edema with evidence of herniation. she was intubated and unfortunately expired. not a neurosurgery candidate due to her age and signs of herniation.
5/3/2021	1283686	HI	47	F	4/23/2021	4/24/2021	Patient discovered by caregiver to have passed away on the morning of 4/24/21
5/3/2021	1283204	KY	66	F	1/14/2021	1/14/2021	Per the nursing home facility patient received her second dose of vaccine on 01/14/2021 but it was not listed on KYIR. Patient tested positive on 04/14/2021 and died on 04/16/2021.
5/3/2021	1283093	CA	66	F	4/28/2021	5/1/2021	Tired, headache.
5/3/2021	1282776	MO	79	M	3/3/2021	3/17/2021	March 22 had a stroke, admitted, respiratory entire time, then rec'd death certificated Death Certificate

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5/3/2021	1283733	NJ	60	M	3/18/2021	4/1/2021	on April 2nd patient woke up at around 4:30 am and complained of pain in his back. I rubbed his back and he wondered if it was just something he ate. He then tried to calm down and got back into bed . He was holding my hand when suddenly his hand felt cold. I turned on the light to find his eyes rolled back and he was gasping his last breath . This was about 5:20 AM . Patient was a healthy active man.
5/3/2021	1282687		71	M	2/22/2021	4/8/2021	see previous submission
5/3/2021	1283082	IL	69	F	4/7/2021	4/9/2021	HAD LITTLE WEAKNESS AND TIREDNESS SINCE NEXT DAY AFTER TAKING VACCINE ON 4/7/2021 ON 4TH DAY, MORNING, 8.00 AM, 4/11/2021, WHEN I CHECKED AFTER WAKING UP, PATIENT WAS NOTICED NOT RESPONDING, NOT BREATHING, NO HEART BEAT. 911 WAS CALLED AND ARRIVED AT 8.20 AM. THEY TRIED VARIOUS MEASURES FOR 1 HOUR, AND THEN THEY CONCLUDED THAT THE PATIENT IS NO MORE.
5/3/2021	1282788	CO	57	F	4/29/2021	5/2/2021	Vaccine was administered on 04/29/2020 or 04/30/2021. On 05/02/2021 patient was found deceased in residence. Coroner's office will be performing autopsy.
5/3/2021	1282830	CT	84	F	2/4/2021	2/24/2021	Early in the around 10am on Feb. 24, 2021 my mother was found dead on the floor of the bathroom. She was found with dried blood coming from her nose.
5/3/2021	1282946	OH	60	M	4/23/2021	4/24/2021	The patient passed away.

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5/3/2021		1283068	AK	93	M	2/17/2021	2/18/2021	Hi, my name is, I'm a RN and am submitting this report about my grandpa. I took him into the VA to get his second covid vaccine on 2/17/21. At that time my grandp lived semi-independently in a house between my parents and my uncle. He didn't get out very much but with some help of grocery shopping and organizing his medication he was still able to live alone and function well independently. My mother reported to me on 2/18/21 that my grandpa was confused, weak and tired. My grandpa has never had any signs of dementia. At this time he developed a delerium that waxed and waned. He complained of headache, no appetite and extreme weakness. On 2/23/21 he fell down in his house and we decided to move him into my uncles spare bedroom to keep better eyes on him. The delerium persisted and on 3/5 he was taken to Hospital for a workup for his delerium and weakness. There he saw Dr. an internal medicine doctor at hospital. The workup showed an elevated BNP (probably baseline but I'd have to look at previous lab results) but nothing further. We opted not to do further imaging and instead take him home. It became obvious to me that this was the end of his life and so I requested a hospice referral from Dr. My grandpa died on 3/24/21.
5/3/2021		1282523	NJ	87	F	3/23/2021	4/15/2021	Pt received first COVID Pfizer vaccine on 3/2/21 and second vaccine dose of Pfizer on 3/23/21 and tested positive for COVID 3/24/21 was admitted through the ED on 3/24/21 with decreased oxygen levels (50%) and SOB. Admitted to the floor on 3/25/21, Patient was never intubated but was put on continuous BiPap. Patient treated with acetaminophine, albuterol, solumedrol, and remdesivir. Patient expired on 4/15/21. Cause of death was secondary COVID pneumonia and acute respiratory failure.
5/2/2021		1279639	VA	69	F	1/19/2021	1/31/2021	Sudden fatal heart attack. Patient went from a medically well person of 69 and died suddenly of PES within 2 weeks of dose. Patient reported arm pain, fatigue, and coldness to extremities
5/2/2021		1280657	KY	86	F	2/26/2021	4/1/2021	Patient tested positive for COVID back in December 2020. She passed away at the nursing home facility on April 1, 2021.

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5/2/2021	1279428			F		4/1/2021	fainted; rash; died 2 weeks ago after receiving the covid vaccine/ passed away;This is a spontaneous report received from a non-contactable consumer reporting on behalf of the patient via a Pfizer-sponsored program. A female patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), first and second dose, both via unspecified route of administration on unspecified dates (Batch/Lot number was not reported) as a single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The reporter mentioned that she had a friend that died 2 weeks ago after receiving the COVID vaccine. They are going to search for the cause of death (autopsy) because after the vaccine she had a rash, fainted, and went to the hospital, and she recovered (unspecified dates). But after a month or so, she passed away. The reporter mentioned that the patient was born very unhealthy person. Outcome of rash and fainted was recovered on unspecified dates. The patient died in Apr2021. It was unknown if an autopsy was performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: died 2 weeks ago after receiving the covid vaccine/ passed away

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5/2/2021	1279431	VA	60	F	1/15/2021	2/21/2021	Unspecified Cardiac Event; This is a spontaneous report from a contactable consumer (Patient's Daughter). A 60-year-old female patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Lot number: EK4176), via an unspecified route of administration on 15Jan2021 at single dose for COVID-19 immunization. The patient also received second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Solution for injection, Lot number: EK4176), via an unspecified route of administration on 05Feb2021 at single dose for COVID-19 immunization. Medical history included chronic obstructive pulmonary disease from an unknown date to 21Feb2021, brain aneurysm, smoker. Family medical history included States her Grandfather had skin cancer, but it was benign, moles and then freeze them off. No cardiac events. Grandma passed away infection from knee surgery. The patient received a Prior Vaccinations within 4 weeks has received both doses of the Pfizer Covid Vaccine. Concomitant medication was not reported. On 21Feb2021, patient experienced unspecified cardiac event. Caller stated that she was calling in regards to her mother regarding the Covid19 vaccine. States she was instructed by the pathologist to call Pfizer directly, rather than just report on VAERS. States this was not the same pathologist as the one that did the autopsy. Caller states does have a copy of the autopsy. States she called several pathologist to get the autopsy done. Dr. called her back after it had been done, and the caller discussed with him, the patient passed away after some cardiac event. States it is not clear what cardiac event. States she passed away 16 days after receiving her second dose of the vaccine. States the patient's physician would be happy to talk to Pfizer about it. Reporter states her mom was an LPN there and they all know her. States anyone there is fully aware of who she is. States some people in the office are taking it hard, and they may get sentimental. States it helps if people get things business and not talk about feelings. Reporter states it was 8:50am when the EMTs arrived and she had already passed. Caller states was who did the autopsy. She has been speaking with a lady, but she goes by (university name). States (Hospital Name) is a hospital, it used to be (University name). Hospital. Reporter states (phone number) is a direct line to (university name).

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Reporter states when the autopsy results came back she had the original and they are sending another because of the cause of death. Reporter states the autopsy showed no Pulmonary Obstruction, which made them question, well did she have COPD? States it was interesting because her mom was a smoker but her lungs were pink, and there was no fluid or obstruction in her lungs. States her mom taught her a little bit growing up. Reporter states she was going to be a nurse too but she lost her grant because she got married, now she doesn't qualify. Caller stats an autopsy was done; however they did not do a toxicology report. Caller states that patient was an organ donor. States she received a letter from them stating the patient will be helping a lot of people with skin grafts. Reporter adds, the patient was negative for Covid, she had to be tested for the autopsy. States she died from some type of cardiac event. States the patient did have COPD but on the autopsy, her lungs were clear and there were no pulmonary obstructions. States the liver showed possible hypertension, but the patient did not have hypertension. Reporter states there are some interesting things with her autopsy report and the patient's PCP could go over it medically if necessary. Reporter states this morning she saw several articles that state heart inflammation has been linked to the vaccine. Caller asks if she still needs to report it through VAERS? States she should have done it in the beginning but her mom was a big supporter of the vaccine. Reporter states her mom was on Facebook, and someone stated they weren't sure about getting the vaccine and her mom had commented, well she just got her second one, let's see what happens and then she died 16 days later. States that is why she was hesitated to report it. States the Pathologist encouraged her to call in and report it. Caller states she does not know if her mom had any other adverse events. States she will not say a word about things unless it gets really bad. Reporter states the only person that would know is Dr. meant a lot to her mom and she would be willing to tell her doctor, but not her daughter because she wouldn't want her to worry. Caller states the patient never used her inhaler, it is still full. States she took her mom's purse because her mom lived out of her purse, everything she needed was in there. Reporter states the patient had Tylenol, Sudafed, Advil, and Prednisone in her purse. Reporter states she knows

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she wasn't taking Prednisone. States the pill box is locked and it looks like it hasn't been open in a while. Reporter states she does not know if she was taking any medication, Dr. may have more information. Reporter states no, she didn't go to the doctor or the ER. States the patient's dog woke up her stepdad and she had already passed away. States they have her dog and he is going through a lot, when she first passed the dog had aggressive tendencies, and when she would lay with him, he would nudge her to get up. He doesn't like it when people go to sleep and that makes it harder. States the dog ended up getting an eye infection, because his tear ducts were clogged, states he did that a couple weeks, and now he is getting better, not as fearful or aggressive. Reporter states when her mom had the brain aneurysm, it takes a little bit longer for anesthesia to wear off. States it was an extremely strong anesthesia that she had never had before. States she wouldn't let anyone take care of her except for her. States when she was under anesthesia, she would call her mom. States they would know when she said mom, she was talking about her daughter. States her mom said she looks like her grandma when she was younger. Consumer adds the patient's husband's contact information, in case it is needed. On 21Feb2021, the patient died due to cardiac event secondary to COPD. Autopsy was performed. Autopsy details was available. The outcome of the event was fatal.; Reported Cause(s) of Death: Cardiac Event Secondary to COPD

5/2/2021	1279433	PA		F			
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racing heartbeat; This is a spontaneous report from a contactable consumer via Medical information team. A female patient of an unspecified age (reported as age: 55, unit: unknown) received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as SINGLE DOSE for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient died a few days later after getting vaccinated from a racing heartbeat. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information about batch/lot number has been requested.; Reported Cause(s) of Death: racing heartbeat

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5/2/2021	1279434	UT		F			Died after the 2nd dose; This is a spontaneous report from a contactable consumer from a Pfizer-sponsored program. A 39-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date as single dose for COVID-19 immunization. Medical history and concomitant medications were not reported. The patient previously received the first dose of BNT162B2 on an unspecified date for COVID-19 immunization. The patient died after the 2nd dose on an unspecified date. The cause of death was not reported. It was not reported if an autopsy was performed. Information on the batch/lot number has been requested.; Reported Cause(s) of Death: died after the 2nd dose

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5/2/2021	1279436	PA		F	4/22/2021		Bowel Ischemia with perforation; Bowel Ischemia with perforation; She had a severely stomach ache; its really painful; This is a spontaneous report from a contactable consumer. A female patient of an unspecified age received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), dose 1 via an unspecified route of administration, administered in Arm on 22Apr2021 (Batch/Lot number was not reported) as SINGLE DOSE for covid-19 immunisation. Medical history included kidney transplant from an unknown date and unknown if ongoing. First shot, in 22Apr morning, She is completely fine, that morning she had a severely stomach ache and its really painful then unless she said she need to go to the bathroom but couldn't go out and then after she got admitted to the hospital then kept her till morning ,she went to the hospital. It was reported that the patient passed away after COVID-19 vaccine. The reason of death was reported as Bowel Ischemia with perforation. The patient underwent lab tests and procedures which included investigation: no problem, no blood pressure, no blood sugar on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. The events were assessed as serious (hospitalization), fatal for the events Bowel Ischemia with perforation. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Bowel Ischemia with perforation; Bowel Ischemia with perforation
5/2/2021	1280064	FL	80	F	4/1/2021	4/13/2021	4/13/2021 heartburn like symptoms started. 4/20/2021 admitted to emergency room, received diagnosis of 3 blood clots in the heart, 4/27/2021 died as a result of blood clots in heart

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5/2/2021		1280622	SC	50	M	4/28/2021	5/1/2021	On 4/13 Patient underwent aortic root replacement with saphenous vein graft reconstruction of the right coronary artery. He had no prior coronary disease. This operation was done for an enlarging aortic root aneurysm in the setting of Marfan syndrome. The right coronary was anomalous and needed vein extension for reimplantation. He recovered very well and was seen in our clinic on 4/23, with no unusual findings. He had a normal echo, EKG and DVT study performed. On 4/28 he had his first Moderna COVID19 dose. on 5/1, he developed malaise, myalgias, painful lymph nodes, chills, and chest pain. He called my clinic and was instructed to go to the ER, but then felt better and didn't go. He was then found unresponsive later that afternoon and was pronounced dead on arrival of EMS.
5/2/2021		1280682	KY	94	F	2/25/2021	2/25/2021	Patient admitted on 03/25/2021 through the emergency department for complaint of shortness of breath she was a resident of a Nursing Facility. Her oxygen saturations were into 80%. Patient was poor historian her daughter at the bedside provided most history. Patient with recent admissions for coronavirus on 03/03/2021 and then again on 03/05/2021 for post coronavirus pneumonia. Throughout hospitalization patient with poor appetite, on 03/28/2021 noted to be somnolent, additional blood cultures and labs checked. Patient continue to decline, refused medications. Minimal responsiveness on 04/01/2021. Had episode of PAF on 4/1/21, renal dosed Eliquis per Cardiology. Service discussed with family multiple times about code status, he continued to be on decided home willing to change code status. Patient remained on high-flow oxygen and not eating. Patient very anxious increase work of breathing. Patient died on 04/03/2021.

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5/2/2021	1280718	NC	59	M	2/11/2021	2/11/2021	Because patient had a severe adverse reaction to the first injection, he stated to me that he would not be getting the second injection. Two workers (from the mental health day program, he went to before the covid lockdown) both advised him to get the second injection, however, and he complied. After injection he had episodes of difficulty breathing and vomiting for several nights. Soon after that, he started having to go to the emergency room for blood sugars over 500 (prior to injection his diabetes had been controllable at care home). When he went to ER (for high blood sugar) March 18th, his heart stopped and could not be re-started. He died.
5/2/2021	1279801	OH	40	F	3/22/2021	4/22/2021	Death. Autopsy was done. Awaiting results
5/2/2021	1280396	WA	85	F	2/15/2021	2/16/2021	The day after first shot , patient was more paranoid, increase hallucinations, angry and started to lose ability to stand up straight, by day 8 she had total loss of leg control and torso, could not feed herself, dress herself and she was very combative and hallucinating constantly. We had to hospitalize her and she died March 6 in the hospital.
5/1/2021	1275910	WA	64	F	3/27/2021	3/28/2021	Patient presented to ED on 3/28/21 with the following information: patient reports home daughter was diagnosed with COVID-19 infection a few days ago. For about a week now the patient herself has had severe fatigue, loss of taste, loss of appetite, nausea, vomiting and diarrhea. She denies fevers. She has however had a persistent cough and over the last few days has been short of breath. Tested positive for COVID-19 on 3/27/2021 at outside facility. Last night patient had multiple episodes of diarrhea making her fatigue significantly worse today. Has been drinking a lot of free water. Additionally noted increased cough and shortness of breath. Patient was admitted to the hospital with COVID-19 pneumonia on 3/28/21 and expired on 4/13/21.

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5/1/2021	1276508	PA		U			<p>DEATH; UNSPECIFIED COMPLICATIONS; This spontaneous report received from a consumer concerned multiple patients. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported, once total, for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. The six patients died on unspecified date due to unknown cause. It was also stated that these patients had some unspecified complications. It was unknown, whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patients died of death on an unspecified date, and the outcome of complications was not reported. This report was serious (Death).; Sender's Comments: V0: 20210452419-covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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5/1/2021	1276505		60	M			<p>HEART ATTACK; This spontaneous report (social media) received from a patient via a company representative concerned a 60 year old male. The patients weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: not reported batch number: Unknown) dose was not reported, 1 total administered, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date, the patient took vaccine and at night patient experienced heart attack and died due to heart attack. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). This case, from the same reporter is linked to; Sender's Comments: V0-Covid-19 vaccine ad26.cov2.s - Heart attack. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: HEART ATTACK</p>

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5/1/2021	1276430			F		4/1/2021	<p>RARE BLOOD CLOT; LOW PLATELETS; This spontaneous report received from a consumer concerned about 50 years old female. The reporter obtained the information from news/media. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, 1 total administered on APR-2021 for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unknown date in APR-2021 after vaccination, the patient experienced severe headache, abdominal pain, leg pain and shortness of breath. The patient developed a rare blood clot and low platelets on an unspecified date in APR-2021, within two weeks of receiving JANSSEN COVID-19 vaccine. The patient was hospitalized on an unspecified date in APR-2021. On APR-2021, the patient died from blood clot. The reporter was not sure whether the events was related to the vaccination. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of rare blood clot on APR-2021, and had not recovered from low platelets. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: V0: This female patient in her 50s was reported to have developed a rare blood clot and low platelets within two weeks of receiving JANSSEN COVID-19 vaccine. On an unspecified date, symptoms reported were severe headache, abdominal pain, leg pain and shortness of breath. The patient was hospitalized on an unspecified date and subsequently died from blood clot. It was not known if autopsy was performed. No other details reported. The information available precludes a complete and meaningful assessment. However, considering the temporal relationship and recently evolving theories in the literature about COVID infections and vaccinations, potential vaccine contribution cannot be excluded.; Reported Cause(s) of Death: BLOOD CLOT</p>

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5/1/2021	1276416			F	3/31/2021		COVID-19 PNEUMONIA; STOMACH BLEEDING; THROMBOCYTOPENIA; MASSIVE STROKE; FIBRIN D DIMER HIGH; This spontaneous report received from a consumer (daughter of patient) via a Regulatory Authority [VAERS FDA 1218360] and concerned a 79 year old female. The patient's height, and weight were not reported. The patient's concurrent conditions included bi-polar, mild asthma, hypertension, and depression. The patient had no allergies and no known drug allergies. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, intramuscular, batch number: 1805020) dose was not reported, 1 in total administered on 30-MAR-2021 to left arm for prophylactic vaccination. Concomitant medications included amlodipine, salbutamol, and venlafaxine hydrochloride. The patient felt poorly after vaccination. The patient presented to emergency room with gastrointestinal upset, diarrhea, nausea, vomiting, fever and cough on unspecified date. The patient was sent home. On 31-MAR-2021, the patient was COVID-19 positive and was admitted to the hospital with Covid-19 pneumonia. The patient was on oxygen via nasal cannula. On 31-MAR-2021, the patient had high fibrin D dimer and patient had a stomach bleeding. The patient was worsening and was admitted to intensive care unit. On unspecified date, the patient developed arm weakness which progressed over days. On unspecified date in 2021, the patient had massive stroke and passed in the morning. The stroke did not show the signs of hemorrhage. The distribution of stroke was multifocal and could suggest thrombus. The patient developed thrombocytopenia in the last 24 hours of life. The initial computerized tomogram (CT) noted one area of focal stroke. The second CT showed worsening large multi-focal left hemispheric stroke in multiple distributions. This was an acute development over the previous CT. On 26-APR-2021, physician reported the radiology report was not clear whether the Cerebroventricular accident (CVA), the patient had experienced was a thrombotic event as the patient had areas on the CT scan that could be old CVAs and in addition the patient had hypertension. The patient developed thrombocytopenia on day 12 while she was treated with heparin. D-dimer was elevated on admission and throughout the hospitalization and the anti- PF4 antibodies were not able to be performed from the

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sample available. As per the physician, the radiology report was not clear whether the CVA the subject had experienced was a thrombotic event as the subject had areas on the CT scan that could be old CVAs and in addition the subject had a hypertension. The subject develop thrombocytopenia on day 12 while she was treated with heparin. Additional laboratory test included platelet count was 157 and dropped to 86 on unspecified date. The patient was treated with heparin. Laboratory data (dates unspecified) included: Fibrin D dimer (NR: not provided) high. The patient died on unspecified date. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of covid-19 pneumonia, massive stroke and thrombocytopenia on an unspecified date, had not recovered stomach bleeding, and fibrin d dimer high. This report was serious (Death, Hospitalization Caused / Prolonged, Other Medically Important Condition, and Life Threatening). Additional information was received from physician on 26-APR-2021 via telephone log from a company employee. The following information was updated and incorporated into the case narrative: reporters added (physician and contact), due diligence updated and physicians statement.; Sender's Comments: V1: The follow up information in this version is regarding addition of reporters (physician and contact) physicians statement and due diligence. This updated information does not alter the causality of previously reported events. This 79-year-old hypertensive female died from massive stroke after being hospitalized from COVID-19 pneumonia 1 day after receiving Janssen COVID-19 vaccine for the prevention of symptomatic SARS-CoV-2 virus infection. On admission to hospital the patient had positive COVID-19 test. She also had a high fibrin D-dimer throughout the hospitalization and developed a stomach bleeding. Other symptoms included arm weakness that progressed over a couple of days. Initial CT scan noted one area of focal stroke; the second CT scan showed worsening large multi-focal left hemispheric stroke in multiple distributions. Platelet count was initially 157 and dropped to 86 on an unspecified date. The patient was treated with heparin. The event of stroke is confounded by the underlying hypertension and COVID-19 disease; and the event of thrombocytopenia is confounded in COVID-19

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5/1/2021	1276412	AL		F			
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infection. The information available precludes a complete and meaningful assessment. However, considering the temporal plausibility and recently evolving theories in the literature about COVID infections and vaccinations, potential vaccine contribution cannot be excluded. Additional information has been requested.; Reported Cause(s) of Death: MASSIVE STROKE; COVID-19 PNEUMONIA; THROMBOCYTOPENIA

HOSPITALIZATION; DEATH; This spontaneous report received from a patient via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported, 01 total, for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. After receiving the vaccine, on an unspecified date, the patient was hospitalized. The patient died after 6 days of hospitalization. The reason of death was unknown. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome was fatal. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: V0:-JANSSEN COVID-19 VACCINE Ad26.COV2.S- Death, Hospitalization. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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5/1/2021	1276385			F		4/1/2021	MASSIVE STROKE; This spontaneous report received from a consumer concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose was not reported, 1 total, administered in APR-2021 (about eight days prior to this report) for prophylactic vaccination. The batch number was not reported. Per procedure, no follow up will be requested for this case. No concomitant medications were reported. It was reported that, in APR-2021, the patient had a massive stroke and died. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: - Covid-19 Vaccine Ad26.Cov2.S - Massive Stroke. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: MASSIVE STROKE
5/1/2021	1275915	WA	82	F	3/10/2021	3/22/2021	On 3/25/21, patient presented to the ED with several days history of nausea, vomiting, and upper abdominal pain, and 1 day history of shortness of breath and wheeze. Patient recently received her first dose of Moderna COVID vaccination on March 10. Patient's daughter first developed COVID symptoms approximately 1-2 weeks prior, and was tested positive. Patient developed nausea, vomiting, and upper abdominal pain 6 days prior on March 19. She was tested positive for COVID several days prior to admission (either the 22 or 23rd, patient not sure). On the morning admission, patient had significant worsening of shortness of breath and wheeze. Patient also became significantly more weak and fatigued, and was eventually brought to ED. Patient reported chills, but denied headaches, chest pain, or diarrhea. Patient admitted to the hospital on 3/25/21 with main diagnosis COVID-19 pneumonia and patient expired on 4/13/21.
5/1/2021	1277990	PA	68	F	4/29/2021	5/1/2021	Patient passed away, was notified by Coroner

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5/1/2021	1276513	NY		M			DEATH; FELT SICK; This spontaneous report received from a consumer (social media) via a company representative concerned a male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, Expiry date: Unknown) frequency 1 total, dose and start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, after getting the vaccine, the patient felt sick. On the next dat, the patient was deceased. The cause of death was not reported. It was unknown whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: - covid-19 vaccine ad26.cov2.s -Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/1/2021	1275922	WA	73	M	2/24/2021	2/27/2021	On 3/8/21, patient presented to the ED with cough, fever > 103, chills, SOB, all starting 9 days ago (2/27/21) about 3 days after 2nd dose of Pfizer vaccine. Patient was admitted to the hospital with main diagnosis COVID-19 pneumonia and patient expired on 4/8/21.
5/1/2021	1277679	MI	42	M	4/9/2021	4/30/2021	Death on 04/30/2021

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5/1/2021	1276796			F			<p>blood clot; This spontaneous case was reported by a consumer and describes the occurrence of THROMBOSIS (blood clot) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On an unknown date, the patient experienced THROMBOSIS (blood clot) (seriousness criterion death). The reported cause of death was Clot blood. It is unknown if an autopsy was performed. The reporter stated that his wife had recently passed away from a blood clot after receiving a second dose of the Moderna COVID-19 vaccine. Treatment information was not provided. Very limited information regarding this event has been provided at this time. Further information has been requested.; Sender's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Clot blood</p>

<i>RECVD</i> DATE	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
5/1/2021	1276522	TX		M			DEATH; COMPLICATIONS FROM THE VACCINE; This spontaneous report received from a consumer concerned an adult male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported, once total for prophylactic vaccination. The batch number was not reported. In this scenario follow-up is not required to obtain batch/lot numbers. No concomitant medications were reported. On an unspecified date, two months after vaccination, the patient died of unknown cause. The patient death occurred in hospital. It was also stated that patient had some unspecified complications. iT was also reported that, patient was healthy man in his early sixties. It was unknown, whether autopsy was performed or not. On an unspecified date, the subject experienced death, and complications from the vaccine. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of death on an unspecified date, and the outcome of complications from the vaccine was not reported. This report was serious (Death).; Sender's Comments: V0:-covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s); Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
5/1/2021	1278349	NY	45	M	4/24/2021	4/29/2021	Patient suffered a seizure and pulmonary edema four days after receiving second Pfizer shot. He was pronounced dead several hours later. Patient had no health issues and was 45 years old.

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5/1/2021	1278030	VA	27	M	4/27/2021	4/30/2021	27 year old male with Down's Syndrome and no other past medical history received second COVID-19 vaccine on 4/27/2021. On 4/30/2021 began "feeling poorly" with nausea/vomiting and possible chest discomfort. Originally presented to ED on morning of 4/30 - EKG completed demonstrated diffused ST elevation. Patient was transferred to Medical Center for heart catheterization. Left heart catheterization demonstrated normal coronary arteries and LVEDP of 25. Stat ECHO demonstrated pericardial effusion and concern raised for myopericarditis. Patient subsequently transferred to a different Medical Center for higher level of care. Upon arrival to Medical Center plan was to intubate and take to cath lab for heart biopsy and PA catheter placement. However, upon intubation patient began to decompensate and subsequently developed cardiac arrest. During ACLS, VA ECMO was placed and therapeutic hypothermia was initiated. Following VA ECMO placement patient received IVIG, high dose methylprednisolone (1000 mg), anakinra 100 mg, and broad spectrum antibiotics (vancomycin and Zosyn). Despite these efforts the patient continued to have hemodynamic instability and was on high dose vasopressors (epinephrine, norepinephrine, dopamine, angiotensin II, vasopressin). Patient subsequently suffered another cardiac arrest, briefly regained pulse with high dose vasopressors, but subsequently lost pulse despite best efforts and died on 5/1/2021 at approximately 13:00.

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5/1/2021	1276773	MN	45	F	4/5/2021		Stroke; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of CEREBROVASCULAR ACCIDENT (Stroke) in a 45-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. No Medical History information was reported. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 05-Apr-2021, the patient experienced CEREBROVASCULAR ACCIDENT (Stroke) (seriousness criterion death). The patient died on 05-Apr-2021. The reported cause of death was Stroke. It is unknown if an autopsy was performed. Concomitant medications were not reported. The patient was not hospitalized prior to or during the stroke. The reporter mentioned that the organs were donated as the patient was on a ventilator.; Reported Cause(s) of Death: Stroke
5/1/2021	1276582	NJ		U			DEATH; This spontaneous report received from a consumer concerned a patient of unspecified age and sex. The patient's height, and weight were not reported. The patient's pre-existing medical conditions included unknown cause of death. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for 1 total administered for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient received the Janssen COVID-19 vaccine and then died 15 days later. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). .; Sender's Comments: V0-20210456256- COVID-19 VACCINE AD26.CO2.s.adverse effect . This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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5/1/2021	1276579	FL		M	4/26/2021		DEATH; NON-RESPONSIVE; NOT FEELING WELL; This spontaneous report received from a consumer concerned a male of unspecified age. The patient's height, and weight were not reported. The patient's past medical history included on blood thinners. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, 1 total, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. The consumer had called and stated that their father had passed away and had received JANSSEN covid 19 vaccine 10 to 12 days before. On 26-Apr-2021 the patient was non responsive, lethargic, seemed out of it and was not feeling well. The patient was on blood thinners. On 27-Apr-2021 the consumer's father had passed away, the consumer was still waiting for the cause of death. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on 27-APR-2021, and the outcome of non-responsive, not feeling well was not reported. This report was serious (Death, Medically significant).; Sender's Comments: 20210456243-covid-19 vaccine ad26.cov2.s -Death, Non responsive. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: CAUSE OF DEATH UNKNOWN

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5/1/2021	1276535			F			DEATH; This spontaneous report received from a consumer via social media concerned a female of unspecified age. The patient's height, and weight were not reported. The patient's past medical history included unknown cause of death. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN) 1 total dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. Consumer posted on social media that the J and J vaccine killed her mother and they are waiting on her autopsy . The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0- 20210453979 - Covid-19 vaccine ad26.cov2.s-death.This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.

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5/1/2021		1276530	OR	40	F			DEATH; BLOOD CLOT; This spontaneous report received from a consumer news/social media platform concerned a 5 decade old female. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient developed a rare blood clot and died within two weeks of getting the Janssen covid vaccine. On an unspecified date, the patient died from unknown cause of death. It was unknown whether autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of blood clot was not reported. This report was serious (Death, and Other Medically Important Condition). This case, from the same reporter is linked to.; Sender's Comments: V0-covid-19 vaccine ad26.cov2.s-This case concerns with 5 decade old female. Death, Blood clot. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/30/2021		1273804	MI	68	U	3/31/2021	4/10/2021	GI Hemorrhage Covid + Respiratory Failure
4/30/2021		1273174	NY	79	M	3/16/2021	4/5/2021	From one of the nurse vaccinators: the man who had a laryngectomy who gave me a hard time about an id when we first started..I was so happy to see his name on my list this morning. I saw that no one could contact him..I got into the building ..no answer at the door ..phone disconnected ..found the super..he died 3 weeks ago..he didn't know cause..just emergent situation to hospital and passed.

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4/30/2021	1273511	TN	84	F	3/25/2021	4/17/2021	Patient recieved Moderna dose 1 02/23/2021, dose 2 03/25/2021. Nausea and vomitting after 2nd dose, found unresponsive by son on 04/17/2021, taken to ER and diagnosed with new onset Afib with RVR, sepsis with shock. Deceased 04/18/2021
4/30/2021	1273671	MS	63	F	3/21/2021	3/27/2021	Husband stated that she died of an aneurysm on March 28, 2021. He will provide details later.
4/30/2021	1273626	FL	60	M	3/22/2021	3/28/2021	Pt developed symptoms of COVID-19 and was placed on bedrest on 03/28/2021. The patient was sent to local ED on 04/01/2021 and then tested for COVID-19 with a positive result. Patient was intubated and placed on ventilator. Pt. spent 22 days in ICU. Pt expired on 04/22/2021 with cause of death listed as MODS and COVID-19 related PNA. Related causes of death were listed as HTN, DMII, and ARDS.
4/30/2021	1273570		58	F	1/21/2021	1/28/2021	Patient reported dyspnea that began about 1 week post 2nd shot in Covid vaccination series. Patient deceased on 3/18/2021
4/30/2021	1273691	KS	71	F	3/11/2021	3/24/2021	Patient tested positive for COVID 19 on 03/21 after a symptom onset of 03/19/21. She was admitted to the hospital on 03/24 and passed away 04/19. Cause of death is listed as multi-organ dysfunction secondary to hemorrhagic shock, other contributing factors: COVID-19 pneumonia.
4/30/2021	1273487	NC	78	M	1/28/2021	1/28/2021	Fever greater than 103; body aches; chills; extreme fatigue; severe headache; gradually increasing back pain Back pain increased every day. About 3 weeks after vaccine shot, he went to doctor. Back pain continued til he was bedridden bc of severe pain. Went to ER March 22. Tests showed cancer in lungs and hip. Died April 10

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4/30/2021		1273483	CA	60	M	4/7/2021	4/10/2021	Medical team dispatched to the residence of the the name person on April 10, 2021 at 2327. Pt assessed by medic on scene and determine patient with obvious death. Pt found halfway on the couch and to be pulseless, apneic, and with rigor mortis. Unknown down time and when further assessed, patient death determine by EMS. pt had fixed and dilated pupils, non-responsive to painful stimuli, absent breath sounds, no heart sounds auscultated. Pt was also placed on the monitor and found to be in asystole in 2 contiguous leads. CPR with held and no resuscitative measures performed.
4/30/2021		1273475	MS	24	F	4/28/2021	4/29/2021	on 04/29/2021 Resident was checked at 1830 and found to be at baseline status. At approximately 1855, resident was found pulses and apneic. CPR initiated and resident transferred to medical center. Resident expired 1939.
4/30/2021		1273409	WV	75	M	3/30/2021	4/29/2021	Resident CTB
4/30/2021		1272739	FL	77	F	4/28/2021		Expired within 72 hours of receiving vaccine.
4/30/2021		1275726	PA	69	F	4/9/2021	4/25/2021	massive Pulmonary embolism causing cardiac arrest
4/30/2021		1273868	MI	84	M	3/26/2021	4/28/2021	Sudden death (Patient's son should have access to COVID-19 vaccination card with lot numbers and location where vaccine was administered.)

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4/30/2021	1273324	FL	73	F	2/18/2021	2/22/2021	The day before the first vaccine she was up and acting normal, laundry, housework and knew what to do. She has severe dementia but was doing OK and knew where she was. She got the first vaccine on 1/29/21, and the 3rd and 4th day they noticed she was having hallucinations and saying things that weren't there. She could hear baby's crying but there were no baby's present. Within 7 days she had what the son described as a stroke. He said that she was watching television and he was on a conference call and he noticed she walked into a wall and he asked if she was okay and starting stumbling across the room and when he touched her she felt very heavy and said that one side of her face was drooping. He got her back into the chair and called 9-1-1. She was so agitated at the hospital that the husband does not know what they gave her and they kept her for a week. They finally got her under control. They discharged her from there and she that was all that they could do with her. They brought her home with nurses assistance and her paranoia was evident, hallucinations were very evident. They said that they tried to do a CAT Scan and an MRI and they said that she did not have a stroke. Restless was very adamant, talking strange things and wanting to go to her son's house when she was there. Before that vaccination she knew where she was and after that she did not know where she was thinking she was at one location and just confusion. She then got her 2nd vaccine and then her husband went out of town and took her back home on 2/24/21 as he was able to get her in a car and travel and able to eat and knew somewhat what was going on. On 2/25/21 when he brought her home to a long term care facility. She was chanting constantly, had irritability, anger, cognition completely eroded. She was very agitated, very combative. Drugs would not calm her down, and tried to get CAT scans or MRI's but were unsuccessful due to her combativeness. She was screaming and yelling 24 hours a day to the top of her lungs and gave her Ativan which had the adverse effects of what they were supposed to do. Had biting, hallucinations, paranoia. She had a couple of falls, they had her in a wheelchair and tried to feed her and she would fall down. They took her to the hospital a few times and she progressively got worse. On 4/19/21 she shut down and quit eating, quit drinking, closed her eyes, and lasted a

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						week like that and then she died on 4/24/21 @ 2:30 AM. None of her doctors could figure out what had happened. They were finally able to get a CAT scan and felt that she may have a stroke. Finally they memory care facility told them to come a take her to the hospital and they had moved their hospice patient's as she was screaming and disruptive and they could not handle her anymore. They thought she was suffering from Lewy body dementia at one point. They were going to have her tested for that and they could not do it on Saturday when she passed for genetics and missed those timelines and could not do it.
4/30/2021	1274396		74 M	3/5/2021	3/12/2021	Patient was not vaccinated at our site however was admitted approximately 7-10 days post vaccination and expired.
4/30/2021	1274722		45 M	4/20/2021	4/28/2021	Pt presented to the hospital after a cardiac arrest. Work up showed renal artery thrombosis b/l causing renal failure and hyperkalemia. ROSC was achieved and pt coded multiple times after. We were unable to obtain CT A 2/2 to pt being unstable so only U/S imaging with doppler was used for diagnosis. Pt was treated with heparin gtt., hematology work up was sent but cause not identified. ECHO did not show thrombosis in the heart. CCRT was attempted but pt expired.
4/30/2021	1274675 TX		67 F	4/23/2021	4/23/2021	Vaccine was administered at 1215, patient was monitored for 15minutes per CDC guidelines with not adverse reactions noted. Approximately one hour after administration of vaccine patient noted to be moaning, fingerstick BS at 59mg/dL, Dextrose administered, pt proceeded in to cardiac arrest, CPR was initiated and EMS activated. Pt expired approximately 4 hours after incident at ER.
4/30/2021	1273940 FL		47 F	4/9/2021	4/11/2021	Heart Attack at 7:10 am(4/9/21), CPR, CCU, CPR, Death(4/11/21) 9:15pm
4/30/2021	1274456		67 M	3/24/2021	3/31/2021	received vaccine on 3/24/21 at another site. Was admitted to the hospital thru the ED with worsening shortness of breath.

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4/30/2021	1275048	TX	75	M	3/8/2021	3/17/2021	<p>Patient was a healthy 75 year old male when he got the shot. Within 5 hours, he began to feel TIRED, which was an expected side effect. He felt tired for several days. Nine days later he went to Memorial Hermann ER in Kingwood, and they said he had pneumonia. They also said he had a "small mass" at the bottom of his lung and might want to get it checked out. On March 20, he developed a cough. On March 21 we went to a different ER and a CT scan showed he had plureal effusion. On the next day he was short winded. He went back to the ER and they admitted him and transferred him to hospital by ambulance. On March 23, 1.7 liters of fluid was drained from his lung and sent to be tested. On March 26 he was diagnosed with malignant plureal effusion. He passed out at the doctor office and tranferred to to another facility by ambulance. He remained there for 4 days for tests, and a port was put in to drain the fluid. On March 29 he was transferred . They repeated many tests and did a bronchoscopy. On April 1 they told him he had squamous cell carcinoma. He came home on April 2. The doctor called and said they made a mistake he had small cell carcinoma. He remained home until April 11, when he was taken back to by ambulance. He had gone from a healthy appearing individual on March 17 to a critically ill individual and he died on April 15. Doctors had never seen cancer overtake a man in 28 days. On March 22, he had a small mass at the bottom of his lung, and one week later, it was a mass so large, his lung could not be seen and his lung had collapsed. Doctors assumed that the cancer was dormant and that the vaccine did something to wake it. It attacked my husband with a vengeance. He never smoked.</p>
4/30/2021	1274367	CT	100	F	4/6/2021	4/27/2021	<p>Approximately 1 week after vaccine, patient began shaking /trembling per caregiver and son. Less shaking 2 days before she died. Following vaccination, appetite decreased and then appetite disappeared 2 days before she passed. History of infection in her foot per caregiver. noted to have a blister on her right toe that became purple/ dark color. MD was notified and was started on an antibiotic. Patient was on palliative care due to advanced age and bedridden status. MD - No autopsy was done.</p>

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4/30/2021	1274296		68	F	3/3/2021	3/22/2021	This 68 year old white female received the Covid shot on 3/3/21 and went to the ED on 3/22/21 and was admitted on 3/22/21 with shortness of breath, pneumonia and died on 4/10/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/30/2021	1274273		86	M	3/6/2021	4/26/2021	This 86 year old white male received the Covid shot on 03/06/21 and died on 04/26/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/30/2021	1274263		86	F	2/7/2021	3/22/2021	This 86 year old female received the Covid shot on 2/07/21 and went to the ED on 2/12/21 and was admitted on 2/13/21 with a cerebrovascular accident, weakness, encephalopathy and UTI and went to the ED a 2nd time on 2/24/21 and admitted on 2/26/21 with and went to the ED again on 3/22/21 with altered mental status and died in 4/2021. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/30/2021	1274247		86	M	4/10/2021	4/22/2021	This 86 year old white male received the Covid shot on 4/10/21 and died on 4/22/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.

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4/30/2021	1274185	OR	58	F	4/27/2021	4/29/2021	<p>This was a 58 year old female who received her 1st dose Pfizer on 4/6/21 (Lot# EW0175) and 2nd dose Pfizer on 4/27/21 (Lot# EW0151). Of note, the patient was in a motor vehicle accident on 4/12/21 with a diagnosis of concussion and cervical/thoracic strain/sprain (see history under patient information). On 4/29/21, the patient's sister contacted the patient's primary care clinic with the following documented concern: "Pt's sister calling to report that two days ago pt got 2nd dose Pfizer vaccine and has been sick. This morning they found her passed out against the her bedroom door. Pt reports that she can't remember much other than going to the bathroom. Pt's sister states that patient totaled her car a week ago, and that it was determined she had a concussion. "She hasn't been herself since the wreck and I am very concerned." This caller recommended the Ed or UC but caller denied stating that either needs to see her today. This writer is reaching out to nurse to see if they can advise from here." A RN assessed the patient virtually with the following documentation: "RN note: Call transferred from patient's sister. Pt noted to be found on her floor this morning. Pt unsure if she hit her head. Spoke to patient. She reports body aches, and feeling weak. Pt is slow to answer questions, and had a lot of difficulty hearing me (sister did not have any difficulty hearing me). Pt is noted to have more rapid breathing, and some slight wheezing. Speech is clear when she is speaking. Sister gave patient water to drink. She drank out of bottle and was able to hold on her own (though had difficulty with this at first). Sister noted some water dripping down face, but was able to swallow okay. Sister also noted that patient's lips seem to be pursed. Plan: Given recent concussion, and patients change in behavior per sister (pt more irritable, speaking more slowly, moving slowly, breathing faster, and wheezing), recommended patient be taken to the ED today--recommended ambulance since it took 2 men to help patient back to bed this morning. Sister states patient is not agreeable to going to ED at this time. Advised to try to encourage her to drink more fluids, and continue to monitor her sxs, and if any worsening, to call for ambulance transport. Sister agreeable to plan, and will discuss with sister, and recommend ED visit today." On 4/30/21, the patient's sister contacted the clinic to inform them that the patient was found dead that</p>

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4/30/2021	1274103	77 F	3/13/2021	4/10/2021	<p>morning. The medical examiner is completing the further investigation. If additional information is needed from the primary care physician for this patient.</p> <p>This 77 year old white female received the Covid shot on 03/13/21 and went to the ED on 4/10/21 and was admitted on 4/10/21 with hyponatremia with excess fluid volume, acute respiratory failure with hypercapnia, transient confusion, acute heart failure, shortness of breath and went to the ED again on 4/18/21 with cerebral infarction and died on 4/29/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.</p>
4/30/2021	1274462 KY	74 M	1/25/2021	2/11/2021	<p>Resident developed and was being treated for pneumonia on or about February 14, 2021. He was admitted to hospital on March 6, 2021 for low potassium and returned to the facility about March 11, 2021. He returned with a diagnosis of pneumonia. He was admitted hospital on 4-1-2021 and returned to the facility on 4-7-2021 with a diagnosis of CVA. He was admitted to hospital again on 4-12-2021 with a diagnosis of aspiration pneumonia. He returned to the facility on 4-21-2021 and expired at the facility on 4-26-2021</p>
4/29/2021	1270116	79 M	2/16/2021	2/21/2021	<p>This 79 year old white male received the Covid shot on 2/16/21 and went to the ED on 2/21/21 and was admitted on 2/21/21 after a fall with rib fractures and traumatic hematoma. He went to the ED again on 4/27/21 and was admitted with Abdonminal aortic aneurysm and died on 4/28/21 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.</p>
4/29/2021	1270247	89 F	1/28/2021	3/1/2021	<p>Patient presented to the ED on 3/1/2021 and was subsequently hospitalized. She died on 3/25/2021.</p>
4/29/2021	1270366 WV	37 M	4/19/2021	4/24/2021	<p>cardiac arrest 5 days post vaccination.</p>

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4/29/2021		1270605	NJ	62	M	4/9/2021	4/10/2021	His brother reporting that he got the vaccine, the following day he was coughing. The coughing caused him not to be able to sleep and was weak due to that. He could feel his throat closing and he was having a hard time breathing and he called his brother who told him to call 9-1-1. He was taken to Medical Center 4/17/2021, diagnosed with possibly COVID. He was admitted to the COVID ward and he died on 4/26/2021. The doctor that pronounced him was . Cause of death diagnosis. Hypoxic respiratory arrest, COVID 19
4/29/2021		1270690	TN	82	F	4/8/2021	4/15/2021	Patient developed shortness of breath 3 days post injection. Death due to COVID-19 pneumonia 4/27/21
4/29/2021		1270749	FL	50	M	4/23/2021	4/23/2021	HYPOTENSION (SARASOTA EMS RESPONDED TO PHARMACY); CLAMMY/SOB, EXTREMITY TINGLES; DEATH WITHIN 6-7 HRS
4/29/2021		1270832	CA	72	M	3/22/2021	3/23/2021	Beginning the day after the inoculation, my husband began feeling worse in terms of his difficulty in breathing. He used the Albuterol inhaler more than usual. It progressively got worse over the next 2 weeks, ending with my husband?s sudden collapse and death exactly 2 weeks later on April 5, 2021. The inoculation may or may not have been directly linked to his unexpected death, but I feel it may have exasperated his condition, which led to his death. And I feel it is important to report this to you. I later heard that he should not have been using his Albuterol inhaler one week prior to receiving the Pfizer vaccine. I don?t know if that is true, but that information was never told to my husband, if it is.
4/29/2021		1270844	CA	73	M	3/25/2021	4/17/2021	Per pt's daughter, pt suddenly died at home with no known cause 23 days post second dose of the COVID vaccine. He had no terminal, chronic, or acute health conditions.
4/29/2021		1270105		86	M	2/17/2021	4/20/2021	This 86 year old male received the Covid shot on 2/17/21 and went to the ED on 4/20 with abnormal lab of hypercalcemia and again on 4/25 with altered mental status and was admitted on 4/25 and died on 4/25/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.

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4/29/2021		1270988	MA	81	F	3/6/2021	3/8/2021	After 2nd Vaccine on 3/6/21, she became ill on 3/8/21, fever and chills was in bed all day on 3/9/21 with the same symptoms. Woke up on 3/9/21 with shingles, Her PCP was treating her with Famciclovir and Gabapentin for pain. She no longer had the fever or chills but still didn't feel well. On 3/17/21 she was admitted at Medical Center which she was treated for a blood clot in her lung and for pericardial effusion. She was put on blood thinners which then caused a bleed in her hip bone. She had a surgery to put a filter in to stop more blood clots and to drain the fluid from her heart. She died on 3/27/21 around 3:30pm.
4/29/2021		1269775			U			dies hours after getting Covid-19 vaccine; This is a spontaneous report from a non-contactable consumer (Pfizer-sponsored program). A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE; Solution for injection; Lot Number: Unknown), via an unspecified route of administration on an unspecified date as SINGLE DOSE for covid-19 immunization. The patient medical history and concomitant medications were not reported. The patient experienced dies hours after getting covid-19 vaccine on an unspecified date. It was not reported if an autopsy was performed. The outcome of the event was fatal. No follow-up attempts are Possible; information about batch/lot number cannot be obtained.; Reported Cause(s) of Death: dies hours after getting Covid-19 vaccine
4/29/2021		1270973		95	F	4/8/2021	4/8/2021	vaccine administered 4/8 at 1429 patient had a cardiac arrest on 4/8 at 2209 patient expired 4/10/21

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4/29/2021	1269944	AZ		F			PASSED AWAY/ DEATH; This spontaneous report received from a consumer via company representative concerned a 70 year old female. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown and expiry date: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot number. No concomitant medications were reported. On an unspecified date, the patient passed away after receiving the vaccine. The patient died from an unknown cause of death. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0:-covid-19 vaccine ad26.cov2.s-death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/29/2021	1269853		76	M	2/5/2021	4/16/2021	death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. PMH significant for amyotrophic lateral sclerosis, AF, HTN. No notation regarding death, or cause of death. Patient deceased 4.16.21

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4/29/2021	1269852		94	M	3/18/2021	4/16/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 93 and receiving home based palliative care. On 3/30/21 his home nurse reported he was having bilateral lung wheezing. On 4/16/21 patient's wife stated he passed away at home after suffering an "asthma attack." PMH significant for dementia, malnutrition, reduced mobility, bedbound, Alzheimer's, DM, afib, CAD, NSTEMI
4/29/2021	1269851		90	M	2/16/2021	4/16/2021	Death Narrative: Patient was previously tested COVID-19 positive on 3/2/2021, but did not have any other predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was admitted with afib with RVR on 2/17/21 and was having a HFrEF exacerbation. HR was controlled during admission and he was discharged on 2/19/21. Patient was hospitalized 4 more times over the next two months for cardiac symptoms with last hospitalization occurring 4/12/21 for hypotension/tachycardia and decompensated heart failure. Patient never recovered and transitioned to hospice before passing on 4/16/21. Patient had a PMH significant for afib s/p DCCV on eliquis, CKD, HFpEF on home O2 2L, PMR on prednisone, known R pleural effusion, Covid PNA in 11/2020 and chronic foley
4/29/2021	1269850		72	M	2/16/2021	4/2/2021	death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there and ADR that occurred between the observation period and the date of death. Patient has PMH significant for neoplasm of liver, stage 4 esophageal adenocarcinoma congestive cardiomyopathy, AF, htn. Seen 3/22, per not "states that for the past three days he has had constant chest heaviness and shortness of breath along with productive cough with dark sputum." Discharged 3/24. Deceased 4/2/2021 however no notation or death certificate noted.

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4/29/2021	1269849		82	M	1/16/2021	4/12/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there and ADR that occurred between the observation period and the date of death. Patient was transferred to behavioral health unit at an outside nursing home on 2/15/21 after hospitalization for psychiatric evaluation on 1/29/21 w/subsequent Law for erratic behavior w/ delusions/hallucinations. Patient passed away on 4/12/21 at an outside facility with details surrounding death unknown. PMH significant for CKD, AAA, PVD, anemia, CAD, Dm, HTN, COPD, advanced age.
4/29/2021	1269804	NJ	81	M	1/29/2021	2/8/2021	nose bleeds, black and blue marks weeks later,

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4/29/2021	1269770			M	3/1/2021	4/13/2021	seizures; dizziness; fatigue; passed away; This is a spontaneous report from a contactable Consumer. This Consumer reported for a 33-year-old male patient (friend) who deceased who received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot number unknown), via an unspecified route of administration on an unknown date in Mar2021 at a single dose for COVID-19 immunization. The reporter wanted to know if there were any reports or information on patients having severe seizures or blood clotting, he was trying to find out for some information on similar adverse events that occurred with the Johnson & Johnson COVID vaccine, but from receiving the Pfizer-BioNTech COVID-19 vaccine the person that had the severe reaction went to the doctor and the doctor said it was highly unlikely from the vaccine. The reporter tried to look online for potential side effects, to help the family provide some type of (information about this). The reported stated the patient was very healthy, young 33 years old, never had a history of seizures, he had no past medical issues. He received second dose middle of march, he passed on 13Apr2021. On the third week after receiving second dose, he started experiencing dizziness and fatigue that later progress into seizures, he was admitted into the hospital, and was no longer under control. Doctors said was highly unlikely it was from the vaccine however every test came back negative; X-Rays, biopsies, everything negative. The patient deceased and outcome of the events was unknown. Information on the Lot/Batch number has been requested. ; Reported Cause(s) of Death: passed away

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4/29/2021	1269763	NC	47	F	4/2/2021	4/2/2021	died on 14Apr2021 01:30 pm of a sudden death; first dose of BNT16B2 on 15Mar2021 09:00 am/ second dose via an unspecified route of administration on 02Apr2021; first dose of BNT16B2 on 15Mar2021 09:00 am/ second dose via an unspecified route of administration on 02Apr2021; This is a spontaneous report from a contactable healthcare professional (patient's spouse, nurse practitioner). A 47-year-old non-pregnant female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), second dose via an unspecified route of administration on 02Apr2021 (lot number: EW0150) as single dose (at the age of 47-years-old) for COVID-19 immunisation, vaccinated at a hospital. Medical history included hypothyroidism, anxiety, and chronic migraine (ongoing). The patient had no known food and drug allergies. Concomitant medications included levothyroxine sodium (SYNTHROID); sumatriptan for migraines; and clonazepam for anxiety. The patient received the first dose of BNT16B2 on 15Mar2021 09:00 am (lot number: EN6708) (at the age of 47-years-old) for COVID-19 immunization. The patient had no other vaccine in four weeks. The patient had no COVID prior to vaccination. The patient died on 14Apr2021 01:30 pm of a sudden death. She was found at home unresponsive and pulseless. Efforts at resuscitation were unsuccessful. Her medical history of hypothyroidism, anxiety and chronic migraines do not appear to be contributory. The patient did not receive treatment (as reported). The reporter considered the event to be a serious adverse effect (SAE). A full autopsy has been performed; the results were pending.; Reported Cause(s) of Death: died on 14Apr2021 01:30 pm of a sudden death

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4/29/2021	1269491	MD	63	M		4/3/2021	UNKNOWN CAUSE OF DEATH; ELEVATED HEART RATE; HYPER RESPIRATIONS; FLU LIKE SYMPTOMS; MENTAL CONFUSION; WEAKNESS WORSENER; This spontaneous report received from a consumer concerned a 63 year old male. The patient's height and weight were not reported. The patient's pre-existing medical conditions included the patient did not had medical and underlying condition and was healthy. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration not reported, batch number: 041A21A, expiry: Unknown) frequency one total, dose was not reported, administered on 02-APR-2021 for prophylactic vaccination. The patient was not taking any concomitant medications. On 03-APR-2021, the patient experienced elevated heart rate, hyper respiration, flu like symptoms including chills, weakness, fatigue, cough; the patient also had mental confusion and nausea. He was called in urgent care centre and they treated him with over the counter medications, Tylenol (paracetamol). On 16-APR-2021, the patient died due unknown cause. The daughter stated that she was taking him to emergency room the day he passed away. It was unknown if the autopsy was performed. The cause of death was not reported. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of unknown cause on 16-APR-2021, had not recovered from mental confusion, and the outcome of weakness worsened, elevated heart rate, hyper respirations and flu like symptoms was not reported. This report was serious (Death).; Sender's Comments: 20210439259-COVID-19 VACCINE AD26.COV2.S -Unknown Cause Of Death. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/29/2021	1270114	MS	83	F	4/7/2021	4/28/2021	Presented to Emergency Dept in full arrest. Patient was working outside when she began having a severe headache and lost responsiveness. CT head in ED revealed large subarachnoid hemorrhage.
4/29/2021	1271190	TN	77	F	3/7/2021	4/4/2021	Contracted COVID-19 on 4/4/2021, Pt. demise 4/15/2021

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4/29/2021	1269848		77	M	4/22/2021	4/27/2021	Death Narrative: Patient was admitted to facility from 1/11/2021 to 1/13/2021 for treatment of Covid 19 with symptoms of fatigue and poor oral intake. Admission was uneventful and follow-up notes post discharge from both Cardiology APRN and Primary Care Physician that the Patient was recovering well post admission. Patient received first of Covid Pfizer Vaccine on 4/2/2021 and second dose of Covid Pfizer Vaccine on 4/22/2021. Patient had been observed for 15 minutes after administration of each dose. No reaction was noted during the post vaccination observation period of either dose. Notice of death was received 5 days after second dose of Covid Vaccine from funeral home. There were no reports of an ADR occurring between observation period and death. There were no progress notes in patients chart between second Covid 19 Vaccine note 4/22/2021 and death notice 4/27/2021. Cause of death is unknown at this time.
4/29/2021	1272138	AL	90	M	2/8/2021	2/13/2021	PFIZER-BIONTECH COVID-19 VACCINE EUA. PATIENT RECEIVED FIRST DOSE OF VACCINE ON 2/8/21. PATIENT REPORTEDLY PASSED AWAY ON 2/13/21 AT 7AM IN NURSING FACILITY. Record of death states CHF as principle cause of death and Stage IV CKD as contributory cause of death.

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4/29/2021	1271213	PA	80	M	4/27/2021	4/28/2021	Patient is a 80 y.o. male with significant PMHx of CAD, HTN, HLD, CKD who is admitted to ICU as a transfer from hospital for acute liver failure and cardiac arrest. Pt presented to hospital on 04/28 w/ complaints of nausea and vomiting. He stated that he had recently gotten his COVID vaccine. Pt was found to be in acute liver failure in the ED w/ AST and ALT > 1000. Lactate > 15.0. BMP showed AKI on CKD and BG >500. Pt did have cardiac arrest while undergoing CT Scan and ROSC was achieved after CPR x 20 mins. Pt was hence transferred to the ICU for higher level management and admitted for cardiac arrest and acute liver failure. Upon arrival, Pt was intubated and sedated. He was non-responsive to verbal and physical stimuli. Pt was acidotic. ABG: 6.99 / 28 / 165 / 7. 1 amp of HCO3 was given upon arrival. Pt was started on insulin gtt for DKA and was started on Levophed for low BP. Pt underwent cardiac arrest shortly after arrival to the ICU. CPR was performed for > 20 mins without ROSC. Family arrived at bedside and decision was made to stop CPR at 0205 on 04/29/2021.
4/29/2021	1272476	OR	75	F	4/23/2021	4/24/2021	She was quite sick, dizzy, went to ER three times between Saturday and Sunday, they sent her home each time, she died Monday morning.
4/29/2021	1272393	NJ	83	F	1/30/2021	1/30/2021	Her conditions (leg swelling, coughing) get deteriorated after the vaccination. She was found pericardial effusions and plural effusions 2 weeks after the second dose. She stayed in ICU for 6 weeks and passed away.
4/29/2021	1272342	WA	88	F	4/2/2021	4/2/2021	Developed shortness of breath within 12hrs of 2nd Moderna dose along with heart palpitations and nausea. Admitted to hospital 3 days after shot and quickly developed pneumonia and died 4 days later after blood O2 fell below 80%. Had periods of mild improvements followed by more severe declines each time.
4/29/2021	1272225	CA	74	F	2/28/2021	3/6/2021	Confusion 6 days after shot. Within a week lost ability to walk, became urinary incontinent. Major chest congestion, slept all the time. Rushed by ambulance at day 12.. Diagnosed with pneumonia amd uti. Cardiac arrest at day 14, never woke up. Taken off life support 3/20/21.

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4/29/2021	1272140	AL	88	F	2/8/2021	2/15/2021	PFIZER-BIONTECH COVID-19 VACCINE EUA. PATIENT VACCINATED WITH SECOND DOSE ON 2/8/21. PATIENT REPORTEDLY DIED ON 2/15/21 AT 5:02AM. RECORD OF DEATH FROM NURSING FACILITY STATES CHF AS PRINCIPLE CAUSE OF DEATH AND CONTRIBUTORY CAUSES: FRACTURED HIP, A-FIB, STAGE 3 CKD.
4/29/2021	1272134	AL	87	F	2/8/2021	2/16/2021	PFIZER-BIONTECH COVID-19 VACCINE EUA. PATIENT VACCINATED WITH SECOND DOSE ON 2/8/21. PATIENT REPORTEDLY DISCHARGED TO HOSPITAL WITH PNEUMONIA ON 2/16/21. NURSING FACILITY WAS ADVISED THE PATIENT LATER PASSED AWAY AND WOULD NOT BE RETURNING.
4/29/2021	1272058	CA	58	M	4/26/2021	4/28/2021	Death on April 28, 2021 1AM
4/29/2021	1272012	TX	70	F	3/31/2021	3/31/2021	Arm became sore at 5:25 pm (03/31/2021) developed chills, could not sleep for shaking, headache and joint pain (03:08 pm on 04/01/2021) ***this is what she texted to me and my other sister and the 03:08 pm text was the last text she had texted***
4/29/2021	1271898	AL	52	M	4/12/2021	4/15/2021	Patient was found unresponsive on 4/15/2021. Patient seemed to pass in his sleep per family member. The coroner deemed myocardial infarction. No autopsy completed.
4/29/2021	1271865	TX	55	F	3/16/2021	3/18/2021	Patient spouse came to our clinic on 4/29/2021 to report that on 3/18/2021 patient had a "brain bleed" and required emergency treatment. Patient died on 3/20/2021. Death certificate list cause of death as subarachnoid hemorrhage due to ruptured aneurysm

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4/29/2021	1269961	PA		M			DEATH; This spontaneous report received from a pharmacist concerned a male of an unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, start therapy date were not reported, 1 total, administered for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient who received the JANSSEN COVID-19 vaccine and passed away a few weeks later. It was not sure whether his other medical issues contributed to his death. The patient died from unknown cause of death. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: - COVID-19 VACCINE AD26.CO2.S - Death, This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/29/2021	1271674	MO	92	F	1/13/2021	3/20/2021	Death within 60 days of vaccination

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4/29/2021	1272201	CA	83	M	3/5/2021	4/4/2021	<p>Pulmonary embolism; died - autopsy showed multiple blood clots all over his body - pelvic area, hearts,arteries, lungs; This spontaneous case was reported by a consumer and describes the occurrence of THROMBOSIS (died - autopsy showed multiple blood clots all over his body - pelvic area, hearts,arteries, lungs) and PULMONARY EMBOLISM (Pulmonary embolism) in an 83-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 039A21A and 003A21A) for COVID-19 vaccination. Concurrent medical conditions included Diabetes, Prostate cancer and Memory loss. Concomitant products included METFORMIN for Diabetes. On 05-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 02-Apr-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 04-Apr-2021, the patient experienced THROMBOSIS (died - autopsy showed multiple blood clots all over his body - pelvic area, hearts,arteries, lungs) (seriousness criterion death). On an unknown date, the patient experienced PULMONARY EMBOLISM (Pulmonary embolism) (seriousness criterion death). The patient died on 04-Apr-2021. The reported cause of death was Pulmonary embolism. An autopsy was performed. The autopsy-determined cause of death was multiple blood clots. Action taken with mRNA-1273 in response to the event was not applicable Other concomitant medications were reported included unspecified medications for memory loss and diabetes. No treatment information was provided.; Sender's Comments: This is an 83-year-old, male patient who received mRNA-1273 Vaccine who experienced multiple thrombosis and died, 2 days after receiving second dose of vaccine. Medical history includes Diabetes, and Prostate cancer. Conmeds including some unspecified medications for memory loss and diabetes. The autopsy-determined cause of death was multiple blood clots. Very limited information has been reported at this time. Further information is expected,; Reported Cause(s) of Death: Pulmonary embolism; Autopsy-determined Cause(s) of Death: multiple blood clots</p>

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4/29/2021	1271846	NC	77	F	4/20/2021	4/25/2021	Patient presented to ED on 04/25/2021 with complaints of abdominal pain, abdominal distension, and AMS. Patient was admitted to ICU with following diagnoses: 1) Septic Shock, 2) A/C hypoxic/hypercapnic respiratory failure, 3) Acute metabolic encephalopathy, 4) Palliative care patient, 5) AE COPD, 6) ARF w/ATN on CKD3, 7) CAD, 8) Chronic sys/dia CHF, 9) Malnutrition/Failure to thrive. Patient died on 04/26/2021 at 1826. Patient was also previously admitted to hospital on 03/23/2021-03/29/2021 for sepsis.
4/29/2021	1271305	MN	77	M	2/9/2021	3/29/2021	Death within 60 days of vaccine
4/29/2021	1271626	GA	78	M	4/21/2021	4/22/2021	SPOUSE REPORTS THE FOLLOWING FOR PATIENT 4/21/2021 @ 9PM GENERAL MALAISE 4/22/2021 APPROX 4AM SEVERE HEADACHE TOOK IBUPROFEN 4/23/2021 AFTER LUNCH, PATIENT WAS UNABLE TO WALK AS PREVIOUS AND HAD 4 FALLS, ALSO COMPLAINED OF A SORE THROAT. 4/24/2021 DID NOT FEEL WELL, TEMP UP TO 100.4, NAUSEA AND VOMITTING X 1 AND CHEST PAIN, CALLED EMS AND WAS TRANSPORTED TO MEDICAL CENTER ER. 4/26/2021 PATIENT WAS DISCHARGED HOME AFTER TREATMENT FOR RHABDOMYOLYSIS AND RETURNED TO THE HOSPITAL AGAIN ON 04/27/2021 WITH RHABDOMYOLYSIS AS PRIMARY DIAGNOSIS. RESIDENT DISCHARGED TO SNF ON 04/28/2021.
4/29/2021	1271243	MI	77	M	3/18/2021	3/27/2021	Symptoms of fever, nausea, and weakness started 3 days following vaccination. Denies any exposure to COVID positive person. Presented to local emergency department on 3/27/21 with nausea, fever, chills, dizziness, and confusion. Due to patient's condition, he was transferred to larger facility for further management. Patient was admitted to hospital and subsequently transferred to ICU on 4/17/21. He was intubated at that time. Patient went into multisystem organ failure and died on 4/18/21.
4/29/2021	1271726	MN	93	F	2/4/2021	3/31/2021	Death within 60 days of vaccination

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4/29/2021	1271737		87	M	2/5/2021	3/2/2021	Patient presented to the ED and was subsequently hospitalized with sepsis, respiratory failure and pneumonia on 3/2/2021. Patient presented to the ED and was subsequently hospitalized with pneumonia on 3/22/2021. Patient presented to the ED and was subsequently hospitalized with sepsis on 3/31/2021. He died on 4/4/2021.
4/29/2021	1271757	MN	88	F	2/24/2021	3/20/2021	Death within 60 days of vaccination
4/29/2021	1271786	WI	50	F	4/21/2021	4/25/2021	Patient came to pharmacy for 1st Moderna Covid-19 vaccination on 4/21/21. Spouse reported she died on 4/25/21. Our pharmacy does not have information about her medications or health conditions as she wasn't a regular customer of ours.
4/29/2021	1271827	OK	82	M	3/5/2021	3/21/2021	lungs shut down from 95 to 0 in a blink of an eye
4/29/2021	1272543	OR	68	M	3/26/2021	3/27/2021	The following evening after the shot, he had severe pains in his back and shoulders, headache, nausea (vomited). 2 days later, felt severe pain in his stomach, along with pain in his shoulders and back, with a headache, also vomited.
4/29/2021	1271382	TN	62	F	2/1/2021	2/25/2021	Patient was admitted to facility 2/25 and passed away 3/4.

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4/28/2021	1266936		63	M	3/30/2021	4/17/2021	Employee developed a fever and chills on 01-Apr-21 which he managed with Tylenol. Symptoms resolved as per patient who contributed the symptoms as a result of the J&J vaccine. On 10-Apr-21 he developed a cough and requested a day to rest. On 11-Apr-21, he went to Hospital to be evaluated by the physician who ordered some labs which were normal. He was then advised to complete PCR swab and was notified on 12-Apr-21 that his test is positive. As per the protocol, all COVID-19 positive individuals must report to the Health Center within 24 hours of notification and complete 10 days home isolation. During isolation, on 17-Apr-21, patient developed hemoptysis and difficulty breathing a breathing and notified his supervisor who called 112 for an ambulance. He was transferred to Hospital. Evaluated and started treatment for pneumonia and was transferred to Hospital on 18-Apr-21. His condition started declining on 21-Apr-21 as he became hypoxic and tachypneic and was subsequently sedated and intubated. As he became HD unstable, Levophed and Vasopressin were started and reached maxed doses. On 25-Apr-21 Dr. from the hospital called and stated that patient expired at 0830.
4/28/2021	1266971		59	M	3/16/2021	4/8/2021	o 2-Apr-21, developed fever, chills, nausea, and diarrhea which he was managing at home. o 5-Apr-21 performed a PCR swab at Hospital and received positive results on 6-Apr-21. o 8-Apr-21 developed difficulty breathing and notified his Mgmt. who called for an ambulance. He was transported to Hospital and later to Hospital. o SOB on exertion. Receiving vitamins, P and antibiotics. O2 via face mask. Stable condition was the report provided to his wife from Hospital. o 14-Apr-21 condition deteriorated and he was intubated and placed on the ventilator o 15-Apr-21 was transferred to Hospital
4/28/2021	1267350	NJ	69	M	4/24/2021	4/28/2021	Shortness of Breath Fever Body Pains - Shoulder, Hand pain

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4/28/2021		1267074	OH	48	M	2/3/2021	4/26/2021	#1 = 011J20A on 1-6-21 #2 = 028L20A on 2-3-21 patient presented after sudden onset of chest pain early in morning and found to be covid +. ECG demonstrated diffuse ST elevation, troponins negative. CT without contrast didn't have much in it. He was found to be COVID rapid test+ and IGG negative. He was admitted into isolation, no oxygen needs. DDIMER was over 2000 and friction rub noted on physical exam. Cardiology ruled out STEMI, thought maybe viral pericarditis - but wanted echo done after out of isolation. CTA was planned for AM on 4-28-21, but patient died 4-27-21 PM after being found down in room. ROSC was not able to be achieved despite aggressive resuscitation efforts
4/28/2021		1267143	PA	86	M	4/7/2021	4/21/2021	Veteran died on 4/21/2021
4/28/2021		1267192	KY	96	F	4/1/2021	4/3/2021	Patient received her shot and felt very weak within 24 hours. The week of 4/4/2021 began to feel dizzy and stated she felt unwell. Her blood pressure and heart rate were taken and she was having an elevated heart rate. Her normal heart rate is around 50 BPM and her heart rate jumped to over 100 BPM. This continued on and off for a couple of weeks. The week of 4/18/2021, began having shortening of breath. On 4/25/2021, was found in her home unresponsive. Suffered a stroke and was taken to a hospital. She was transferred to a hospice unit on 4/26/2021. She passed away on 4/28/2021
4/28/2021		1267278	CA	34	M	4/10/2021	4/11/2021	Patient passed away 4/12/2021 suddenly, found by family on couch. Was having shortness of breath day before. Per mom, patient had been laughing and talking the morning before patient passed away.

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4/28/2021	1267444	IL	67	F	1/23/2021	2/28/2021	multiple er/admissions from february through april 27. pt deceased on 4/27/21 2/25/21 known past medical history of hypertension and hypothyroidism. Status-post spinal decompression due to stenosis. The patient then developed worsening issues with a surgical site infection. Patient has had numerous bouts of C diff. Staff notes patient is to have GI consult in the near future. Patient is seen today in her room. Patient was once again diagnosed with C diff and is currently being treated with antibiotics. Patient notes no bowel movements today. Patient has not had any issues with intake recently. The patient's weight has declined partially due to likely diarrhea. Patient's blood pressure continues to be monitored closely as it has been on the lower side of normal. Patient's potassium 2.9 on CMP. Patient's other care and therapies were reviewed. 2/28/21 Patient was admitted the hospital after found to be anemic at skilled care facility where she is being treated for C diff infection recurrent Lea. Patient was transfused. Patient was also found to have pneumonia/lung mass. Patient has struggled with electrolyte dysfunction. Patient had to be transfused a second time. Patient did well with second transfusion. Patient was found to be hypokalemic. Patient did well with potassium replacement. The patient was advised will have to do outpatient PET scan. Patient was found to have positive blood cultures as well 4/26/21 68 y.o. female who presents from nursing home with complaints of elevated white blood cell count. According to nursing home records patient had CBC checked on Saturday 04/24/2021 and her WBC count was found to be 50,000. At that point in time no other orders were given and patient was not sent in for evaluation. CBC was repeated this morning and WBC count found to be in the 70,000s. Patient was sent in for evaluation this morning. In talking with the patient, she denies any runny nose, sinus drainage or cough. Patient does report shortness of breath. Patient denies any chest pain or palpitations. Patient denies any dysuria, hematuria, fevers, or chills. Patient denies any nausea or vomiting. Patient does report diffuse pain across the lower abdomen. She does report chronic diarrhea. Patient had C diff stool checked on 04/13/2021 and was negative. (4/26 cdiff positive) Of note patient does have known lung mass that was seen on chest x-ray and PET scan. Patient reports that she does not want anything

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4/28/2021	1267468	PA	88	F	1/24/2021	4/23/2021	done and understands it could be cancer. And continuing to question patient, she reports she wants to be a DNR and does not want any aggressive measures.
4/28/2021	1267487	CA	46	M	4/24/2021	4/26/2021	patient received her covid vaccine per her record: 1/3 and 1/24/21. Patient presented to Facility 4/20/21 diagnosed with COVID, patient died 4/23/21 due to hypoxic respiratory failure/ bilateral pneumonia due to covid.
4/28/2021	1267587	VT	98	F	4/21/2021	4/22/2021	Cough and diarrhea the day after receiving vaccine. The next day, had difficulty breathing and collapsed.
4/28/2021	1267641	NV	59	F	4/15/2021	4/16/2021	patient woke up on 04/22/2021 with shortness of breath and weakness. On exam, she was hypotensive, tachycardic and edematous
4/28/2021	1266624		77	M	2/27/2021	4/20/2021	Shortness of breath
							Acute respiratory failure with hypoxia Death

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4/28/2021	1265810	PR	61	M	3/21/2021	3/1/2021	sweating; felt cold/intense cold even in his bones; He was told by the professional health care that he had small clots in his blood; death cause: Medication; arm started to sore; Doctor identified he had DVT; her husband during that night was not able to sleep; He started having fever; This is a spontaneous report from a contactable consumer (patient's spouse). A 61-year-old male patient received bnt162b2 (BNT162B2), via an unspecified route of administration on 21Mar2021 09:00 (Batch/Lot number was not reported) as single dose f(at the age of 61-year-old) or COVID-19 immunisation. Medical history included dialysis, diabetes mellitus, known allergies: A7, Penicillin, Aspirin, Iodine, Povidone, Pepcid, dyes, Iodine allergy. The patient's concomitant medications were not reported. The patient previously took Aspirin, povidone and pepcid ac and experienced drug hypersensitivity with all. Prior to vaccination, the patient was not diagnosed with COVID-19. The patient experienced death cause: medication on 18Apr2021, he was told by the professional health care that he had small clots in his blood in Mar2021, felt cold/intense cold even in his bones on 21Mar2021, sweating on 26Mar2021, her husband during that night was not able to sleep on 21Mar2021, he started having fever on 21Mar2021, arm started to sore and DVT on 29Mar2021. The patient was hospitalized for he had small clots in his blood, felt cold/intense cold even in his bones, sweating for 27 days. The event DVT was medically significant. The course of events was as follows: After getting the vaccine in 21Mar2021 her husband during that night was not able to sleep. He started having fever and felt cold. Days later he continued with the symptoms. On 26Mar2021 after vaccination he had dialysis same day in the afternoon. When arriving home the person notifies symptoms of intense cold even in his bones and then he started to sweat excessively on 26Mar2021 (Friday). The reporter decided to take her husband to the emergency room on 28Mar2021 (Sunday) where he had a general checkup. He was told by the professional health care that he had small clots in his blood. After some time he had health complications where they had suggested to amputate some of the limbs because of this, the reporter alleges those complications were due to the vaccine. On Monday 29Mar2021 same symptoms reappeared and he was admitted to Hospital. Had a blood test and notified to

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								health professional that blood presents small clots. His arm started to sore severely after the sample. Doctor identified he had DVT. Doctor decided to proceed with various medications. Patient received treatment and he was injected: Percose, Morphine, Benadryl, Triphetarin for blood clot reduction. The patient underwent lab tests and procedures which included blood test: blood clot in Mar2021, Sars-cov-2 Nasal swab test: negative in Mar2021 post vaccination. The patient died on 18Apr2021. It was not reported if an autopsy was performed. The outcome of death cause: medication was fatal, of the other events was unknown. Information about the lot/batch number has been requested.; Reported Cause(s) of Death: death cause: Medication
4/28/2021		1267593	IL	73	F	1/30/2021	2/8/2021	Headache, Increasing fatigue and difficulty breathing over two weeks before 2nd dose -- exacerbated by 2nd dose. Worsening condition led to visit to Primary Care In office tests indicated presence of blood clots and need for emergency hospital treatment. Emergency surgery to remove blood clots throughout her body and attempt to put her on ECMO were unsuccessful and patient succumbed at 12:06 AM 3/3/21.
4/28/2021		1266615		81	M	3/18/2021	4/24/2021	Death
4/28/2021		1266609		84	M	2/16/2021	4/24/2021	Death
4/28/2021		1266554		93	M	4/14/2021	4/25/2021	Received 2nd shot on April 14. He was functioning normally until he woke up on April 25. Symptoms were chest pain, trouble breathing, lethargic, very pale, cold to the touch, vomiting with blood in vomit. PT was taken to the ER where he passed away later that night.

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4/28/2021		1266493	TN	56	M	4/26/2021	4/27/2021	Family friend of the wife, called our pharmacy on 04/28/2021 and reported that wife's appointment would need to be canceled for 04/29/2021 because her spouse passed away the previous night. This prompted our staff to look further and it was noted that her spouse, received his first Moderna vaccine on 4/26/2021 at our pharmacy. Friend was not reporting his death due to the belief that the injection was the cause. Only to report, so upcoming appointment for his wife could be canceled. It was reported to our Medical staff that Patient n has Chronic COPD and had difficulty breathing on the evening of 4/27/2021 and was taken to the hospital where he later passed away. Patient was on portable oxygen and resembled shortness of breath while ambulating at the time of his vaccination appointment on 4/26/2021. Patient immediately recovered from Shortness of Breath once seated in exam room for injection for a few minutes.
4/28/2021		1266427		91	F	2/19/2021	2/23/2021	Patient presented to the ED and was subsequently hospitalized twice within 6 weeks of receiving COVID vaccination. First visit was 2/23/2021 and second visit was 3/14/2021. Patient died on 4/8/2021
4/28/2021		1266405	NJ	73	F	4/10/2021	4/22/2021	Patient received J&J COVID vaccine on 4/10/2021. She underwent elective R total knee arthroplasty on 4/20/2021. On 4/21, patient developed chest pain and was found to have a STEMI (large embolus in the posterolateral branch of the right coronary artery). She underwent thrombectomy and angioplasty on 4/21 with no evidence of CAD elsewhere. She developed hypoxic respiratory failure evening of 4/21 and was found to have bilateral pulmonary embolus with saddle type emboli and distal emboli throughout both lungs. She underwent IR guided thrombectomy on 4/22 and had a cardiac arrest intra-operatively. Given timing of onset and recent J&J COVID vaccination, the patient was treated with IVIG, steroids, and placed argatroban. She continued to have multiorgan failure requiring mechanical ventilation and hemodialysis. On 4/26, CT head was positive for small area of subarachnoid hemorrhage. Patient was transitioned to comfort care measures and palliatively extubated on 4/26.

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4/28/2021	1266384	WA	65	F	3/30/2021	4/26/2021	Patient with dementia NOS received COVID-19 vaccination first dose (as reported) on 3/30/2021. Family reported she was feeling unwell with vague complaints thereafter. Found dead on 4/27/2021. Autopsy performed on 4/28/2021 revealed ischemic bowel with an acute superior mesenteric artery thrombosis. She had little other cardiovascular disease to account for the thrombosis.
4/28/2021	1266361	KS	65	F	4/22/2021	4/23/2021	April 22, 2021 morning my auntie got her first dose of Pfizer vaccine. She happily shared here vaccine experience with family member and relative. April 23 morning, she told us she has severe abdominal pain, has the need to have a bowel movement, but she was defecated. She also told us that she vomit couple times already, then she has no more energy to talk. She got into the hospital and she was announced death right after midnight at 12:04 April 25th. Reason of death given is "septic shock secondary to ischemic bowel & intra-abdominal sepsis". But it is the blood clots issue that is causing it. I was told that after my auntie got into hospital the very next day after Pfizer vaccine, hospital later found out that my auntie has blood blockage issue that is causing blood couldn't flow to her intestines. The acid in her blood was very high, 6+. After more than 6 hours without blood to her intestines, her intestines tissues start dying and turned black color. Doctor found out about this at the night of April 23, 2021 nighttime. April 22, 2021 morning is the day my auntie got her Pfizer covid vaccine. There is a very high chances of the Pfizer vaccine is causing the blood clots that lead to blood blockages.

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4/28/2021	1266078	AR		F			pulmonary embolism; short of breath; This is a spontaneous report from a non-contactable consumer via Pfizer sales representative. A 63-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), dose 2 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient died of pulmonary embolism 2 days after 2nd vaccine dose. She had been short of breath the day after the shot, called the pharmacy where she'd received it, and they told her to go to ER. The reporter thought that she did not go to the ER, and then later died at home. It was unknown if an autopsy was performed. Outcome of the event short of breath at the time of death was unknown. No follow-up attempts are possible; Information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: pulmonary embolism

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4/28/2021	1266077			U			<p>Had both vaccines and died from COVID-19 afterwards; Had both vaccines and died from COVID-19 afterwards; This is a spontaneous report from a contactable nurse. A 42-year-old patient of an unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), dose 1 and dose 2; both via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as SINGLE DOSE for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient had both vaccines and died from COVID-19 afterwards on an unspecified date. The patient did not have any known underlying health conditions or issues. The patient died on an unspecified date. It was not reported if an autopsy was performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Sender's Comments: The information currently provided is too limited to make a meaningful medical assessment hence, the events are conservatively assessed as related to the suspect drug BNT162B2 until further information becomes available. This 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 to regulatory authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: Had both vaccines and died from COVID-19 afterwards; Had both vaccines and died from COVID-19 afterwards</p>

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4/28/2021		1266074		73	M	4/12/2021	4/16/2021	fever; feeling weak; unable to walk independently; no appetite; This is a spontaneous report from a contactable consumer via social media. A 73-year-old male patient received the second dose of (lot number: EW2243), via an unspecified route of administration on 12Apr2021 09:45 (at the age of 73-years-old) as a single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The other medications that the patient received within 2 weeks of vaccination were insulin and for blood pressure. Prior to vaccination, the patient was not diagnosed with Covid-19. The patient previously received the first dose of bnt162b2 (lot number: ER4812), via an unspecified route of administration on 16Mar2021 (at the age of 73-years-old) as a single dose for covid-19 immunisation. The patient's concomitant medications were not reported. On 16Apr2021, the patient experienced fever, feeling weak, unable to walk independently and had no appetite. The adverse events resulted in doctor or other healthcare professional office/clinic visit. There was no treatment received for the events. The outcome of the events was fatal. The patient died on 19Apr2021. Cause of death were fever, feeling weak, unable to walk independently and had no appetite. An autopsy was not performed. Since the vaccination, the patient hasn't been tested for covid-19.; Reported Cause(s) of Death: fever; feeling weak; unable to walk independently; no appetite
4/28/2021		1267665	CA	64	M	4/8/2021	4/8/2021	4/8/21 pt had brain fog like he was in a haze and felt strange being very relaxed like he had taken a tranquilizer he felt better next day. pt seemed to be fine at this point. 4/22/21 pt seemed to be fine and went to the store where he went shopping. He put shopping bags in car. He was found in his car after an hour and 20 minutes by a couple of bystanders unresponsive. 911 was called and he transported to ER. He was intubated but patient died. Unknown if any tests were performed.

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4/28/2021	1265871			U		4/1/2021	HEART ATTACK; This spontaneous report received from a consumer via a company representative concerned two patients. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, administered on MAR-2021 (a month prior to this report) for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On APR-2021, two patients' suffered a heart attack and died. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Other Medically Important Condition). This case, from the same reporter is linked. Sender's Comments: V0: COVID-19 VACCINE AD26.CO2.S - Heart Attack. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: HEART ATTACK
4/28/2021	1266953		50	M	3/16/2021	4/1/2021	It was reported that patient had been experiencing difficulty breathing, walking and delusions as per his fiancé . Fiance notified Manger that they sought medical attention earlier in the morning on 1-Apr-21 at the Clinic and they refused to evaluate patient beyond performing a PCR swab test so, they went back to their apartment. An SMS notification was sent on 1-Apr-21 indicating that patient was COVID-19 positive which was not seen by patient or fiance who reported the result to Mgmt. on 6-Apr-21. He was contacted by patient's friend and advised him the patient was sick, not able to walk, and having difficulty.

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4/28/2021	1266028			F	3/9/2021		portal vein thrombosis; thrombocytopenia; This is a spontaneous report from a contactable consumer (former colleague). A 6-decade-old (in her 50s) female patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot and expiry were not reported), via an unspecified route of administration on 09Mar2021 as single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient received the first dose of bnt162b2 around 09Mar2021 and was hospitalized 2 weeks later. It was reported that the patient experienced portal vein thrombosis and thrombocytopenia in 2021. The patient died in 2021 due to portal vein thrombosis and thrombocytopenia at a State hospital. No autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Thrombocytopenia; portal vein thrombosis
4/28/2021	1269178	NM	85	M	3/10/2021	3/24/2021	Received Moderna Dose #2 on 3/10/2021. About 1-2 weeks after, he started experiencing swollen leg (unsure if left or right), had shortness of breath, and looked pale on 4/22 he was seen by a provider and was prescribed oxygen, later that night he passed.
4/28/2021	1268137	IN	71	M	3/10/2021	3/10/2021	Cause of Death A: Acute encephalopathy Cause of Death B: COVID 19 IMMUNIZATION FOLLOWING COVID 19 VIRUS INFECTION Cause of Death Other: Chronic Schizophrenia
4/28/2021	1268162	PA	58	F	4/13/2021	4/13/2021	My mom received the first does of the shot on April 14, 2021 around 10:15 am. Her friend that took her told me that she was having a reaction to it when he took her home that day. He said she had the chills really bad that he had to turn the heat on in the car and give her a coat. He said later she was sweating. She didn't make any calls on her phone after 5:20 pm. Her sister found her dead inside her home the next day.
4/28/2021	1268212	MI	61	F	4/16/2021	4/23/2021	Patient died on 4/23/21
4/28/2021	1268351	TX	75	M	3/17/2021	4/26/2021	Died of heart attack
4/28/2021	1268373	NY	67	F	4/24/2021	4/25/2021	Patient collapsed and became unresponsive 24 hours after receiving second dose of vaccine.

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4/28/2021	1268064		76	F	3/19/2021	4/25/2021	This 76 year old female received the 2nd Covid shot on 3/19/21 and died on 4/25/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/28/2021	1268440	WI	58	M	3/31/2021	4/26/2021	Death due to cardiac arrest on 4/26/2021
4/28/2021	1268636	IL	71	F	4/6/2021	4/9/2021	Patient received the vaccine, no adverse reactions while at the facility/post observation time period. Patient's niece came into the facility on 4/28/2021 and stated that patient was sick and couldn't move out of the bed after getting the shot. After three days, patient went into Hospital and later expired on 4/27/2021.
4/28/2021	1269224	IL	62	F	3/27/2021	3/28/2021	My partner felt pain overnight. Then, felt flu like symptoms- plus chills- the next day and night. The following morning at 7:00 am, Patient said that she felt real sick. She also, complained of having a real bad Headache, Not long after that, she felt like throwing up. She tried to throw up. Except, nothing came out and she felt very nauseous because of the vaccine. When she came call to bed, I offered to make her some breakfast to help her feel better. Unfortunately, she felt, too, I'll to try and eat an food because of the way she felt. So, I laid next to her with the hope that all would be well. Because, the pharmacist who administered the second dose. Assured my partner, that it was normal to feel flu like symptoms the next day. So, we never doubted what the pharmacist advised. All of sudden, she suffered a cardiac arrest in my presence and died in front of me.

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4/28/2021	1269282		56	M	4/12/2021	4/12/2021	Death; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a 56-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included COPD. Concurrent medical conditions included Immunocompromised. Concomitant products included OXYGEN for an unknown indication. On 12-Apr-2021 at 12:45 PM, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 12-Apr-2021 The patient died on 12-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. No treatment information were reported.; Sender's Comments: Limited information regarding the event has been provided at this time and a causal relationship cannot be excluded; Reported Cause(s) of Death: Unknown cause of death

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4/28/2021		1269415	GA	64	F	4/6/2021	4/8/2021	? Tuesday, April 6th ? Patient receives the 2nd Pfizer vaccine shot ? Thursday, April 8th ? Patient is sick with vomiting and diarrhea ? Friday, April 9th ? Patient is delirious and still sick with vomiting and diarrhea. She is also has pain in her stomach. An ambulance is called to take her to the hospital. The hospital determines her white blood count is elevated, indicating an infection. Blood sugar is very high ? approximately 400. Covid test is negative. She is restless upon arrival. She tries to climb out of bed continuously. She is restrained. o Saturday, April 10th ? Patient is running a fever and is in pain. She is also confused and doesn?t recognize her oldest sister. Meds are administered to handle both items. (Toradol?). Blood sugar around 200. She continuously counts and calls for Mother and Father. Patient continues to be restless o Sunday, April 11th - at request of family, a CT scan is done of her stomach and abdomen. Nothing is found. Potassium was at 3.2 (normal is 3.5) so she received an IV drip to help with potassium levels. Sugar ? 206. Later drops to 176. Patient calms down some. She is still confused and doesn?t recognize her oldest sister. ? Monday April 12th ? the hospital attempts to do an MRI, but patient panics. This is a closed MRI and her 1st husband died in one. The MRI isn?t done. ? Tuesday, April 13th ? she is asked by the doctor to state her name and wiggle her toes. She complies. Doctor orders speech therapy. She is sedated for an MRI and a CT scan. Both are successfully completed. She sleeps for the rest of the day. Blood sugar ? 274 @ 5:09pm. ? Wednesday, April 14th ? Patient was asleep all day. Most of the day she isn?t responsive when nurses come in and do things like take blood. She normally responds even if she is asleep. Around 5pm she starts to respond and make noises; she briefly opens her eyes then falls asleep. She continues to run a temperature. ? Thursday, April 15th ? Patient is asleep most of the day. She is responsive when nurses do things like take blood. A spinal tap is performed. There was mention of dementia. Hospital is sharing little information, varying from she is retreating into herself vs. something worth isolating is going on. Temp was 102.3 at 7:37, but later dropped to 99.3 without meds. Dr. (neurologist) provides an update to the family. Tests so far are negative. EEG showed sleeping brain (she was asleep during test). MRI showed

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						nothing. Spinal tap negative so far. No infection or anything has shown up. Orders another EEG and MRI ? Friday, April 16th ? Patient tried to open her eyes. ? Saturday, April 17th ? a met code was called on her and she was moved to ICU. A circulation issue was found in right leg. Occlusion was really bad. Initially the doctor was concerned about blood clots. None were found, just swelling. Pressure was relieved. Blood pressure issues. She was put on 2 blood pressure meds, at least. She was dehydrated and acidic. Diabetic ketoacidosis was mentioned. A cytokine storm was expected. ? Sunday, April 18th ? blood pressure not stable. She was put on dialysis. Peripheral circulation was worse. ? Monday, April 19th ? she coded around 5am. Doctors were trying to save her. She passed away about 30 minutes later .
4/28/2021	1269854		76 M	3/13/2021	4/10/2021	death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient has a PMH significant for T2DM, CAD, hyperlipidemia, Parkinson's disease, HTN, Diffuse interstitial Pulmonary fibrosis. No cause of death listed or any notation. Patient deceased on 4/10/202. 2nd dose of Pfizer given 3/13
4/28/2021	1267721 TX		95 M	3/18/2021	4/4/2021	Per family and health department report, patient died at home. No treatment or assessment performed. Patient family reports death caused by complications r/t bladder cancer. No further details released.
4/28/2021	1266821 MD		40 F	4/23/2021	4/24/2021	Pt was seen in Family Medicine on 4/23/2021. Was given her first Moderna vaccine that day. On-call doctor received phone call on 4/24/2021 that pt had expired. Death certificate states cause of death: seizure due to possible complication of COVID 19 vaccine. Conditions if any, leading to immediate cause: cerebellopontine angle tumor of brain

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4/28/2021	1268424	WI	47	F	4/24/2021	4/26/2021	The decedent was found in her bedroom by her daughter. Medical history only includes previous blood clots. Decedent has been complaining of coughing and shortness of breath the past few days. There is no history of drug use. The decedent had a foam cone when found.
4/28/2021	1267883	NY	88	F	3/11/2021	3/11/2021	Cardiac Arrest about an hour after being injected.
4/28/2021	1267794	AK	41	M	2/5/2021	2/24/2021	Approximately 3 weeks after Moderna Covid-19 vaccine administration, patient began to experience dizziness, transferred to Hospital, diagnosed with ischemic stroke, discharged, returned within days with worsening, diagnosed with new ischemic stroke (contralateral side), transferred to Medical Center, patient's condition worsened, presumably additional new ischemic stroke, patient ultimately died on 3/5/2021. Diagnosis was acute infarction of the brainstem/pons as well as acute bilateral cerebellar/occipital infarctions.
4/28/2021	1267753	KY	85	M	1/8/2021	4/13/2021	Case tested positive for COVID-19 on 12/7/2020; vaccinated on 1/8/2021 and 2/5/2021 with Moderna; re-tested positive for COVID-19 on 4/1/2021. Case was admitted to hospital on 4/2/2021 for surgery due to a previous fall. Case had altered mental status and fever. Case was found to have an acute CVA.
4/28/2021	1269219	MD	80	M	3/8/2021	4/14/2021	The Patients leg gave out and he fell. Per doctors at hospital, he did not hit his head. He could not get up and he vomited. Ambulance was called and he was taken to the Hospital. The family was told that he had a brain bleed near the thalamus. A few hours later the patient was unresponsive. He was intubated and taken to neuro ICU. Within less then 24 hours from first symptom the patient died.
4/28/2021	1267795	NV	63	M	4/22/2021	4/22/2021	After receiving the initial dose, the decedent had complaints of extreme weakness and lethargy.
4/28/2021	1267803	WI	95	F	1/7/2021	2/6/2021	Patient developed COVID-19 with complaints of increased cough on 4/6. Was found to be COVID positive on 4/12. Recieved combo Bamlanivimab/etesevimab treatment for infusion on 4/14. Patient had initial recovery to baseline period on 4/22. Rapidly declined shortly after and died 4/25.

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4/28/2021		1267822	KY	62	F	3/3/2021	3/14/2021	Admitted to hospital on 9/30/2020 and discharged on 10/28/2020.
4/28/2021		1267948	CA	66	M	4/19/2021	4/21/2021	Exact time of symptom onset unknown. Clinic was notified by family at 10am on 4/21 that patient had expired at home. Family member reported that patient was tired and achy and was found deceased on the floor in his room. Patient had a history of Covid-19 in January, 2021.
4/28/2021		1268039		73	M	4/23/2021	4/24/2021	This 73 year old white male received the 2nd Covid shot on 4/23 and died on 04/24/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/28/2021		1268049		86	M	2/26/2021	3/26/2021	Fall Death
4/28/2021		1267987	IN	80	M	1/19/2021	1/19/2021	? Patient never had a COVID positive test result ? The narrative seemed to shift over time, with the most recent hospital notes stating the headaches started after the vaccination, so I wanted to include a more in depth timeline on this ? General timeline gathered from notes o 01/11/2021: Constant headache ongoing for 3 weeks; discussed scheduling his COVID vaccine, directed to website o 02/02/2021: acknowledges patient has had first dose of COVID vaccine; denies ever being sick or around anyone with COVID o 03/01/2021: patient states he has had a headache since the COVID vaccine 1/19/2021 o 03/03/2021: patient has had both COVID vaccine shots o 03/12/2021: patient has had a headache for a couple months that waxes and wanes, no cause was identified. His headache first began at the end of January after his COVID vaccine
4/28/2021		1268019		83	F	2/26/2021	4/22/2021	This 83 year old female received the vaccine on 2/26/21 and went to the ED on 4/22/21 and was admitted with Thrombocytopenia, acute renal failure, fall with subdural hematoma, clavicle fracture, anemia, head injury, anascara, hyperkalemia and died on 4/27/2021. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.

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4/28/2021		1269855		88	M	3/12/2021	4/5/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug adverse event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was admitted on 2/27/21 with acute encephalopathy and suffering progressively worsening mental status. He was admitted for over a month through 3/31/21 where he was eventually discharged on hospice before passing on 4/5/21. His hospital course consisted of treating community acquired pneumonia/bacteremia from hemodialysis catheter placement. Patient continued to have positive cultures despite antibiotics due to a found vegetation on the aortic valve. He experienced functional and cognitive decline over his admission. Comorbidities include vascular dementia, h/o stroke, ESRD on HD, HTN, DM2, HLD
4/28/2021		1268038	OR	81	M	3/16/2021	3/17/2021	Fiance reports 24 hrs after receiving the COVID-19 J&J vaccine pt passed away
4/28/2021		1267950		97	F	2/6/2021	2/17/2021	This 97 year old female received the Covid shot on 2/06/21 and went to the ED and was admitted on 2/17/21 with AMS, UTI, Sepsis from e.coli, and subsequently on 3/10/21 and again on 3/24 and received the 2nd Covid shot on 4/9/21 and died on 4/19/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/28/2021		1268044	TN	68	M	4/21/2021	4/21/2021	Clinic was informed that patient patient went unresponsive at home at 2pm on 4/21/21 and patient expired.
4/27/2021		1262151	TX	87	F	2/6/2021	2/7/2021	After 1st dose of Pfizer: Nausea, and trouble breathing (Oxygen went up and down from 90 to 95) - Took to Dr and advise to watch oxygen levels After 2nd dose of Pfizer: Nausea, Dry heaves, Stomach Pain, Head Aches, Back Pain, Loosing Control of Bladder (Kidney Failure), Trouble Breathing (Oxygen went under 90) - Took to her Dr and she said to take her to the Emergency Room due to her Oxygen going below 90. I took her to Hospital.

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4/27/2021	1262166	CA	82	F	4/22/2021	4/22/2021	was fine until Thursday evening 4/22/2021. Started feeling body aches and restless. Friday morning 4/23/2021. She woke up and went to the bathroom. Go out and fell and went into cardiac arrest. #12: GAD, Fibromyalgia, migraine, ventral hernia, hypothyroid, hypercholesterolemia, neuropathy, Hx of Covid-19
4/27/2021	1262174	NJ	63	F		3/1/2021	DEATH; FROTHING AT MOUTH; COVID-19; This spontaneous report received from a consumer concerned a 63 year old female. The patient's height, and weight were not reported. The patient's concurrent conditions included obese and diabetes. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, administered on MAR-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date in Mar-2021, (7-10 days after vaccination), the patient developed COVID 19. The patient self quarantined for 14 days. On 14-APR-2021, the patient went to emergency room with the complaint of shortness of breath. Her D-Dimer was very elevated, but had a ventilation/perfusion scan (VQ) scan which came back negative. They treated her with heparin. On 15-APR-2021, early morning at 06:00, the patient coded (cardiopulmonary arrest) and frothing at the mouth. The team gave her epinephrine, but did not get a return to circulation. It did not revive her. The patient coded for 30-40 minutes. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of death on an unspecified date, and the outcome of covid-19 and frothing at mouth was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0-covid-19 vaccine ad26.cov2.s-Death and Covid 19. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: PATIENT CODED
4/27/2021	1262410	NY	78	F	4/1/2021	4/8/2021	Heart Attack 2 days after 2nd dose of moderna vaccine - followed by death

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4/27/2021	1262349	WI	61	F	4/5/2021	4/27/2021	Pt came in with positive D-dimer, coded and passed
4/27/2021	1261865	OH	91	F	4/1/2021	4/25/2021	Death after experiencing blood clot to the lung

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4/27/2021	1261483	FL	75	M	12/28/2020	1/2/2021	<p>Diagnosed with shingles; passed away suddenly; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (passed away suddenly) and HERPES ZOSTER (Diagnosed with shingles) in a 75-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). Concomitant products included VALACICLOVIR HYDROCHLORIDE (VALTREX) for an unknown indication. On 28-Dec-2020 at 3:30 PM, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 02-Jan-2021, the patient experienced HERPES ZOSTER (Diagnosed with shingles) (seriousness criterion hospitalization). The patient died on 13-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, HERPES ZOSTER (Diagnosed with shingles) outcome was unknown. Treatment included antiviral medication valtrex 1 mg. The action taken with mRNA-1273 with events was not applicable. Cause of death was unknown. Plans for an autopsy were not provided. This case concerns a 75-year-old, male patient, who experienced herpes zoster 5 days after and died 1 month 15 days after receiving the first dose of mRNA-1273. Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. The cause of death was not reported. It is unknown if an autopsy was performed. Most recent FOLLOW-UP information incorporated above includes: On 11-Apr-2021: Follow-up included fatal event.; Sender's Comments: This case concerns a 75-year-old, male patient, who experienced herpes zoster 5 days after and died 1 month 15 days after receiving the first dose of mRNA-1273. Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. The cause of death was not reported. It is unknown if an autopsy was performed.; Reported Cause(s) of Death: Unknown cause of death</p>

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4/27/2021	1262415	VA	77	M	3/24/2021	3/26/2021	Information obtained from clients wife. patient received his first dose of Moderna 2/24/21 lot 024M20A with no reported issues except for a sore arm. patient received his second dose of Moderna on 3/24/21; Lot# 006B21A. No immediate effects from the vaccine. On day 2 post vaccination, patient became to have chills, per wife; did not check temperature and denied any symptoms such as flu-like symptoms. Day 3 post vaccination; patient began to have weakness in the legs. March 31st; patient was unable to stand and the rescue squad was called. patient was taken to the Hospital; where he was evaluated and released home. Pt collapsed at 1am 4/1/2021 and died 4/1/21.
4/27/2021	1262319	OK	80	M	4/23/2021	4/25/2021	Per Review of Charge Nurses Notes. Please see Below Called in to residents room by CNA, resident without respirations or pulse, resident placed on floor and CPR initiated at 0725, EMSA notified and called time of death at 0751. Specialists on call for Dr. notified. daughter notified. cremation services notified.
4/27/2021	1261857	WV	86	M	3/4/2021	3/4/2021	He died the same day he received the shot
4/27/2021	1261836	MI		F		4/1/2021	Mom Passed away last Tuesday; This is a spontaneous report from a Pfizer from a contactable consumer reported (patient's child). A female patient of an unknown age received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Lot number was not reported) as single dose for covid-19 immunisation. Medical history and concomitant medications were not reported. Patient passed away on an unspecified date in Apr2021 (reported as last tuesday). It was reported that patient's child and entire family were scheduled to get second dose of Covid Vaccine on 29Apr2021. Clarified that they tested positive after first (1 st) dose. Patient (Mom) passed away last Tuesday. She was wondering about getting the second dose. The patient died on an unspecified date in Apr2021. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Mom Passed away last Tuesday

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4/27/2021	1261835	OH		U			who is responsible and/or liable when a child is injured or dies during a COVID vaccine trial; who is responsible and/or liable when a child is injured or dies during a COVID vaccine trial; This is a spontaneous report from a contactable consumer or other non hcp. A child patient of an unspecified gender received bnt162b2 (BNT162B2), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as SINGLE DOSE for covid-19 immunisation. The patient medical history was not reported. The patient's concomitant medications were not reported. It was reported that the consumer had searched the website and cannot find anywhere that states who is responsible and/or liable when a child is injured or dies during a COVID vaccine trial. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: who is responsible and/or liable when a child is injured or dies during a COVID vaccine trial

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4/27/2021	1261833	MN	93	F	3/2/2021	3/2/2021	died; administered in Left leg; This is a spontaneous report from a contactable consumer reported for patient (mother). A 93-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 02Mar2021 administered in Left leg at single dose for COVID-19 immunisation. No other vaccine in four weeks. Medical history included COPD, aortic stenosis, mild dementia, no known allergies. Concomitant medications in two weeks included donepezil, acetylsalicylic acid (ASPIRIN), ascorbic acid/ergocalciferol/nicotinamide/retinol/riboflavin/thiamine hydrochloride (VITAMINS), Blood Pressure Meds. Historical Vaccine included the first dose of BNT162B2 (lot number EL1283) in the right arm on 26Jan2021 09:15 (at the age of 93-years-old) as a single dose for COVID-19 immunization and experienced prolonged tiredness, increased weakness, dragging right foot when walks, little more trouble swallowing pills than before on 27Jan2021. The patient died three weeks later on 29Mar2021, she received treatment included ambulance. Care providers thought rapid decline after vaccine. The death cause was unknown, no autopsy was performed. No COVID prior vaccination, no COVID tested post vaccination. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: died

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4/27/2021	1261821	WV	70	U	2/26/2021	3/10/2021	unknown bleeding; nausea; lightheaded; GI bleed; cardiac arrest; bleed in small intestine; This is a spontaneous report from a contactable consumer (patient's daughter). A 70-year-old patient of an unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 via an unspecified route of administration, administered in Deltoid Right on 26Feb2021 (Batch/Lot Number: EN6198) as SINGLE DOSE for covid-19 immunisation. Vaccine Administered at Military Facility was no. Patient received the first dose of vaccine on 05Feb2021 at age of 70 years old for covid-19 immunization and experienced rash on face, loss of blood found to be from small intestine, hemoglobin low, cardiac arrest, going into shock. The patient medical history and concomitant medications were not reported. The patient experienced unknown bleeding (death, hospitalization, medically significant) on 10Mar2021, nausea (hospitalization) in 2021 with outcome of unknown, lightheaded (hospitalization) in 2021 with outcome of unknown, gastrointestinal (GI) bleed (medically significant) in 2021 with outcome of unknown, cardiac arrest (medically significant) in 2021 with outcome of unknown, bleed in small intestine (medically significant) in 2021 with outcome of unknown. Patient went to the hospital on 10Mar2021 with nausea and lightheaded. Endoscopy found GI bleed in 2021. Received blood went into cardiac arrest. Sent to another hospital found bleed in small intestine. Patient experienced unknown bleeding on 10Mar2021, which required visit to Emergency room/intensive care unit on 18Mar2021 and received treatment, it resulted in death. The patient died on 18Mar2021. An autopsy was not performed.; Reported Cause(s) of Death: unknown bleeding

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4/27/2021	1261526		69	U	3/24/2021	3/29/2021	Type 2 Diabetes; Hypotension; heart started to drop; Renal failure; This case was received via an unknown source (no reference has been entered for a health authority or license partner) on 20-Apr-2021 and was forwarded to Moderna on 20-Apr-2021. This spontaneous case was reported by a patient family member or friend (subsequently medically confirmed) and describes the occurrence of CARDIAC FAILURE (heart started to drop), RENAL FAILURE (Renal failure), TYPE 2 DIABETES MELLITUS (Type 2 Diabetes) and HYPOTENSION (Hypotension) in a 69-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. Concurrent medical conditions included Multi organ failure (Kidneys and liver are VERY messed up showing multi-organ failure.) and Type 2 diabetes mellitus. On 24-Mar-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 29-Mar-2021, the patient experienced CARDIAC FAILURE (heart started to drop) (seriousness criteria death and medically significant) and RENAL FAILURE (Renal failure) (seriousness criteria death and medically significant). On an unknown date, the patient experienced TYPE 2 DIABETES MELLITUS (Type 2 Diabetes) (seriousness criterion death) and HYPOTENSION (Hypotension) (seriousness criterion death). The patient died on 29-Mar-2021. The reported cause of death was Renal failure, type 2 diabetes, Hypotension and heart started to drop. An autopsy was not performed. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On an unknown date, Blood creatine: 9.93 (Inconclusive) Inconclusive. On an unknown date, Glomerular filtration rate: 5 (Inconclusive) Inconclusive and 5.0 (Inconclusive) 5.0. On an unknown date, Haemoglobin: 7 (Inconclusive) Inconclusive. On an unknown date, Liver function test: 500 (Inconclusive) Inconclusive. On an unknown date, SARS-CoV-2 test: negative (Negative) Negative and negative (Negative) Negative. On an unknown date, Troponin: 14 (Inconclusive) 14.0. On an unknown date, Troponin increased: 500 (Inconclusive) Inconclusive. On an unknown date, White blood cell count: normal (normal) normal (in range). The action taken with mRNA-1273 in response to the event was not applicable. He was feeling unwell. He had vomited prior and felt sick.

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His blood sugar was 136 or 139, nothing bad. Treatment details included antibiotics going into him, sleeping meds, meds to rise his blood pressure, Dextrose, Propofol, Dexmedtominine. Company comment: This is a 69-year-old, patient of unknown gender who received mRNA-1273 Vaccine who experienced cardiac failure and died, 6 days after receiving second dose of vaccine. Medical history includes Type 2 diabetes mellitus and Multi organ failure. No conmeds were provided. Very limited information has been reported at this time. No further information is expected.; Sender's Comments: This is a 69-year-old, patient of unknown gender who received mRNA-1273 Vaccine who experienced cardiac failure and died, 6 days after receiving second dose of vaccine. Medical history includes Type 2 diabetes mellitus and Multi organ failure. No conmeds were provided. Very limited information has been reported at this time. No further information is expected.; Reported Cause(s) of Death: renal failure; type 2 diabetes; hypotension; heart started to drop

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4/27/2021	1261201		36	M			DEATH; This spontaneous report received from a patient concerned a 36 year old male. The patient's weight, height, and medical history were not reported. As per reporter patient was healthy. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported, per procedure no follow up will be requested for this case. No concomitant medications were reported. The reported stated that presence of antibodies should be tested before taking the vaccine and taking the vaccine with covid antibodies present can kill. The patient died on an unspecified date with unknown cause of death after vaccination. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210428954 -covid-19 vaccine ad26.cov2.s -Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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4/27/2021	1261290		63	F			DEATH; This spontaneous report received from a patient concerned a 63 year old female. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot number. No concomitant medications were reported. On an unspecified date, the patient died from unknown cause of death. It was reported that, the patient death occurred after receiving the vaccine. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). This case, from the same reporter is linked.; Sender's Comments: V0: -covid-19 vaccine ad26.cov2.s-death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/27/2021	1262580	KY	85	M	3/26/2021	4/12/2021	Patient died on April 12th 2021. Not sure exactly what the cause of death but that he was losing blood in in his somewhere. He resided in a nursing home, and was taken to the hospital where he later died
4/27/2021	1263989	AZ	62	F	4/13/2021	4/14/2021	Nausea, vomiting, burning in stomach, high blood sugars- symptoms started the day after the vaccine. Found obtunded 3 days after vaccine given. 911 called in route to the hospital had a cardiac arrest, resuscitated, arrested again and resuscitated. Upon admission to the hospital diagnosed with diabetic ketoacidosis and died the next day- 4 days after the vaccine was administered
4/27/2021	1261766	FL	1	M	4/8/2021	4/10/2021	increased body temperature, seizure, death

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4/27/2021		1264707	FL	65	M	3/25/2021	4/17/2021	death; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (death) in a 65-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. Concurrent medical conditions included Cirrhosis of liver. On 25-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 17-Apr-2021. The patient died on 17-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Limited information regarding the patient's death has been provided at this time and a causal relationship cannot be excluded. It is not clear if the patient was hospitalized at the time of their death, only that they died in hospital; Sender's Comments: Limited information regarding the patient's death has been provided at this time and a causal relationship cannot be excluded. It is not clear if the patient was hospitalized at the time of their death, only that they died in hospital; Reported Cause(s) of Death: Unknown cause of death
4/27/2021		1263713	PA	59	F	3/3/2021	3/3/2021	3/30/2021 Patient received 1st dose of Moderna vaccine at 11:35AM and subsequently discontinued dialysis treatment 58 minutes early due to being cold. 3/31/2021 Patient went to hospital at 2:28PM with admitting diagnosis of acute encephalopathy due to intra-cranial hemorrhage. 4/1/2021 Patient expired at 3:35AM with cause of death reported as intra-cranial hemorrhage.
4/27/2021		1294857	NY	83	F	2/12/2021	2/17/2021	Five days after receiving the Covid-19 vaccine, patient suddenly began having trouble breathing. We called 911 right away but, by the time EMS arrived, she was unconscious and didn't appear to be breathing. Patient was not sick at the time this occurred but she was hospitalized in December of 2019 and was diagnosed with pulmonary fibrosis and pulmonary hypertension which required her to go home with and continue on supplemental oxygen. However, she never experienced pulmonary distress after coming home and her SPO2 levels consistently ranged between 96 and 99% with supplemental oxygen. Patient's death was very sudden and unexpected.

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4/27/2021	1262780	TX	83	F	4/8/2021	4/12/2021	Patient found unresponsive in home, attempted CPR and provided epi x 3 in transport to ED. ACLS continued at the ER, but RSC unable to be achieved. Death pronounced at 0925 AM
4/27/2021	1264618	TX	38	M	4/21/2021	4/26/2021	103 fever 2 days after the vaccine. Then became afebrile. Then found deceased on 4-26-2021
4/27/2021	1264579	CA	59	M	4/26/2021	4/27/2021	I was notified that patient passed away at Hospital 10:37 am today. Per message to medical office from Coroner, it was reported that patient collapsed this morning while walking his dog. Patient was brought in by ALS complaint of FULL ARREST to Hospital 10:10 am and pronounced at 10:37 am 4/24/2021 by Dr. at Hospital.
4/27/2021	1264528	OR	67	F	3/2/2021	3/19/2021	My mom was very ill with fever like symptoms following her first vaccination on January 26th. The symptoms were even worse after her second vaccination March 2nd and included muscle cramping in her legs. Once she was recovered she only had a persistent cough which she attributed to allergies as the pollen count had been high. In the early morning hours of March 19th she was having difficulty breathing and chest pains. She was rushed to the emergency room where she subsequently died of cardio pulmonary embolism which the coroner indicated began within three weeks of her death.

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4/27/2021	1264420	MI	73	F		3/17/2021	<p>PASSED AWAY; HIGH BLOOD PRESSURE; DIZZINESS; THROWING UP; HEADACHE; This spontaneous report received from a consumer concerned a 73 year old female. The patient's height, and weight were not reported. The patient's concurrent conditions included high blood pressure, no alcohol use, and non smoker, and other pre-existing medical conditions included the patient had no known allergies. the patient had no drug abuse or illicit drug usage. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 1805020, expiry: unknown) dose was not reported, 1 total administered on 16-MAR-2021 on left arm for prophylactic vaccination. No concomitant medications were reported. It was reported that the patient received covid-19 vaccine ad26.cov2.s on 16-MAR-2021. On 17-MAR-2021, the patient's only complaint was that she experienced headache. On 14-APR-2021, she complained about dizziness and throwing up that was getting worse and high blood pressure on same day the reporter called the patient's doctor's office at 14:30 p.m. and doctor saw the patient's blood pressure was returned to normal and she underwent laboratory data included: systolic blood pressure (NR: not provided) 113 mmHg, 170 mmHg, 190 mmHg. After few hours, 7 or 10 hours she passed away in her sleep, no pain at the time of death between 12:00 a.m. or 15:00 p.m. on 15-APR-2021. It was unspecified if an autopsy was performed. The reporter was unsure about the true time of death. The reporter did not complaint for a lawsuit as the doctor of the patient did not know if the death was correlated with the vaccine. The patient did not had no other disease, except high blood pressure. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient passed away on 15-APR-2021, recovered from high blood pressure on 14-APR-2021, and headache on an unspecified date in 2021, and the outcome of dizziness and throwing up was not reported. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: - covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s). covid-19</p>

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							vaccine ad26.cov2.s-High Blood pressure . This event(s) is considered not related. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event(s) than the drug. Specifically: UNDERLYING DISEASE; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/27/2021	1264249	NY	68	F	4/23/2021	4/23/2021	chills, dizziness. shortness of breath developed a few hours later .
4/27/2021	1264244	MT	85	M	2/25/2021	3/6/2021	Expired in between Dose 1 and 2. Non-vaccine related. Death Certificate indicates, COPD, Type 2 Diabetes & hypertension
4/27/2021	1263539	AZ	72	F	2/28/2021	2/28/2021	With in one hour patient experienced severe Vomiting and Diarrhea. She had called her Doctors office. She saw a PA which told her to drink more water. She experienced Uncontrollable Diarrhea For 18 days. She was sent to Hospital by ambulance on Monday March 15, 2021. She was was treated with an IV and sent home discharged with Weakness. She continued to have Uncontrollable Diarrhea to were she was wearing Diapers. She fell from Weakness on March 16, 2021 to the point where she laid on the floor for an hour and half before she could drag herself up. She went to Hospital on March 18, 2021. Her blood pressure dropped and was admitted to ICU on the March 18th. She started suffering from a Heart attack and was taken back to have a stent put in her wrist to help with possible heart blockage. She went into cardiac arrest and passed away.
4/27/2021	1264171	MT	88	F	3/10/2021	4/7/2021	Pt Deceased prior to dose 2. Reported by home health agency as unrelated to vaccination.

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4/27/2021		1262914	NY	65	M	4/9/2021	4/10/2021	pt had severe vomiting with red color and an order it. He had massive pain in his leg. Patient had loss of appetite, nausea, and headaches. His eyes were rolling in the back of his head, which this symptom would come and go. He would have hallucinations. On unspecified date Pt woke up screaming the house was on fire and there was a dog by the bed and a person in the closet, talking out of his head. An ambulance came and brought him to ER. Pt coded in the ambulance and brought back. Pt was coherent upon arriving to the ER. He had to be intubated and bagged and died about 15 minutes later. Pt had blood work which was totally out of whack. Family was told they did not understand what had happened to him. The only thing the family could think of that was different was he had recently been vaccinated.
4/27/2021		1263560	WA	87	M	3/31/2021	4/13/2021	Per patient's Daughter the patient developed blood clots in his small intestine on 4/13/2021 and died 4/22/21 with physicians unable to explain how or why he developed these clots while on apixaban. She requested his case be reported and reviewed in hopes it helps make the vaccines safer if that was what caused the clots.
4/27/2021		1263575	KS	80	F	3/25/2021	3/26/2021	Patient had received the vaccine day prior to coming to ED. Presented to ED with family due to n/v/chills with shaking. She was able to dress self into gown and answer history questions. Then when she laid supine she became cold/clammy with loss of pulse. CPR was started with eventual decision by family to cease.
4/27/2021		1263577	NY	91	F	2/5/2021	2/6/2021	Unexplained hoarseness at 7:00 am 02/06/2021 and cough at 0:700 pm on 02/06/2021. Fall (first time ever), followed vomiting, and choking at 2:00 pm 02/07/2021. Ambulance called recorded vitals 97.5 Temp 102/70 BP, 98 HR at 2:51 pm at home and 146/90 BP 102 HR at 3:09 pm enroute to hospital; pt pointed to hip pain and answered questions in native language Polish (although pt spoke English). Pt delivered alert and kicking blankets off legs inside emergency room. Emergency room staff failed to communicate with pt. Pt was discovered unresponsive 20 minutes later when staff arrived to take admission vitals. Pt passed 02/07/2021 in ER. No cause of death given by ER doctor to family.

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4/27/2021	1263591	MI	63	M	4/9/2021	4/9/2021	Within 12 hours of vaccine patient complained of being short of breath and asked his wife to call 911, he then stopped breathing and she did CPR until rescue squad arrived. Pt was unable to be revived and died.
4/27/2021	1263795	ND	95	F	2/6/2021	4/8/2021	11:45 Mom put her light on had shortness of breathe, needed a Nirtro pill. Didn?t give much relief. Was given Ativan for anxiety & Diltiazm for blood pressure.. not much relief, was given oxygen. Then LASIK for fluid build up. Passed about 6;20 A.M. on the 9th.
4/27/2021	1264003	MO	58	F	4/12/2021	4/14/2021	Patient received 1st COVID vaccine 4/12/2021 at medical center. Per ER report: 4/14/2021 patient was in bed with significant other and was noted to not be responding. EMS was called. Patient was found without a pulse and apneic. CPR began, PEA converted to Vtach, received 8 total epi and 1.5gm lidocaine by EMS. Down 50-55 minutes prior to ER. In ER given 2 additional epi, 2 sodium bicarb, intubated and was PEA then asystole. Pronounced deceased in ER.
4/26/2021	1257772	MI	61	M	4/1/2021	4/5/2021	Patient started not feeling well and told friends and family that he was not feeling well and that his doctor believed he was having a side effect to the 2nd dose of his COVID-19 Vaccine. He died 11 days after receiving his vaccine.
4/26/2021	1258269	MD	59	F	4/1/2021	4/1/2021	This pt came in to see me in her normal state of health and then received moderna #1 here on 4/1. Developed SOB 2 hrs after vaccination. Presented to ER on 4/2 with hypoxia (80%) and was + for covid. The ER triage notes states ?C/O SOB, Nausea, vomiting, diarrhea that started yesterday 2 hours after he first COVID Vaccine?. Notes quote her saying ?I got my vaccine yesterday and I started to feel short of breath.? She died from covid respiratory failure on 4/23.
4/26/2021	1258763	OH	50	F	4/17/2021	4/23/2021	On April 23,2021 patient was at her home and started complaining of shortness of breath and chest pain. She called 911 and they responded to her residence at 0500 a.m. While being assessed, patient collapsed. She was asystolic. CPR was started but to no avail. She was transported to the coroner's office where an autopsy was performed. She had bilateral pulmonary thromboemboli. There were not deep vein thromboses found in her legs.

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4/26/2021	1258614	OH	26	F	4/1/2021	4/25/2021	Patient presented to ED for 2 syncopal episodes and went into cardiac arrest 5 minutes prior to ED arrival in ambulance. She received ACLS measures and alteplase was mixed and administered for pulmonary embolism concern.
4/26/2021	1258524	NJ	77	F	3/1/2021	3/19/2021	Patient passed away in between dose 1 and 2. Cause unknown.

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4/26/2021		1258453		64	F	4/22/2021	4/23/2021	<p>my auntie, who was trying to be supportive and to get vaccinated just passed away like this is not worse it. My auntie, passed away the next two days after she got her Pfizer Covid vaccine. My auntie, who is 65 years old, got her Pfizer vaccine the the morning of April 22 2021. She told us he was completely find on the day of the vaccine. But the next morning around 9 am, she told us she has severe abdominal pain, has the need to have a bowel movement, but she was defecated. She also told us that she vomit couple times already, then she has no more energy to talk. She got into the hospital and she was announced right after midnight at 12:04 April 25th. The reported death reason is due to Bowel Ischemia with Perforation and it has nothing to do with Pfizer vaccine that she got. But I believe it is her post Pfizer covid vaccine reaction that result in Bowel Ischemia with Perforation. My auntie lived with a very healthy life style. She walked every morning, and has a shorter walk in the evening. She has no blood pressure, no blood sugar, everything is fine with her medical check. My auntie had a kidney transplant 20+ years ago and she is on the track for monthly doctor visit. When she asked her general doctor if she could get the vaccine, her general doctor asked her to consult her kidney doctor. She then went to ask her kidney doctor and her kidney doctor call her general doctor to discuss her health conditions. Both of her doctor decided that she could take the vaccine and one of the doctor registered her for the vaccine on April 15 2021. The she nurse told her to came in for vaccine on Apr 22, and she is now death after the Pfizer vaccine. I only read about people with recent organ transplant is not recommended to take the Covid vaccine. But there is no information about people that ever had kidney transplant shouldn?t take the vaccine. My auntie, who was trying to be supportive and to get vaccinated just passed away like this is not worse it without a clear explanation. I would like you to contact health department to follow up on this case and find out the real root cause. If the vaccine is not recommended for people that ever got kidney transplant, CDC should publish the information so that there won?t be more victims. Please take necessary action ASAP. Thank you!</p>

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4/26/2021		1258334	MS	87	M	2/25/2021	2/26/2021	My Father starting experiencing all the side affects - chills/shaking/loss of energy /fever and passed away - the day after having the shot.
4/26/2021		1258858	MI	71	M	3/31/2021	4/22/2021	Patient died on 4/22/21. Vaccinated with 2nd dose of Moderna on 3/31/21. Vaccinated with Shingrix on 4/15/21.
4/26/2021		1258236	MS	93	F	4/20/2021	4/21/2021	resident was hospice she was afebrile day of vaccine on 4/20. on am of 4/21/21 0600 nurse stated no c/o of pain or discomfort. Resp were even and unlabored. That morning at 1145 charge nurse stated she was extremely hard to rouse. Vs were ok. SHe had some weakness in right side. they notified hospice. She had labs done. She was diagnosed with PNA and started on Abt. That night she was unresponsive to verbal commands and couldn't get po med. she received gentamicin im. on 4/22/21 charted she was vommiting small amount. She expired late that night. MD doesn't believe the vaccine caused the death, but thinks it has the potential.
4/26/2021		1258114	FL	72	M	4/13/2021	4/21/2021	Death 1 week after 2nd dose of Phizer COVID vaccine, this person developed shortness of breath and was found passed away by his roommate.
4/26/2021		1258054	IA	91	M	3/19/2021	3/21/2021	Stroke, hospitalized 5 days, sent to skilled care (nursing home), death 2 weeks after stroke
4/26/2021		1258867		72	F	3/15/2021	4/3/2021	This 72 year old female received the Covid shot on 03/15/2021 and went to the ED on 4/3/2021 and was admitted on 4/3/2021 with abdominal pain, nausea, chest pain, NSTEMI and died on 04/24/2021 . Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021		1257832	MI	60	M	2/25/2021	4/14/2021	Hospitalized +Covid post vaccination with decreased mental status
4/26/2021		1257426		82	F	12/30/2020	1/18/2021	Heart stopped suddenly after 18 days probably due to presence of Potassium Chloride in the injection. Outcome DEATH within 2 hours thereof as medics unable to regain consciousness after CPR.

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4/26/2021	1259280		71	M	2/27/2021	4/5/2021	This 71 year old male received the Covid shot on 2/27/21 and went to the ED and was admitted on 4/5/2021 and died on 4/25/2021. Lumbar radiculopathy, spondylolisthesis of lumbar region, lumbar stenosis with neurogenic claudication, lumbar spinal stenosis. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021	1257932	OH	74	F	4/7/2021	4/10/2021	Witnessed sudden cardiac arrest
4/26/2021	1260071	NM	78	M	4/7/2021	4/22/2021	FOUND DECEASED, COLD IN VEHICLE
4/26/2021	1259030	CA	70	M	3/17/2021	4/11/2021	Per my aunt (uncle's wife), my uncle complained of severe headache especially on the right temple area, nausea, and dizziness at around 6am on 4/11/2021. Soon afterward, she noted my uncle has left side weakness and drooling when drinking.
4/26/2021	1260537	MD	63	M	4/24/2021	4/26/2021	Patient (per family member) received 1st dose of Pfizer COVID vaccine on 4/24/2021. On 4/26/2021 at 6 AM patient presented to hospital with chest pain for 2 hours. EKG showed inferior ST segment elevation myocardial infarction (a "heart attack") and the patient was brought emergently for cardiac catheterization. Catheterization showed an occluded right coronary artery, and angioplasty/stenting was performed. Following brief restoration of blood flow to the heart, the artery re-occluded and the patient arrested. After 90 minutes of CPR, the patient expired.
4/26/2021	1260018	FL	50	M	4/23/2021	4/23/2021	Was sweaty, unresponsive, and breathing shallow a few mins after administration. BP 97/68. Within a few mins, patient became responsive and BP 146/81. Patient chose not to go with EMS and walked out of store after they were feeling better. Today (3 days later) received report from medical examiner that patient passed away.
4/26/2021	1259763	MI	41	M	3/29/2021	4/2/2021	Fever, chills, headache, and tiredness (2nd day of receiving the 2nd dose) Feeling good on the 3rd day Headache, stomach burn, throwing up, and heart attack (4th day of receiving the 2nd dose) Passed away on April 2, 2021

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4/26/2021	1259703	WA	65	M	4/1/2021	4/1/2021	DEATH, HAEMORRHAGIC STROKE
4/26/2021	1259591	IL	96	F	2/5/2021	4/23/2021	Congestive Heart Failure decline, AFib w/RVR, hospitalization, Respiratory decline, Cardiac decline, possible UTI, Hospice Care, continued decline, expired.
4/26/2021	1259454	WA	59	F	3/29/2021	4/23/2021	venous sinus thrombosis of the superior sagittal sinus, based on imaging likely occurred 1-2 weeks prior to presentation, ~ 1-3 weeks after vaccination no other clear reason for hypercoag state, no prior thromboembolic events, no h/o malignancy or rheumatological disease.
4/26/2021	1259340		70	M	3/24/2021	4/16/2021	This 70 year old male received the Covid shot on 3/24/21 and was found deceased at home by the Sheriff sometime between 3/24/21 and 4/16/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021	1259316		83	F	1/28/2021	2/4/2021	This 83 year old female received the Covid shot on 1/28/21 while under hospice care and went to the ED and admitted 2/4/21 and again on 3/3/21 and again on 3/25/21 and 4/15/21 died on 4/24/21. GI bleed, duodenal ulcer with hemorrhage, SIRS (systemic inflammatory response syndrome, shortness of breath, acute heart failure, acute respiratory failure, cough, pleural effusion. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021	1259240	NY	74	M	3/28/2021	4/13/2021	PATIENT DID NOT SHOW FOR SECOND DOSE OF VACCINE WHEN CALLED WE WERE TOLD BY HIS WIFE THAT HE HAD A HEARTATTACK AND PASSED AWAY ON 04/13/2021

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4/26/2021	1259253		76	F	2/27/2021	4/13/2021	This 76 year old female received the Covid shot on 2/27/2021 and went to the ED on 4/13/2021 and was admitted on 4/13/2021 with horthness of breath, abnormal lab, and returned to ED on 4/16/2021 and admitted on 4/17/2021 with vomiting, elevated troponin, dehydration and returned on 4/23/2021 and admitted on 4/24/2021 with rapid heart rate and acute respiratory failure and died on 4/24/2021. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021	1260747	CA	72	F	1/30/2021	1/31/2021	Patient received notice of her vaccination appoint shortly before her AV Fistulogram, with angioplasty surgery on Tues, 2/2/21. She was nervous about getting the vaccine just days prior to her scheduled surgery. We called her primary doctor and was told to contact the surgeon. After multiple attempts to reach the surgeon and speaking with hospital staff, assuring us it was fine to get the vaccine prior to surgery. I still wanted to confirm with the surgeon and was finally able to speak to him. He assured me and to inform patient that it was fine to get the vaccine prior to surgery. On Sat, 1/30/21, patient received her Covid-19 Moderna vaccine. On Sun, 1/31/21, she got a covid-19 test to prepare for her surgery on Tues, 2/2/21. Her vaccine injection site was sore and she was tired, so she rested and took naps. On Mon, 2/1/21, she went to dialysis as usual. On Tues, 2/2/21, she had her surgery in morning. On Wed, 2/3/21, her dialysis facility could not perform treatment due to swelling of her arm. On 2/4/21 she rested, her arm still bothering her but had been assured to rest. On Fri 2/5/21, she went for her usual dialysis treatment but the facility was not able to perform dialysis and shortly after starting treatment, the facility called 911 to take patient to the hospital. Patient died with the next few hours without her family at her side.
4/26/2021	1259113	CA	82	M	2/12/2021	3/3/2021	interstitial pneumonia, hypoxia

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4/26/2021	1259351		84	M	2/24/2021	4/1/2021	This 84 year old male was a hospice patient and received the Covid shot on 2/24/21 . The patient died on 4/1/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/26/2021	1260729	AL	74	F	4/20/2021	4/21/2021	She had diareah and nausea for a few days with 1st shot but it got better. She complained about "feeling off" after the 2nd shot. Went to bed to try to sleep it off and she never got up again. We think she died Wednesday night or Thursday morning by how she stopped responding to texts. She was found deceased on Friday. They won't do an autopsy here. funeral home has her for now.
4/26/2021	1257892	NY	78	F	4/20/2021	4/21/2021	pt had second dose of covid vaccine (not sure which product). The next day presented to the ed with SOB, tachycardia, temp 102.5. Patient had myocardial infarction and subsequently passed away in the hospital on 4/25

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4/25/2021	1255612	CA	49	M	12/18/2020	4/6/2021	Heart attack and death; This is a spontaneous report from a contactable Nurse. A 49-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number: Ej1685) intramuscular in left arm on 18Dec2020 at 11:00 AM at single dose for COVID-19 immunisation. Medical history was none, no known allergies. No other concomitant medications in two weeks. No other vaccine in four weeks. The patient experienced heart attack at 05:30 pm on 06Apr2021 and the event caused patient death. No treatment for the event. Autopsy results was available. Autopsy remarks: heart attack. No COVID prior vaccination, no COVID tested post vaccination. The patient died on 06Apr2021. An autopsy was performed and the reported cause of death was heart attack.; Sender's Comments: Myocardial infarction occurred 3 months and 19 days after BNT162B2 vaccine administration. The event is considered unrelated to suspect drug being rather an incidental occurrence. 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: Heart attack and death; Autopsy-determined Cause(s) of Death: Heart attack

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4/25/2021		1255738			M	3/30/2021		<p>Nausea; Vomiting; Shortness of breath; Muscle aches; Extremely ill; Body aches; expired; This is a report from a contactable consumer based on the information received by Pfizer. (Manufacturer Report Number: UNT-2021-006444). A 76-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for Covid-19 immunization; and treprostinil sodium (TYVASO, strength: 0.6, mg/ml), via resp inhalation (reported as via inhalation route) from 30Mar2021 (Batch/Lot Number: 2101912; Expiration Date: 31Jan2022) to an unspecified date, at 18-54 ug, four times a day (QID) for primary pulmonary arterial hypertension. Medical history included ongoing pulmonary arterial hypertension. Concomitant medications included riociguat (ADEMPAS), amlodipine besilate, rivaroxaban (XARELTO); all taken for an unspecified indication, start and stop date were not reported. It was reported that the patient began therapy with IH Tyvaso (treprostinil sodium, concentration of 0.6 mg/ml) delivered by Tyvaso Inhalation Device (TD-300/A), on 30Mar2021 for primary pulmonary arterial hypertension. The current dose was reported as 18-54 ug (3-9 breaths), four times a day (QID) via inhalation (IH) route. On an unspecified date, the patient experienced nausea, vomiting, shortness of breath, muscle aches, extremely ill, and body aches. The patient was hospitalized in response to the events on an unspecified date. The outcome of events was unknown. On an unspecified date in 2021, the patient expired, and cause of death was not reported. The action taken in response to the events for treprostinil sodium was unknown. The patient died on an unspecified date in 2021. It was unknown if an autopsy was performed. The reporter's assessment of the causal relationship between the events with the suspect product was not provided at the time of this report. Since no determination has been received, the case is managed based on the company causality assessment. Case Comment/Senders Comment: The company has assessed the serious adverse event of death as not related to IH treprostinil and TD-300/A device. The event was likely due to progressive complications and life limiting nature of underlying PAH in this elderly patient. Information about</p>

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4/25/2021	1255731			M			
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lot/batch number has been requested.; Sender's Comments: The information currently available is limited and does not allow a meaningful causality assessment for reported event of death (unknown cause); however, based solely on implied vaccine-event chronological association a causal relationship between this event and BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) cannot be completely excluded. The other reported events; Reported Cause(s) of Death: expired

Hot a fever then full blown covid; Hot a fever then full blown covid; blood clot; organ failure; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported that a male patient of an unspecified age received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for covid-19 immunisation . The patient medical history and concomitant medications were not reported. Previously on an unknown date, the patient received the first dose of BNT162B2 vaccine. On an unspecified date, the patient experienced hot a fever then full blown COVID, blood clot and organ failure leading to patient death on an unknown date. It was not reported if an autopsy was performed. No follow-up attempts are possible. Information about lot/batch number cannot be obtained. No further information is expected; Reported Cause(s) of Death: Drug ineffective; Covid-19; Blood clot; Organ failure

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4/25/2021	1255719	FL	65	M	3/15/2021	4/15/2021	My father had a massive stroke and brain hemorrhage that took his life.; My father had a massive stroke and brain hemorrhage that took his life.; This is a spontaneous report from a contactable consumer. A 65-year-old male patient (reporter's father) received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration at the age of 65-years-old on 15Mar2021 12:00 (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. The patient's medical history was not reported. No known allergies. Not diagnosed with COVID prior vaccination. There were no concomitant medications. No other vaccines in four weeks. No other medications in two weeks. The patient previously received bnt162b2 (BNT162B2), dose 1 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. The reporter stated that, "My father had a massive stroke and brain hemorrhage that took his life" on 15Apr2021 09:30 PM. No treatment received for the events. The events resulted in Emergency room/department or urgent care. The patient died on 18Apr2021. It was not reported if an autopsy was performed. Unknown if tested for COVID post vaccination. Information about lot/batch number has been requested.; Reported Cause(s) of Death: My father had a massive stroke and brain hemorrhage that took his life.; My father had a massive stroke and brain hemorrhage that took his life.

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4/25/2021	1255708		59	M	3/31/2021	4/2/2021	SOB; Sepsis; aspiration pneumonia; This is a spontaneous report based on the information received by Pfizer. A contactable Other HCP reported that a 59-year-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection), dose 1 via an unspecified route of administration at the age of 59-year-old on 31Mar2021 (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. Medical history included chronic UTI, and splenectomy for unknown reason, RMS (Rhabdomyosarcoma). Concomitant medication included ocrelizumab (OCREVUS). On 02Apr2021, it was reported that patient experienced: Went into hospital due to SOB (Shortness of breath) on 02Apr2021, died on 07Apr2021 related to aspiration pneumonia on an unspecified date. Patient developed Sepsis as well on an unspecified date. Patient became a DNR on 06Apr2021 then passed on 07Apr2021. The patient was hospitalized for SOB from 02Apr2021 to an unknown date. The patient died on 07Apr2021. It was not reported if an autopsy was performed. The outcome of event aspiration pneumonia was fatal. The outcome of events SOB and Sepsis was not recovered. Information on the lot/batch number has been requested.; Sender's Comments: Based on the information currently available and known drug safety profile, the reported events more likely represented intercurrent illnesses, but not related to Bnt162b2. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and investigators, as appropriate. ; Reported Cause(s) of Death: aspiration pneumonia

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4/25/2021	1255705			F			died after taking the vaccine; This is a spontaneous report from a contactable consumer reporting on behalf of the mother. A female patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unspecified date, at single dose, for COVID-19 immunisation. Medical history and concomitant medications were not reported. The patient died after taking the vaccine, on an unspecified date. It was unknown if an autopsy was performed. Cause of death was unknown. The reporter believed that it was from the vaccine and ICU nurse said, doctor questioned about what the patient got sick and reporter just wanted to report it. Information about lot/batch number has been requested.; Reported Cause(s) of Death: died after taking the vaccine

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4/25/2021	1255703			F			<p>Patient died; portal vein thrombosis; thrombocytopenia; This is a spontaneous report from a contactable physician. A 50-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on an unspecified date as SINGLE DOSE for covid-19 immunisation. The patient medical history was not reported. The patient's concomitant medications were not reported. The patient experienced portal vein thrombosis and thrombocytopenia 2 weeks after first Pfizer vaccine. Patient died. The patient died on an unspecified date. It was not reported if an autopsy was performed. The outcome of the events portal vein thrombosis and thrombocytopenia was unknown. The outcome of the event unknown cause of death was fatal. Information on the lot/ batch number has been requested.; Sender's Comments: The information available in this report is limited and does not allow a medically meaningful assessment of the case. Based on temporal association, a causal association between the reported events and BNT162B2 cannot be fully excluded. Case will be reassessed when additional information is available including medical history and concomitant drug information. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and investigators, as appropriate. ; Reported Cause(s) of Death: Patient died</p>

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4/25/2021	1255689	NY	88	F	1/26/2021	1/27/2021	cause of death as cardiac arrest; This is a spontaneous report from a contactable consumer. This consumer reported for a 88-year-old female patient (mother) that she received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration, administered in Arm Left on 26Jan2021 10:45 (Lot Number: EL3247) as SINGLE DOSE for covid-19 immunisation. Medical history included Parkinsons, known allergies: Macadamia Nuts. No pregnant. No covid prior vaccination. The patient's concomitant medications were not reported. Historical vaccine included the first dose of BNT162B2 on 05Jan2021 (88-year-old) at 11:00 AM, Vaccine location: Right arm for covid-19 immunisation. The patient experienced cardiac arrest on 27Jan2021 16:45 with outcome of fatal. Patient passed away 30 hours after receiving the second dose of the Pfizer vaccine. The Facility put on her death certificate - cause of death as cardiac arrest. Treatment included CPR. The patient died on 27Jan2021. An autopsy was not performed.; Reported Cause(s) of Death: cause of death as cardiac arrest

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4/25/2021		1255618	NH		M	3/26/2021		I have another male (patient) who had an acute CVA we send him to the hospital he had acute CVA, he had a right artery occlusion, he passed away; I have another male (patient) who had an acute CVA we send him to the hospital he had acute CVA, he had a right artery occlusion, he passed away; This is a spontaneous report from a contactable Nurse (Registered nurse with title of Infection Preventionist). A male patient of an unspecified age received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 26Mar2021 (Lot Number: EL9269; Expiration Date: 01May2021) as single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient had an acute CVA and was sent him to the hospital he had acute Cerebrovascular accident (CVA), he had a right artery occlusion, he passed away. The patient died on an unspecified date in 2021. It was not reported if an autopsy was performed.; Sender's Comments: The information currently available is very limited. There is no sufficient evidence that the reported events may be related to administration of BNT162B2. Of note, medical history and concomitant medications were not provided to determine pre-existing risk factors or conditions that may have led to the events. Case will be re-assess once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: patient had an acute CVA and was sent him to the hospital he had acute CVA, he had a right artery occlusion; patient had an acute CVA and was sent him to the hospital he had acute CVA, he had a right artery occlusion

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4/25/2021	1255744			U			Deceased; This is a spontaneous report from a Pfizer. A non-contactable consumer reported that a patient of unspecified age and gender received bnt162b2 (BNT162B2), dose 2 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient previously received bnt162b2 (BNT162B2), dose 1 via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunization. Consumer reported that, "Amongst my coworkers about 50% were put down for two to three days and one person became deceased a few hours after the second shot." The patient died on an unspecified date. It was not reported if an autopsy was performed. No follow up attempts are possible; Information on the lot/batch number cannot be obtained.; Reported Cause(s) of Death: Deceased

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4/25/2021		1255617	NH		F	3/26/2021		she ended up passing away in the hospital, her diagnosis there was hypoxia and acute CHF; she ended up passing away in the hospital, her diagnosis there was hypoxia and acute CHF; hypotensive; This is a spontaneous report from a contactable Nurse. A female patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on 26Mar2021 (Lot Number: EL9269; Expiration Date: 01May2021) as single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient sent to the ER hypoxic, hypotensive, short of breath, she ended up passing away in the hospital, her diagnosis there was hypoxia and acute CHF (Congestive heart failure). Serious: No. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Sender's Comments: Based on the information available, a causal association between BNT162B2 and the reported events cannot be excluded. However, details on the patient's age, medical history, drug-event temporal relationship, clinical course of the event and relevant test results would allow for a meaningful medical assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: she ended up passing away in the hospital, her diagnosis there was hypoxia and acute CHF; she ended up passing away in the hospital, her diagnosis there was hypoxia and acute CHF

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4/25/2021	1255628	MO		F	3/28/2021	4/14/2021	died yesterday due to blood clots; This is a spontaneous report from a contactable consumer. A 55-year-old female patient (mother) received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on 28Mar2021 (Batch/Lot number was not reported) as single dose for covid-19 immunisation. The patient medical history and the patient's concomitant medications were not reported. The patient experienced blood clots and died due to the event. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested. ; Reported Cause(s) of Death: died yesterday due to blood clots
4/25/2021	1256946	KS	55	M	3/15/2021	3/28/2021	Unknown if any immediate reaction. The patient passed away on 3/28/21 approximately 2 weeks from the first dose of the vaccine.

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4/25/2021	1255746	FL	81	F	2/2/2021	2/18/2021	heart arrhythmia; cardiac arrest; This is a spontaneous report from a contactable consumer who reported for his wife. An 81-year old female patient received her second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Batch/Lot number EM9810) via unspecified route of administration on 02Feb2021 (at the age of 81-year old) at single dose for COVID-19 immunization. Relevant medical history was not reported. Concomitant medication included metoprolol from Jan2021 for congestive heart failure. The patient received the first dose of the same vaccine BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE, Batch/Lot number) on 12Jan2021 and on 15Jan2021, she had such trouble breathing diagnosed in the Urgent care as congestive heart failure with enlarged heart and fluid in her lungs because of her heart being enlarged. She had not had any previous heart problems. On 18Feb2021 she collapsed, went limp and went into the hospital and she was neurologically unresponsive. They tried to revive her and did bring her back with 5 epi shots, he was told that they did bring her back. When she got to the ER she went pulseless again and they gave her two more epi shots and got her back but she never did come out of a coma-like state. They admitted her to ICU. She stayed there until she passed away on the 22Feb2021. CT scans, X-rays, images of her heart, echocardiograms were performed. She was tested for COVID in Feb2021 and it was negative. They did a brain scan and there was no activity because she had been too long without oxygen. The consumer reported that the week before the cardiac arrest, she was feeling faint but she never passed out. Death certificate stated cause of death was heart arrhythmia and cardiac arrest. No autopsy was done.; Reported Cause(s) of Death: heart arrhythmia; cardiac arrest

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4/25/2021		1257197	WY	71	F	3/27/2021	4/4/2021	Patient died sometime between Sunday evening, April 4 and Monday morning, April 5. I looked at the browser history in her cellphone and on the night of April 4, she googled "Heart attack symptoms in women" and "Moderna vaccination side effects." I think she didn't go to the doctor because she figured her symptoms were related to her vaccine -- even though it had been a week. I wanted to report her death because I don't trust her doctor to do it. It took him two weeks and a call from me to complain before he signed her death certificate. He listed April 9, 2021 as the official date of death because that's when she was found, even though the deputy coroner told me she died on either the 4th or the 5th.
4/25/2021		1257062	IL	49	M	4/16/2021	4/17/2021	The patient developed high fevers, profound watery diarrhea up to 13L/day, requiring IV administration of replacement fluids. He ultimately developed ARDS and succumbed to this illness.
4/25/2021		1256806	FL	58	F	3/25/2021	4/10/2021	My Sister was found dead on 4/27/2021. She had been dead aprx. One week. She received her 1st Moderna shot on March 25th.
4/25/2021		1256737	NC	75	M	2/1/2021	4/20/2021	Died blood clot in brain
4/25/2021		1256666	CA	56	M	3/31/2021	4/1/2021	Patient started complaining of being short of breath, weak and dizzy a day or two after receiving the shot. He started taking the asthma inhaler constantly rather than just once in months. He lay down for a nap and never woke up exactly 3 weeks after getting the shot. (more exact details will need to come from his wife).
4/25/2021		1256112	AZ	48	M	4/22/2021	4/24/2021	My husband received the shot on the 22nd. He died in his sleep on the 24th. He was complaining how the second shot really was giving him a lot of trouble, but nothing that would indicate life-threatening symptoms
4/25/2021		1256000	NY	80	F	3/12/2021	3/20/2021	Pallor, Fatigue, loss of vitality, diarrhea, profuse rectal bleeding, coughing up blood, death 25 days after vaccine

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4/25/2021		1255836	FL	92	F	1/7/2021	1/12/2021	Presented to ED on 1/12/21 slowly worsening constant myalgias, generalized weakness where she couldn't walk, dry cough. Per daughter not acting herself and more confused. Clinical impressions included hypoxia, COVID-19. Pt is s/p her first dose of vaccine and this precludes plasma. Supportive care steroids and doxy. Family faxed DNR on 1/12/21 at 2225. Remdesivir given 1/13/21 at 1am. 1/13/21 note at 1:30am: Pt's O2 sat fluctuating btw 80%-90%. Increased NC success pt O2 sat continues to decrease. NRB 15L in place O2 Sat 90%. Pt became pulseless and expired at 0451.
4/25/2021		1255749			U			died after the second one when they had covid; died after the second one when they had covid; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), second dose via an unspecified route of administration on an unspecified date (batch/lot number was not reported) as a single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient died after the second one when they had Covid because there were too many antibodies on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: died after the second one when they had covid; died after the second one when they had covid

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4/25/2021	1255748	NJ	86	M	3/16/2021	4/8/2021	Patient tested positive for Covid; Patient tested positive for Covid; The patient died; This is a spontaneous report from a contactable consumer. An 86-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), dose 1 via an unspecified route of administration, administered in right arm on Feb2021 (Batch/Lot Number: En6303) as single dose, and dose 2 via an unspecified route of administration on 16Mar2021 (Batch/Lot Number: Ep7534) as single dose for COVID-19 immunization. Medical history and concomitant medications were not reported. The patient tested positive for COVID on 08Apr2021 which resulted in Emergency room/department or urgent care, and hospitalization for 3 days. Treatment included high flow oxygen, doxycycline, inhalers, and Rocephin. The patient underwent lab tests and procedures which included Nasal Swab: positive on 08Apr2021. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Reported Cause(s) of Death: The patient died
4/25/2021	1257204	MO	39	F	3/3/2021	3/23/2021	Patient began experiencing pain and difficulty walking on Tuesday, March 23. Later that afternoon she was taken to an Urgent care, who sent her to the ER for evaluation. She was diagnosed with a very large blood clot in her leg, spanning from just above the knee to her groin area. They admitted her and began treating her with blood thinners. While undergoing that treatment, her heart stopped 3 times and she had to be resuscitated. They discovered a pulmonary embolism. While removing a large clot from her lungs, the doctor found that her lungs were riddled with hundreds of tiny blood clots. They also said that she was bleeding internally, very heavily, from an unknown location. In all, they gave her 20 units of blood, and none of it stayed in her veins. The doctor said it seemed to just disintegrate. At that point, her brain and organs had begun shutting down and family made the decision to remove her from life support. She passed away Thursday evening, March 25, 2021.

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4/25/2021		1255738			M	3/30/2021		<p>Nausea; Vomiting; Shortness of breath; Muscle aches; Extremely ill; Body aches; expired; This is a report from a contactable consumer based on the information received by Pfizer. (Manufacturer Report Number: UNT-2021-006444). A 76-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for Covid-19 immunization; and treprostinil sodium (TYVASO, strength: 0.6, mg/ml), via resp inhalation (reported as via inhalation route) from 30Mar2021 (Batch/Lot Number: 2101912; Expiration Date: 31Jan2022) to an unspecified date, at 18-54 ug, four times a day (QID) for primary pulmonary arterial hypertension. Medical history included ongoing pulmonary arterial hypertension. Concomitant medications included riociguat (ADEMPAS), amlodipine besilate, rivaroxaban (XARELTO); all taken for an unspecified indication, start and stop date were not reported. It was reported that the patient began therapy with IH Tyvaso (treprostinil sodium, concentration of 0.6 mg/ml) delivered by Tyvaso Inhalation Device (TD-300/A), on 30Mar2021 for primary pulmonary arterial hypertension. The current dose was reported as 18-54 ug (3-9 breaths), four times a day (QID) via inhalation (IH) route. On an unspecified date, the patient experienced nausea, vomiting, shortness of breath, muscle aches, extremely ill, and body aches. The patient was hospitalized in response to the events on an unspecified date. The outcome of events was unknown. On an unspecified date in 2021, the patient expired, and cause of death was not reported. The action taken in response to the events for treprostinil sodium was unknown. The patient died on an unspecified date in 2021. It was unknown if an autopsy was performed. The reporter's assessment of the causal relationship between the events with the suspect product was not provided at the time of this report. Since no determination has been received, the case is managed based on the company causality assessment. Case Comment/Senders Comment: The company has assessed the serious adverse event of death as not related to IH treprostinil and TD-300/A device. The event was likely due to progressive complications and life limiting nature of underlying PAH in this elderly patient. Information about</p>

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lot/batch number has been requested.; Sender's Comments: The information currently available is limited and does not allow a meaningful causality assessment for reported event of death (unknown cause); however, based solely on implied vaccine-event chronological association a causal relationship between this event and BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) cannot be completely excluded. The other reported events; Reported Cause(s) of Death: expired

passed away from self inflicted injury; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by an other health care professional (subsequently medically confirmed) and describes the occurrence of INTENTIONAL SELF-INJURY (passed away from self inflicted injury) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event. On 09-Apr-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced INTENTIONAL SELF-INJURY (passed away from self inflicted injury) (seriousness criterion death). The patient died on 18-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. No treatment information was provided. Action taken with mRNA-1273 in response to the event was not applicable. Reporter did not allow further contact; Sender's Comments: Patient died of an unknown cause from a self-inflicted injury nine days after receiving second dose of Moderna Vaccine. Very limited information regarding this event has been provided at this time. Further information can not be requested.; Reported Cause(s) of Death: cause of death unknown

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4/24/2021	1250966	VA	64	M	4/9/2021	4/10/2021	Per family, patient received 2nd vaccination and began experiencing swelling and shortness of breath the following day. This progressed over the course of 2 weeks until this today when he suffered a cardiopulmonary arrest and could not be resuscitated. Death resulted on April 24th 2021.
4/24/2021	1255809	WI	62	F	4/16/2021		-Patient died unexpectedly on Thursday, April 22, 2021 at her home (found unresponsive by spouse) -No reactions were observed at the pharmacy (within 15 min waiting period) following either covid-19 vaccine (1st dose administered 8am on 3/26/21 -Left Deltoid) -When asked (4-16-21) how she tolerated the 1st dose, Patient reported minor side effects (mild Headache, tiredness) but had no reservations about receiving the 2nd dose. No additional information.

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4/24/2021		1249681	TX	75	F	3/9/2021	4/17/2021	<p>Found dead; Felt crappy; Wasn't feeling well; This spontaneous case was reported by a health care professional (subsequently medically confirmed) and describes the occurrence of DEATH (Found dead) in a 75-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 047B21A and 040A21A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Blood pressure abnormal ("Patient was on blood pressure medications for the last 20 years") and Anticoagulant therapy ("Patient started on a blood thinner in January 2021"). On 09-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 15-Apr-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 17-Apr-2021, the patient experienced FEELING ABNORMAL (Felt crappy) and MALAISE (Wasn't feeling well). On 18-Apr-2021, FEELING ABNORMAL (Felt crappy) and MALAISE (Wasn't feeling well) outcome was unknown. The patient died on 18-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Not Provided For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. Concomitant product use was not provided by the reporter. The patient was on blood pressure medications (unspecified) for the last 20 years. She was started on blood thinner (unspecified) in January 2021. Treatment information leading up to the patient's death was not reported. Action taken with mRNA-1273 in response to the events was not applicable. A case of death of a 75-year-old, female patient 3 days after the second dose of mRNA-1273 (Lot # 040A21A). Patient had developed abnormal feeling and malaise 2 days after vaccine use and based on temporal association cannot be excluded. However, causality cannot be established for the death as cause of death is unknown. Further information is being requested.; Sender's Comments: A case of death of a 75-year-old, female patient 3 days after the second dose of mRNA-1273 (Lot # 040A21A). Patient had developed abnormal feeling and malaise 2 days after vaccine use and based on temporal association cannot be excluded. However, causality cannot be established for the death</p>

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							as cause of death is unknown. Further information is being requested.; Reported Cause(s) of Death: Found dead
4/24/2021	1249748	NV	73	F	1/23/2021	1/1/2021	At first my mother had a headache. Then My mother was feeling weak and could not breathe. She continued to suffer so went to the doctor to get a check up but continued to suffer and finally died on 2/8/21 due to a couple of reasons which include hypertension
4/24/2021	1250784	WV	67	F	3/25/2021	3/27/2021	My mother was found deceased in her home two days after receiving the first dose of Pfizer vaccine of unknown causes.
4/24/2021	1250851	NV	56	F	4/12/2021	4/13/2021	She had a lymph tissue lumps fever chills muscle aches headache. She said she felt about 50% better the following day. She eventually succumbed and passed away.

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4/24/2021	1251507	MA	64	F	3/12/2021	3/27/2021	Department of Health received a call from her sister, in response to a call/letter/text sent out to all recipients of the Janssen vaccine. She stated that her sister received the J and J vaccine on 3/12/21 (confirmed in State vaccine system) at the hospital where she receives her oncology care. She reported the following: "She had a massive stroke on MARCH 27TH, 2021 leaving her paralyzed on the right side with the inability to speak, swallow, or see. She was initially diagnosed with Ovarian cancer approximately three and one half years ago. She was chosen for a study with Pharmaceuticals and her diagnosis was changed to a vary rare form of cancer called clear cell carcinoma which originates in the gynecological area. She did have a previous stroke approximately three years ago, (just after original diagnosis) but she was on a different course of treatment at that time...Oncologists have explained that this most recent stroke event would not be considered a side effect of her current treatment routine. She wanted to bring it to the attention of the health department in case it needs to be looked at more closely by the J&J research/scientific team. She passed away on 4/5/21. Her current treatment consisted of palliative chemo only. " Decedent was a resident but was vaccinated in another state. After the CVA she was brought to the hospital and subsequently transferred to the Medical Center where she died on 4/5/2021. Sister is willing to speak with any investigators if deemed necessary.
4/24/2021	1252137	MI	79	M	4/9/2021	4/14/2021	Stoke 6 days after vaccine. Death 5 days after stroke.

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4/24/2021		1253986	GA	60	M		3/25/2021	STROKE; This spontaneous report received from a consumer concerned a 60 year old white, Not Hispanic or Latino male. The patient's height, and weight were not reported. The patient's past medical history included epileptic seizures when seeing flashing lights, he had no prior history of stroke or any surgery, and concurrent conditions included high blood pressure, and type 2 diabetes. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration not reported, batch number: Unknown) dose was not reported, administered, on 16-MAR-2021 around 10:30 in the morning for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On 25-MAR-2021, the patient had stroke. The reporter did not know what kind of stroke the patient had. He was not found immediately when he had the stroke and when patient arrived at the hospital he was paralyzed on the left side and was put on the feeding tube and ventilator and moved to hospice after 8 days. On 09-APR-2021, the patient died from stroke. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, Hospitalization Caused / Prolonged).; Sender's Comments: V0: 20210428085-COVID-19 VACCINE AD26.COV2.S -Stroke. This event is considered not related. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event than the drug. Specifically: MEDICAL HISTORY, UNDERLYING DISEASE.; Reported Cause(s) of Death: Stroke

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4/24/2021		1253991			U			DEATH; This spontaneous report received from a consumer concerned two patients unspecified age and sex. This report received via social media.. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration not reported, batch number: Unknown) dose, start therapy date were not reported, 1 total for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. It was reported that two people died recently after the vaccine. The cause of death was unknown. It was unspecified if an autopsy was performed The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: -covid-19 vaccine ad26.cov2.s-death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/24/2021		1254024	MI		M			committed suicide; ringing in his ears; This spontaneous case was reported by a consumer and describes the occurrence of COMPLETED SUICIDE (committed suicide) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. No Medical History information was reported. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced COMPLETED SUICIDE (committed suicide) (seriousness criterion death) and TINNITUS (ringing in his ears). The patient died on an unknown date. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, TINNITUS (ringing in his ears) outcome was unknown. Concomitant medications were not reported; Reported Cause(s) of Death: Unknown cause of death

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4/24/2021		1254028	PA		M			<p>Patient passed away; patient had blood clots in his brain/ Legs/ Lungs/ Arms; Severe hypotension; This spontaneous case was reported by a physician (subsequently medically confirmed) and describes the occurrence of DEATH (Patient passed away), THROMBOSIS (patient had blood clots in his brain/ Legs/ Lungs/ Arms) and HYPOTENSION (Severe hypotension) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On an unknown date, the patient experienced DEATH (Patient passed away) (seriousness criterion death), THROMBOSIS (patient had blood clots in his brain/ Legs/ Lungs/ Arms) (seriousness criterion death) and HYPOTENSION (Severe hypotension) (seriousness criterion death). The cause of death was not reported. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. Treatment information was not provided. Company comment: This case concerns the death of a patient of unknown age and gender after administration of mrna-1273 (J)LOT UNKNOWN). Very limited information regarding this event/s has been provided at this time. Further information has been requested. Critical details such as the mRNA-1273 date of administration, onset of any signs and symptoms, and date of death is lacking.; Sender's Comments: This case concerns the death of a patient of unknown age and gender after administration of mrna-1273 (J)LOT UNKNOWN). Very limited information regarding this event/s has been provided at this time. Further information has been requested. Critical details such as the mRNA-1273 date of administration, onset of any signs and symptoms, and date of death is lacking.; Reported Cause(s) of Death: Unknown cause of death</p>
4/24/2021		1251028	LA	43	M	4/14/2021	4/22/2021	<p>Death by suicide sometime between late evening Wednesday, April 21st, 2021 and early morning April 22nd, 2021. He was found at about 8am that morning.</p>

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4/23/2021	1247315	MS	73	F	4/15/2021	4/16/2021	Death less than 24 hours after vaccine administration
4/23/2021	1246604	LA	33	M	4/6/2021	4/18/2021	Patient presented to ED on 04/18/2021 with cardiopulmonary arrest, per ED "He was receiving CPR with EMS for arrival to the emergency. Two rounds epi. Asystole and then went into V-tach. Got shocked once. Then after that has been strip PA asystole." ED called time of death on patient 04/18/2021 at 05:14AM.
4/23/2021	1245299	OR	87	M	4/9/2021	4/11/2021	Patient developed swelling of his upper and lower lip on 4/11 and was given 25 mg benadryl at the care home. Swelling subsequently worsened and 911 was called, with EMS noting SpO2 at 88%. He was transported to the ER and found to have CHF/pulmonary edema and NSTEMI. Comfort care measures were implemented and he died 4/15.
4/23/2021	1246863	IL	62	F	3/24/2021	4/2/2021	Shortness of breath, blood clot in lungs
4/23/2021	1246956	TX	73	F	4/9/2021	4/10/2021	Stroke and blood clot in right leg.
4/23/2021	1247144		86	M	1/22/2021	1/28/2021	Patient complained of chest heaviness and fatigue at bedtime 6 days after receiving the first dose of the Pfizer COVID vaccine. Patient planned to go to the doctor in the morning, but died while sleeping.
4/23/2021	1247180	MD	50	F	3/17/2021	4/4/2021	Patient passed away suddenly and unexpectedly at home the morning of April 4, 2021. The ER doctor was unable to ascertain a cause. The preliminary autopsy conducted by the medical examiner within 24 hours of death was inconclusive, but I'm told tests of samples are ongoing.

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4/23/2021	1248842	NY	76	M	4/16/2021	4/22/2021	Pt received his 2nd moderna covid vaccine on 4/16/2021. admitted on 4/22/2021 from his long term care facility due to concerns for a chf exacerbation and acute on chronic respiratory failure. Pt was given IV Lasix. chest x ray showed mild pulm vascular congestion. there was no hypoxia, tachycardia and pt was on eliquis so pe was felt to not be a possibility. abg showed acute respiratory acidosis with hypercapnia which improved with bipap administration. His troponins and ekg were negative. vitals on arrival were stable. He was admitted. Labs were otherwise unremarkable. Pt began to have pauses on telemetry and was last seen awake and alert but when nursing staff went back to check on him minutes later he was found deceased
4/23/2021	1247290	CA	62	M	4/10/2021	4/10/2021	He found dead after 2 days he got the vaccine.
4/23/2021	1246223		69	M	3/1/2021	4/16/2021	Hospitalization - comfort measures -acute on chronic combined CHF caused by ischemic cardiomyopathy with Cardiorenal syndrome + acute hypoxic respiratory failure, major decline, failed CABG
4/23/2021	1247318	NE	69	F	4/22/2021	4/23/2021	Death
4/23/2021	1247222	WA	83	F	4/10/2021	4/22/2021	Patient collapsed when being helped out of her son's car. EMS promptly on scene. Patient in PEA and was transported to Hospital, where she died. Was reported to be in usual health before event.
4/23/2021	1246534	NY	39	F	4/9/2021	4/9/2021	Patient felt initially well, but later in that afternoon her arm started hurting and she felt increasingly nauseous and started vomiting at 10:49pm, two hours later she was pronounced dead at approximately 12:30am.
4/23/2021	1246486	VA	53	M	4/22/2021	4/22/2021	Patient reported to onsite health clinic to see nurse at 1930. Complaints of not feeling well. Vomited then dyspnea. Went into cardiac arrest, AED used x1. EMS called at 1945. CPR, intubation until 2055. Time of death 2055.

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4/23/2021	1245370	FL	54	F	3/30/2021	3/30/2021	<p>very tired and sleep 18 hours; passed away; severe flu-like symptoms; chest pain; Soreness at injection site; This spontaneous case was reported by a patient family member or friend and describes the occurrence of DEATH (passed away) in a 54-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 020B21A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Dermatomyositis, Polymyositis, Osteoarthritis, Degenerative bone disease, Osteoporosis, Muscular dystrophy, Rheumatoid arthritis, Immune disorder (NOS) and Raynaud's phenomenon. Concomitant products included MONTELUKAST SODIUM (SINGULAIR) for Asthma, PILOCARPINE for Dry mouth, IRBESARTAN for Hypertension, DILTIAZEM HYDROCHLORIDE (CARDIZEM CD) for Hypertension and Chest pain, SUMATRIPTAN (IMITREX [SUMATRIPTAN]) for Migraine, TIZANIDINE for Muscle spasms, PROCHLORPERAZINE EDISYLATE (COMPAZINE [PROCHLORPERAZINE EDISYLATE]) and ONDANSETRON (ZOFTRAN [ONDANSETRON]) for Nausea, GABAPENTIN (NEURONTIN) for Nerve pain, OXYCODONE for Pain, LEFLUNOMIDE and UPADACITINIB (RINVOQ) for Rheumatoid arthritis, ZOLPIDEM TARTRATE (AMBIEN CR), ACETYLSALICYLIC ACID (BAYER ASPIRIN), LANSOPRAZOLE (PREVACID), DIAZEPAM (VALIUM), CANNABIDIOL (CBD OIL) and IRON (IRON COMPLEX [IRON]) for an unknown indication. On 30-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 30-Mar-2021, the patient experienced VACCINATION SITE PAIN (Soreness at injection site). On 31-Mar-2021, the patient experienced INFLUENZA LIKE ILLNESS (severe flu-like symptoms) and CHEST PAIN (chest pain). On an unknown date, the patient experienced FATIGUE (very tired and sleep 18 hours). On 02-Apr-2021, INFLUENZA LIKE ILLNESS (severe flu-like symptoms), CHEST PAIN (chest pain), FATIGUE (very tired and sleep 18 hours) and VACCINATION SITE PAIN (Soreness at injection site) outcome was unknown. The patient died on 02-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. On 02-APR-2021 at 1: 30 AM mother</p>

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						found her daughter lying on the floor unresponsive. Paramedics and police came to the house. Paramedics tried to revive her and she was pronounced dead at the scene. This is a 54 year-old, female patient who received mRNA-1273 Vaccine) (batch no. 020B21A) and died 3 days after receiving first dose of vaccine and experiencing Influenza like symptoms. Medical hx of several auto immune disorders were provided. Conmeds include Hypertensive and Chest pain meds. The fatal outcome may be related to the patient's pre-existing comorbidities Very limited information has been reported at this time. No further information is expected.; Sender's Comments: This is a 54 year-old, female patient who received mRNA-1273 Vaccine) (batch no. 020B21A) and died 3 days after receiving first dose of vaccine and experiencing Influenza like symptoms. Medical hx of several auto immune disorders were provided. Conmeds include Hypertensive and Chest pain meds. The fatal outcome may be related to the patient's pre-existing comorbidities Very limited information has been reported at this time. No further information is expected.; Reported Cause(s) of Death: Unknown cause of death
4/23/2021	1246256		70 F	4/7/2021	4/12/2021	Hospice Care Sepsis associated hypotension Discharge Diagnoses: acute on chronic hypoxic/hypercapnic resp failure requiring intubation, acute on chronic CHF, severe COPD with likely exacerbation, possible CAP, likely medical non compliance
4/23/2021	1246210		77 F	3/4/2021	4/5/2021	NA Hospitalization for Acute Resp Failure with Hypoxia secondary to acute and chronic CAD
4/23/2021	1246110	GA	67 F	4/2/2021	4/2/2021	Lethargy, weakness, headache; ultimately pronounced on 4/3/2021 at 1310 hours
4/23/2021	1245985		80 M	4/8/2021	4/20/2021	This 80 year old white male received the Covid shot on 4/8/21 and died on 4/18/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.

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4/23/2021	1245485	CA		M			<p>death after 1 dose of vaccine; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (death after 1 dose of vaccine) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed.</p> <p>This spontaneous case was reported by a consumer and describes the occurrence of DEATH (death after 1 dose of vaccine) in a male patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Not Provided</p> <p>The reporter stated that she was not sure of the vaccine name that the patient used.; Sender's Comments: This is a male patient of unknown age, who received mRNA-1273 Vaccine and died on an unknown date after receiving first dose of vaccine. No medical hx or conmeds were provided. The fatal outcome may be related to the patient's pre-existing comorbidities Very limited information has been reported at this time. Further information is expected.; Reported Cause(s) of Death: death after 1 dose of vaccine</p>

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4/23/2021	1245400	TX	57	M		4/14/2021	Death; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a 57-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (Medical history was not reported). On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 14-Apr-2021 The cause of death was not reported. It is unknown if an autopsy was performed. Not Provided Concomitant product use was not provided by the reporter. No treatment information was provided. Very limited information regarding the events has been provided at this time and is insufficient for causality assessment. Further information has been requested. The cause of death was not reported. It is unknown if an autopsy was performed. Action taken with mRNA-1273 in response to the event was not applicable.; Sender's Comments: Very limited information regarding the events has been provided at this time and is insufficient for causality assessment. Further information has been requested. The cause of death was not reported. It is unknown if an autopsy was performed.; Reported Cause(s) of Death: Unknown cause of death

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4/23/2021	1245392	TX		F		4/13/2021	arm was really sore; felt tired; passed away / she was dead; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (passed away / she was dead) in a 71-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included No adverse event (No reported medical history). On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced VACCINATION SITE PAIN (arm was really sore) and FATIGUE (felt tired). The patient died on 13-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, VACCINATION SITE PAIN (arm was really sore) and FATIGUE (felt tired) outcome was unknown. No treatment information was provided. No concomitant medications was provided. Reporter did not allow further contact; Reported Cause(s) of Death: unknown cause of death

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4/23/2021	1245371	MD	95	F	3/10/2021	3/11/2021	irritated her heart condition; Clot blood; weakness in legs, couldnt walk with legs; Coma; couldn't breathe; stroke/massive stroke in left side of her brain; Irritated her heart condition, rapid heart beat; Headache; Tiredness; This spontaneous case was reported by a consumer and describes the occurrence of CEREBROVASCULAR ACCIDENT (stroke/massive stroke in left side of her brain), CARDIAC DISORDER (irritated her heart condition), DYSPNOEA (couldn't breathe), THROMBOSIS (Clot blood), COMA (Coma) and MUSCULAR WEAKNESS (weakness in legs, couldnt walk with legs) in a 95-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for Covid-19 Vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Heart disease, unspecified, Hypertension and AFib. Concomitant products included APIXABAN (ELIQUIS) for Anticoagulant therapy, SACUBITRIL VALSARTAN SODIUM HYDRATE (ENTRESTO) for Hypertension, METOPROLOL for an unknown indication. On 10-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 11-Mar-2021, the patient experienced HEADACHE (Headache) and FATIGUE (Tiredness). On 12-Mar-2021, the patient experienced MUSCULAR WEAKNESS (weakness in legs, couldnt walk with legs) (seriousness criterion hospitalization). On 13-Mar-2021, the patient experienced CARDIAC DISORDER (irritated her heart condition) (seriousness criterion hospitalization), THROMBOSIS (Clot blood) (seriousness criterion hospitalization) and HEART RATE INCREASED (Irritated her heart condition, rapid heart beat). On 15-Mar-2021, the patient experienced CEREBROVASCULAR ACCIDENT (stroke/massive stroke in left side of her brain) (seriousness criteria death and medically significant). On 16-Mar-2021, the patient experienced DYSPNOEA (couldn't breathe) (seriousness criterion hospitalization prolonged) and COMA (Coma) (seriousness criterion hospitalization prolonged). The patient was hospitalized on 13-Mar-2021 due to CARDIAC DISORDER, COMA, DYSPNOEA, MUSCULAR WEAKNESS and THROMBOSIS. The patient died on 17-Mar-2021. The reported cause of death was massive stroke in left side of her brain. It is

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						unknown if an autopsy was performed. At the time of death, CARDIAC DISORDER (irritated her heart condition), DYSPNOEA (couldn't breathe), THROMBOSIS (Clot blood), COMA (Coma), MUSCULAR WEAKNESS (weakness in legs, couldn't walk with legs), HEART RATE INCREASED (Irritated her heart condition, rapid heart beat), HEADACHE (Headache) and FATIGUE (Tiredness) outcome was unknown. Action taken with mRNA-1273 in response to the events was not Applicable. This case concerns an 95 year old female patient, with medical history of A Fib, Heart disease, Hypertension who experienced a serious unexpected event of Death 8 days after receiving 1st dose of mRNA- 1273 . Very limited information regarding these events has been provided at this time. However, the patient's advance age, multiple co-morbidities, may remain as risk factors. Further information is requested. This case was linked to MOD-2021-074814 (Patient Link).; Sender's Comments: This case concerns an 95 year old female patient, with medical history of A Fib, Heart disease, Hypertension who experienced a serious unexpected event of Death 8 days after receiving 1st dose of mRNA- 1273 . Very limited information regarding these events has been provided at this time. However, the patient's advance age, multiple co-morbidities, may remain as risk factors. Further information is requested.; Reported Cause(s) of Death: massive stroke in left side of her brain
4/23/2021	1247401 PA	38 M	4/16/2021	4/16/2021	Patient received Moderna Vaccine on Friday 4/16/2021 12:00pm in dialysis clinic. Over the weekend family called and left a message stating that patient CTB on Friday 4/16/2021 around 8pm.	
4/23/2021	1246484 PA	71 F	4/16/2021	4/16/2021	Patient received her first Moderna dose on 03/12/21 at 1:24pm in the Right Deltoid, Lot# 036A21A, no reaction after 15 min. No reaction was reported 15 min. after her second dose which was in the opposite arm. See was being watched by her family members that evening, family members did not report anything at that time. Her temperature on 4/16/21 was 97.1	

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4/23/2021	1249552	PA	77	F	1/21/2021	1/28/2021	asthma attack (Difficulty to breathe); This spontaneous case was reported by a consumer and describes the occurrence of ASTHMA (asthma attack (Difficulty to breathe)) in a 77-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 012I20A) for COVID-19 vaccination. The patient's past medical history included Hypertension since an unknown date, Diabetes since an unknown date, High cholesterol since an unknown date and Asthma since an unknown date. On 21-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 28-Jan-2021, the patient experienced ASTHMA (asthma attack (Difficulty to breathe)) (seriousness criterion death). The reported cause of death was Asthma. It is unknown if an autopsy was performed. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Unknown), the reporter did not provide any causality assessments. Treatment medications of the patient included Inhaler. Concomitant medications of the patient included high blood pressure medication ,cholesterol medication and diabetes medication not otherwise specified. Very limited information regarding the event has been provided at this time and is insufficient for causality assessment. However, the patient's comorbidities are risk factors and confounds causality assessment. Further information has been requested. Reporter did not allow further contact. Most recent FOLLOW-UP information incorporated above includes: On 20-Apr-2021: It was provided that patient passed away.; Sender's Comments: Very limited information regarding the event has been provided at this time and is insufficient for causality assessment. However, the patient's comorbidities are risk factors and confounds causality assessment. Further information has been requested.; Reported Cause(s) of Death: asthma
4/23/2021	1248554	TX	63	M	3/15/2021	3/29/2021	PATIENT RECEIVED THE VACCINE ON 3/15, HE PASSED AWAY ON 3/29

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4/23/2021	1247465	ND	84	M	4/15/2021	4/22/2021	Patient received vaccine on 4/15/21 2nd dose of 2 dose series. He woke up the morning of 4/22/21 at 6:15am with vomiting. His temperature spiked to 104.2 and his O2 sat dropped to 98%. He developed shaking chills, and a loose wet sounding cough. He had chest xray and labs. Started on treatment for pneumonia with rocephin, zithromax and solumedrol. Declined throughout the day and had increasing requirements for O2 and patient passed away at 1355 on 4/22/21.
4/23/2021	1249652	GA	84	M	2/10/2021	2/12/2021	Patient died in his sleep 2 days after receiving 1st dose; This spontaneous case was reported by a patient family member or friend and describes the occurrence of DEATH (Patient died in his sleep 2 days after receiving 1st dose) in an 84-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 011M20A) for COVID-19 vaccination. No Medical History information was reported. On 10-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) .5 milliliter. Death occurred on 12-Feb-2021 The patient died on 12-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product use was not provided by the reporter. The patient's wife went to wake him up but he was found dead in his sleep. She was hearing impaired and was not able to give any other information. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. This is a case of sudden death in a 84-year-old male, who died 2 days after receiving first dose of vaccine. Very limited information has been provided at this time.; Sender's Comments: This is a case of sudden death in a 84-year-old male, who died 2 days after receiving first dose of vaccine. Very limited information has been provided at this time; Reported Cause(s) of Death: Patient died in his sleep 2 days after receiving 1st dose
4/23/2021	1249616	CA	68	M	3/26/2021	3/26/2021	MY HUSBAND DIED WITHIN 24 HOURS OF RECEIVING THE VACCINE. I WANT TO CONFIRM THAT YOU KNOW ABOUT THIS. PLEASE CALL ME ON MY CELL PHONE , THANK YOU,

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4/23/2021	1249559	NJ		F		4/8/2021	respiratory distress; cardiac arrest; pulmonary embolism; This spontaneous case was reported by a consumer and describes the occurrence of RESPIRATORY DISTRESS (respiratory distress), CARDIAC ARREST (cardiac arrest) and PULMONARY EMBOLISM (pulmonary embolism) in a 76-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. Concurrent medical conditions included Lipid metabolism disorder NOS. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 08-Apr-2021, the patient experienced RESPIRATORY DISTRESS (respiratory distress) (seriousness criterion death), CARDIAC ARREST (cardiac arrest) (seriousness criterion death) and PULMONARY EMBOLISM (pulmonary embolism) (seriousness criterion death). The patient died on 11-Apr-2021. It is unknown if an autopsy was performed. Not Provided For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. NO treatment or Concomitant medication were provided. Company Comment This is a case of sudden death in a 76-year-old female patient with a history of Lipid metabolism disorder, who died (date unknown) of respiratory distress, cardiac arrest and PULMONARY EMBOLISM after receiving first dose of vaccine. Very limited information has been provided at this time.
4/23/2021	1249366	NY	94	F	4/1/2021	4/13/2021	pt received her 2nd pfizer covid 19 vaccination on 4/1/21. she presented to the er on 4/16 with family with c/o 3 days of poor oral intake, diarrhea, weakness and confusion. family reported deterioration over the last 2 weeks. she was initially hemodynamically stable in the ER initially then became bradycardic and hypotensive. oxymask was placed. blood work revealed neutrophilia, anemia, mildly elevated ast and a markedly elevated troponin. she was admitted with non ST elevation MI, acute encephalopathy which ultimately progressed to coma, acute renal failure, progressive thrombocytopenia. cardiology saw her. she was started on a heparin drip. infectious cause for her symptoms was not found. her ef was 40% on echo. she expired on 4/20/2021.

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4/23/2021	1249280	FL		M			HEART ATTACK FROM BLOOD CLOT; This spontaneous report received from a patient via a company representative concerned a Not Hispanic or Latino and Asian male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient experienced heart attack from blood clot and the patient died. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: This is an Asian male, unspecified age, who experienced a heart attack from a blood clot on an unspecified date after receiving the covid-19 vaccine ad26.cov2.s also on an unspecified date. No other details given. The information provided precludes a meaningful medical assessment. Additional information will be requested.; Reported Cause(s) of Death: DEATH

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4/23/2021	1249269			M		4/4/2021	DIED IN SLEEP; This spontaneous report received from a consumer via social media concerned a 42-year-old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, expiry date: unknown) with unknown dose, on unspecified date for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up required for this case. No concomitant medications were reported. On 04-APR-2021, the patient died in his sleep and the cause of death was unknown. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This case was linked to 20210428967 (same reporter) This report was serious (Death).; Sender's Comments: V0:20210429895-COVID-19 VACCINE AD26.COV2.S- Died in sleep. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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4/23/2021		1249260			F		4/14/2021	DIED; This spontaneous report received from a consumer via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On 14-APR-2021, the patient died due to unknown cause. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210429218 - COVID-19 VACCINE AD26.COV2.S- Died. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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4/23/2021	1249255			F			<p>DIED IN SLEEP; This spontaneous report received from a patient via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. Patient had children. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN, expiry: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Company is unable to perform follow-up to confirm batch/lot number. No concomitant medications were reported. On an unspecified date, the patient died in her sleep from an unknown cause of death. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death). This case, from the same reporter is linked to 20210429895.; Sender's Comments: V0: 20210428967-COVID-19 VACCINE AD26.COV2.S- Died in sleep. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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4/23/2021	1249228	FL		F			DEATH; This spontaneous report received from a physician via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, once total, administered on 2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, three days after vaccination, the patient died of unknown cause. It was unknown, whether autopsy was performed or not. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/23/2021	1247832	TN	88	F	2/12/2021	3/8/2021	patient was vaccinated with second covid vaccine on 2/12/21. Patient was admitted to the hospital on 03/04/2021 with fatigue and diagnosed with COVID 19 (positive lab test on 2/26/21 and 3/4/21). Case expired on 3/8/21.
4/23/2021	1247588	IA	71	M	2/7/2021	3/17/2021	Shortness of breath in early March, hospitalized on 3/17/2021, was COVID positive and was found to have pulmonary emboli
4/23/2021	1247741	TN	82	M	3/2/2021	4/12/2021	received second covid vaccine on 3/2/2021. Admitted to hospital on 3/27/21 with shortness of breath and expired on 4/12/2021.
4/23/2021	1249581	TN	74	M	3/19/2021	4/5/2021	Died in sleep. Not sick when he went to bed. Not breathing when found. No sign of puke, blood, urine or BM.

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4/23/2021	1249208	IL		F		4/1/2021	<p>HIGH BLOOD SUGAR; GI BLEED; This spontaneous report received from a consumer concerned a 71 years old female. The patient's height, and weight were not reported. The patient's past medical history included NIDDM (Non-Insulin-Dependent Diabetes Mellitus Diabetes). The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 042A21A, expiry: 21-JUN-2021) dose was not reported, 1 total administered on 05-APR-2021 at left arm for prophylactic vaccination. No concomitant medications were reported. In APR-2021, the patient experienced GI (gastrointestinal) bleed. On an unspecified date, the patient experienced high blood sugar. It was reported that the reporter was not sure if the GI (gastrointestinal) bleed was just coincidence because the patient passed so soon after getting the covid-19 vaccine ad26.cov2.s. The patient had to go to her Doctor to get an unknown shot on the day of or close to the day of the vaccine, probably insulin because the patient had a 475 blood sugar. Laboratory data (dates unspecified) included: Blood sugar abnormal (NR: not provided) 475 mg/dL. On an unspecified date the patient died from GI (gastrointestinal) bleed. Patient was lying there for a while. Patient had been bleeding when it was discovered on 11-APR-2021 that she had expired. Coroner's report said it was from GI (gastrointestinal) bleed. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of GI (gastrointestinal) bleed on an unspecified date, and the outcome of high blood sugar was not reported. This report was serious (Death).; Sender's Comments: covid-19 vaccine ad26.cov2.s-GI bleed. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s). covid-19 vaccine ad26.cov2.s-high blood sugar. This event(s) is considered not related. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event(s) than the drug. Specifically: UNDERLYING DISEASE; Reported Cause(s) of Death: GI BLEEDING</p>

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4/23/2021		1247816	NC	36	F	4/8/2021	4/23/2021	patient called EMS with pain crisis and noted that she had lost vision in both eyes. was transported to Emergency room by EMS and had cardiac arrest and died.
4/23/2021		1247865	TX	66	M	4/4/2021	4/17/2021	One week and 6 days after second vaccine fatal heart attack
4/23/2021		1247898	TN	78	M	2/2/2021	4/8/2021	Patient had second covid 19 vaccine on 2/2/21 at pharmacy. Was admitted on 4/6/21 to hospital with Shortness and Breath, Vomiting, and COVID-19 (tested positive on 4/6/21). Patient expired on 4/8/21 @ 1954.
4/23/2021		1247997	CA	26	M	4/16/2021	4/16/2021	Per his parents, patient started feeling nauseous an hour or two after the vaccine and at night around 10pm it worsened where he felt nauseous, had shivers and he vomited in the middle of the night. He then vomited again the next day and continued to not feel well the next couple of days. On 4/20/2021 at around 4:20pm he called his mother, his girlfriend and his mentor that he was not feeling well, was nauseous and dizzy and had shivers and was going to pull over on his car to get something to drink. He then stopped answering his phone and was found dead in his car later on that day. Police is investigating the case.
4/23/2021		1248051	VA	72	F	4/5/2021	4/12/2021	Patient was admitted with ischemic colitis and hypoglycemia. She also tested positive for C.diff during her hospitalization, unclear if this was from prior antibiotics in March. She did not receive DVT prophylaxis for 2 days. She developed a nonocclusive DVT in the right internal jugular and subclavian veins and a Nonocclusive superficial thrombosis in the right basilic vein on 4/18. She went into PEA and was revived, intubated, and transferred to the ICU. She went into PEA again and was revived after 5 rounds of CPR. The family decided to make the patient comfort care and expired on 4/19

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4/23/2021		1248086	CO	40	M	2/5/2021	4/6/2021	Moderna COVID-19 Vaccine EUA: patient underwent L1-2 corpectomy, pedicle subtraction osteotomy, and extension of fusion from T4 to the pelvis two months after vaccination. During surgery patient became thrombocytopenic and required massive transfusion. Thirteen days after surgery found to have bilateral pulmonary embolisms and deep vein thromboses and placed on anticoagulation. Patient subsequently suffered cardiac arrest and was unable to be resuscitated.
4/23/2021		1248748	IN	72	F	4/9/2021	4/21/2021	Pt in previously good health received J&J vaccine 04/09 and felt well until 04/21 when she developed lower extremity weakness and incoordination which became progressively worse and was accompanied by slurred speech on the afternoon of 04/22. The pt's husband helped her into bed and she apparently died during the night of 04/22-04/23.
4/23/2021		1248862	NC	58	M	3/15/2021	3/16/2021	Patient flew from city to city through another city on Tuesday 3/16/21. He had a reaction on the flight where he coughed for 1.5 hrs and was hot in the airplane. He could not go to work and was required to get Covid tested on 3/18. Still coughing and having trouble sleeping (laying down). Rapid Covid test negative on 3/18. PCR test results negative on 3/21 from hospital. He continued to grow weak and cough from 3/16-3/21. At 3am on 3/22 he called and said that his feet were 2X their size and having difficulty breathing. Taken to hospital via ambulance. When transferred to ER bed, Dr said that he lost pulse. They intubated and got his pulse back. Died at 5:15am. Autopsy said cardiac arrest. Dr said that they could not maintain a heart beat. He asked me if the patient had a history of blood clots? No he did not ever has a blood clot that I know of. He had a chest xray post mortem showing fluid in his lungs from low circulation of blood.

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4/22/2021	1241396		82	M	2/26/2021	3/10/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 81 and brought to the Hospital ER on 3/4/21 w/ a STEMI. He did not recover and later passed away there on 3/10/21. Comorbidities include diabetes, HLD, HTN, cardiac murmur.
4/22/2021	1242079		64	M	3/15/2021	3/22/2021	diarrhea. No fevers. Occasional cough. No loss of taste or smell.
4/22/2021	1241639	PR	82	F	2/24/2021	2/27/2021	Two days after the 2nd dose, the patient presents the following symptoms: 75% oxigenation, 35% Puls, 153 sugar, HBP 64/44 and vomiting.
4/22/2021	1241397		92	M	1/28/2021	4/3/2021	Death Narrative: 91 yr old Arterial ulcer on toe, not surgical candidate, patient opted palliative care, hospice enrolled, Died on hospice service. No vaccine complications reported.
4/22/2021	1240207	CA	49	F	3/18/2021	3/29/2021	Symptoms of tiredness and head sinus pressure came on throughout the day monday 3-29-21. Symptoms were unchanged tues morning 3-30-21. She died Tuesday 3-30-21 between 10:34 am and 12:00 pm. She was found unresponsive at 12:07 pm when husband returned home for lunch. Autopsy results still pending.
4/22/2021	1241399		95	M	1/26/2021	3/9/2021	Death Narrative: 95 yr old Renal failure, renal anemia, Died on Hospice service. No vaccine complications reported.
4/22/2021	1241587	NC	51	F	1/14/2021	1/21/2021	She was a healthcare worker. It was reported to me by her immediate supervisor that she tested positive for COVID-19 the day after her first vaccination. She became symptomatic around January 21, 2021. She was scheduled to return to work on January 29, 2021 but did not come in. She died on February 2, 2021.

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4/22/2021		1242118	NJ	77	F	3/13/2021	3/26/2021	Patient presented after being found down next to toilet found to have COVID-pneumonia and sepsis needing intubation for ARDS and CRRT for hyperkalemia and oliguria. Hospitalization complicated by GIB s/p rectal artery embolization by IR and GNR bacteremia requiring cefepime. Due to worsening hypoxia and shock, patient was made comfort care/hospice by family and passed away on 4/9.
4/22/2021		1241676	PR	90	M	2/26/2021	4/12/2021	The patient was with respiratory difficulties, low pressure and low pulse.
4/22/2021		1241805	AZ	45	M	4/17/2021	4/17/2021	Patient experienced a headache within 4 hours of vaccination. Took recommended dose of Tylenol. 4 hours after that (8 hours after vaccination) he was still experiencing extreme headache and also vomiting and took another dose of Tylenol. Was still feeling poor at 1am but coherent and talking, not thinking that it was serious enough to warrant going to hospital, as he believed it was just a bad headache and the vomiting was from the headache. At 6am, he was found blue/dead in his bed.
4/22/2021		1241873	MI	78	F	4/1/2021	4/6/2021	Patient received her first dose of Pfizer vaccine on 4/1/21. Patient has a stroke 4/6/21 and passed away on 4/10/21.
4/22/2021		1242022	OR	56	M	4/13/2021	4/13/2021	Patient care coordinator on PCP team learned of patient death, as documented: TC to pt family for a welfare ck d/t co-worker mentioned saw in social media pt had passed? PCC-spoke with pt daughter states father passed on 4/18/2021 in the PM unknown exact time of death at home. PCC gave family condolences for their loss. Patient reports father got covid-19 vaccine on 4/13/2021 and he started having severe HA's on this day. Sx increased for the next few days, he had dry cough, sore throat, chest pain, SOB. States father declined for family to called an ambulance while sx were increasing. States ambulance was called on Sunday 4/18/2021 to take body to the morgue. States they are awaiting for autopsy results, and death certificate. States father's body will be taken to his family. On what date did they pass away? 4/18/2021 unknown time, at home Do you know what the cause was? Family is not sure of cause of death

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4/22/2021	1242117	CO	33	M	4/9/2021	4/16/2021	Healthy male, no substance use, no symptoms reported made plans to go hiking with a friend the following Sunday (4/18/21) on 4/16/2021 in afternoon. This was last known contact, patient stopped responding to phone after text and was found deceased in home on 4/22/2021, appearing to have passed away in sleep, likely 4/16/2021 in evening.
4/22/2021	1241395		81	M	2/9/2021	3/15/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 80 and discharged on 2/17/21 with hospice after falling and suffering a subdural hematoma. Patient was likely reaching end of life from metastatic prostate cancer before fall.

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4/22/2021		1241174			F			BRAIN ANEURYSM; SHE STARTED FEELING NAUSEOUS; This spontaneous report received from a consumer via a news report by a company representative concerned a female of unspecified age and ethnicity. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, Expiry: Unknown) dose was not reported, administered on 30-MAR-2021 for prophylactic vaccination. No concomitant medications were reported. The patient started feeling nauseous and was found on the floor unresponsive, and on 01-APR-2021, she was admitted to an area hospital. The reporter stated that the doctor couldn't figure out what was going on, a CT scan was performed and they found bleeding on the brain. It was reported to be massive, and at first that it was thought it was actually two aneurysms, but it was only one. On 09-APR-2021, it was reported that the patient died from brain aneurysm. It is unknown if an autopsy was done. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on 09-APR-2021, and the outcome of she started feeling nauseous was not reported. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: V0 This report concerns an elderly female patient who died due to brain aneurysm, 10 days after receiving Jansen COVID-19 vaccine. Two days after vaccination, the patient started nauseous. She was found on the floor unresponsive and was admitted to the hospital. A CT scan found bleeding on the brain. It was reported "at first that it was thought it was actually two aneurysms, but it was only one." The patient died due to brain aneurysm 10 days after vaccination. Due to the nature of the event (slow development process) and lack of the biological plausibility, the event is considered not related to the COVID-19 vaccine. Additional information has been requested.; Reported Cause(s) of Death: BRAIN ANEURYSM
4/22/2021		1241936	IN	83	F	1/29/2021	2/11/2021	acute respiratory failure 12 days post vaccination, emergency room visit, death of patient.
4/22/2021		1241387	MS	79	M	4/12/2021	4/13/2021	DEATH

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4/22/2021	1243300	AL	66	M	4/6/2021	4/9/2021	Started feeling bad two=three days after shot, became fatigued, lost 15 pounds and could not go to work. On morning of 4/21 was found unresponsive and rushed to hospital where he died 2 hours later
4/22/2021	1240254	CA	70	M	4/5/2021	4/5/2021	Monday night pt. became ill, threw up and had a fever. He went to bed, but around 11 pm he woke up disoriented, unable to walk. Was helped to the bathroom, but was unable to get back to bed on his own. Fell on his bottom. I had to call our son to come pick him up and help him back to bed, unable to hold his own weight.. Had trouble sleeping. Abt 1 pm needed help getting up again, same disorientation, also fell off the toilet and needed help getting back to the bed, unable to hold his own weight. Finally fell asleep. Next day seemed fine enough. Tuesday night, became ill again, went to bed. Got up to go to the bathroom, was wobbly, but able to make it. Was helped back, wobbly but able to walk. Trouble falling asleep, fever, chills. Finally fell asleep at 3 am Wed morning. I had to go to the doctor early, so left him sleeping in bed. When I came back around 11 am, he was still sleeping, snoring loudly. Became concerned. Wouldn't wake up. Called Paramedics. CT scan at the hospital revealed a brain bleed. Transported to hospital. Put on support for almost 2 weeks. No progress, no response. Finally support was discontinued and he died April 19th at 7:52 pm.

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4/22/2021	1240535	PA		M		4/9/2021	HEART ATTACK; This spontaneous report received from a consumer (company representative) concerned a 47 year old male. The patient's height, and weight were not reported. The patient's concurrent conditions included obese. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: unknown) dose was not reported, 1 total administered on 07-APR-2021 for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up would be requested for this case. No concomitant medications were reported. On 09-APR-2021, the patient died from heart attack. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: 20210423780 -covid-19 vaccine ad26.cov2.s-heart attack. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: HEART ATTACK

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4/22/2021	1240574			F		4/8/2021	DEATH; This spontaneous report received from a consumer concerned a female of unspecified age and unknown race and ethnicity. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN) dose was not reported, administered on 05-APR-2021 for prophylactic vaccination. The batch number was not reported, the company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On 08-APR-2021, after 3 days of vaccination the patient died due to unknown cause. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: This is a spontaneous report of a female of unspecified age who died 3 days following the administration of the Janssen COVID-19 vaccine. Cause of death, details surrounding the death, the patient's medical history and concomitant medications were not reported. There are insufficient details to make a meaningful medical assessment at this time.; Reported Cause(s) of Death: UNKNOWN CASE OF DEATH

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4/22/2021	1241246	MS		F		4/1/2021	<p>PARALYZED LEFT SIDE OF THE BODY; DEATH; This spontaneous report received from a health care professional concerned a 29 year old female. Initial information received on 16-APR-2021, processed along with information received via telephone communication on 20-APR-2021. The patient's weight was estimated about 200 pounds (reported as overweight but healthy). The patient's height and medical history were not reported. The patient had a baby in JAN-2021 and had a epidural at the time of birth. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN) dose, start therapy date were not reported, 1 total for prophylactic vaccination. The vaccination site was not reported. No concomitant medications were reported. The reporter, which is a health care professional, reported that the patient's (the reporter's cousin) death cause could be JANSSEN COVID-19 vaccine. The reporter said that the patient was fine without symptoms for one week after her scheduled vaccine. As per the reporter, the patient received the JANSSEN COVID-19 vaccine approximately 2 weeks ago (the patient was scheduled and her family assumed she went and received the vaccine). The reporter said that one week after the vaccine date the patient went to get her hair done, and when the patient sat on the chair, she suddenly could not move her left side. Ambulance/emergency room was called and the patient was taken to the hospital. The patient was in the hospital about a week and then passed away. An autopsy was performed but results were pending. The reporter had no details regarding imaging studies or laboratory values (platelet counts, D-dimer or fibrinogen), and does not know anything about the hospital course. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on 16-APR-2021, and the outcome of paralyzed left side of the body was not reported. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: V0: This is a spontaneous report of a 29-year-old female who developed sudden hemiplegia approximately one week after receiving the Janssen COVID-19 vaccine, was hospitalized and died one week later. The patient had a history of being overweight, and was approximately 3 months post-partum. No medical</p>

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						history or concomitant medications were reported. The hospital details and cause of death were not provided. There are insufficient details to make a meaningful medical assessment at this time. Additional information has been requested. The case will be assessed further when additional information is received.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/22/2021	1241384		97	M	2/23/2021	3/27/2021 Death Narrative: Patient was 96 yr old, prostate cancer, peg tube placed, Died on Hospice service, No vaccine complication reported.
4/22/2021	1241383		81	M	2/25/2021	3/4/2021 Death Narrative: 80 yr old metastatic lung cancer, had stopped eating, still wanted vaccine, Died on hospice service. no vaccine complications reported.
4/22/2021	1241386		86	M	1/22/2021	3/18/2021 EXPIRED Narrative: 86 y/o male who received first dose of COVID-19 vaccine (Moderna) 1/22/21 and never returned for second dose. COVID-19 clinic alerted the pharmacist that patient expired prior to receiving second dose. Unknown reason.
4/22/2021	1241394		91	M	2/11/2021	2/24/2021 Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 90 but not receiving frequent care from facility and circumstances regarding his cause of death not certain. His comorbidities include advanced age, afib, cardiac pacemaker, HTN, Barrett's esophagus, HTN, and hypothyroidism.

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4/22/2021		1241388		77	M	2/11/2021	2/28/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 76 and presented to the ER on 2/20/21 with altered mental status, weakness, and persistent diarrhea after just being discharged previous week for bacteremia. Hospital progression included a GI bleed requiring blood transfusions, esophageal varices, and unrecoverable mental status. Care was transitioned to hospice where he passed on 2/28/21. Comorbidities include cirrhosis, CKD, DM, pancytopenia, frequent paracentesis for ascites.
4/22/2021		1241389		66	M	2/11/2021	3/24/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient presented to the ER on 3/8/21 after being sick the prior 2 weeks with loose, bloody/tarry stools, frequent falls, and hypotension. Hospital course progressed to worsening encephalopathy secondary to decompensated alcoholic cirrhosis. Developed pneumonia that did not improve with antibiotics and progressed to palliative care with him passing away on 3/24/21. Comorbidities include COPD, alcoholism, Takotsubo cardiomyopathy, HTN, cirrhosis, HLD, former smoker.
4/22/2021		1241390		94	F	1/22/2021	3/9/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 94 and receiving hospice care for end life care in the months leading up to his passing on 3/9/21. In addition to his advanced age, the patient had chronic afib on anticoagulation, hypothyroidism, HTN, HLD, COPD, depression, and increasing cognitive and memory issues towards the end of his life.

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4/22/2021	1241391		87	M	2/10/2021	3/7/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 86 but did not have a lot of history of receiving medical care in the system. There is note mentioned his death in the chart. His possible contributing comorbidities are advanced age, HTN, HLD, DM, mitral valve insufficiency.
4/22/2021	1241392		78	M	2/8/2021	2/16/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. No notes detailing the circumstances the death of the patient. Patient had issues controlling his blood pressure in the prior 6 months with an average BP of 150/68 and systolic blood pressure readings >200 at times, Other comorbidities include anemia, DM2, Afib on pradaxa, cardiac pacemaker, and HLD.
4/22/2021	1241393		87	M	1/14/2021	2/5/2021	Death Narrative: The patient did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. Patient transported to ER on 1/14/21 after receiving first COVID-19 vaccine earlier that day. He was reported to have a reaction to the vaccine including diaphoresis, new onset afib, and hypotension(vasovagal reaction). He was discharged the next day with no signs of afib. Patient was later hospitalized around 1/28/21 for COVID pneumonia. He later passed away on 2/5/21 due to hypoxic respiratory failure secondary to COVID-19. Comorbidities include advanced age, obesity, HLD, atherosclerosis, DM2, HTN.

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4/22/2021	1241385		95	M		4/15/2021	Death Narrative: 4/12 patient had fatigue/dyspnea -Per NP visit/note: "-" reviewed with office/clinic team MD on phone, clinically does not appear to have fluid overload, has chronic LE edema which is no worse than usual, could be pneumonia possible aspiration related to dyphagia. patient does not want to go to hospital for evaluation and treatment. Spoke with patient's daughter, confirms DNR and LST wishes, no hospitalization, no cpr/ventilation/feeding tubes. She is agreeable to treating with low dose diuretic and antibiotic in effort to help symptoms. She is agreeable to hospice consult. -cipro 250 mg po bid x 7 days, furosemide 10 mg qday and kcl 10 meq x7 days called into pharmacy. caregiver to pick up today. reviewed s/e and precautions with meds in addition to indications - caregiver encouraged to keep patient upright in chair or bed for easier breathing. ~~
4/22/2021	1243715	VT	63	F	3/13/2021	3/24/2021	Report received from co-worker of patient. Patient received J&J vaccine on 3/13/21. Patient was at work and collapsed 11 days after vaccination. Was intubated at work site and taken to local hospital - the patient was then airlifted to a Medcial Center. Diagnosed with a brain bleed and subsequently died on 4/6/21.
4/22/2021	1243461	NC	62	M	3/20/2021	3/25/2021	My father passed away on the 5th day and was in pretty good health.
4/22/2021	1243487	MI	17	M	4/13/2021	4/21/2021	Patient Committed Suicide with a firearm.
4/22/2021	1243574	KY	93	M	2/9/2021	3/25/2021	Cause of death is believed to be a fatal arrhythmia resulting from advanced old age and aggravated by sepsis due to COVID-19 infection along with gastroenteritis. The death was natural and not unexpected. Tobacco is not believed to have contributed to t
4/22/2021	1243588	WI	57	M	4/16/2021	4/18/2021	not sure if related, but he passed away on 4/18/2021
4/22/2021	1243596	MN	65	M	3/24/2021	4/7/2021	Called to verify coming in for second dose on 4/21/21, family member confirmed death a few weeks ago (a few weeks after first covid dose). Cause of death unknown

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4/22/2021	1243360	WI	66	M	3/26/2021	3/27/2021	Patient received first Moderna Vaccine on 02/26/2021 and second Moderna Vaccine on 03/26/2021. Health Department was notified of patients death on 03/27/2021, today 04/22/2021. Any further information is unknown by the health department for patients cause of death that occurred on 03/27/2021.
4/22/2021	1243650	IL	37	M	4/19/2021	4/20/2021	Unexpected death; found unresponsive 04/20/21 morning and pronounced dead after unsuccessful resuscitative efforts
4/22/2021	1244814	KS	70	F	3/19/2021	4/14/2021	Dizziness off and on for 2 weeks along with muscle weakness and developed a cough about a week after this injection. My mother passed away.
4/22/2021	1243791	VA	21	M	4/10/2021	4/12/2021	Per the father, the deceased received his first shot of Moderna vaccine on Saturday, 4/10/2021 at a local church. He did not work on 4/11/2021. Worked on 4/12/2021. The deceased was found dead at 6:43 p.m. at his home.

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4/22/2021		1243832	NC	27	F	3/8/2021	3/8/2021	4.21.2021- I spoke with (patient's husband) related to spouse. Husband stated the patient has a history of 2nd Degree Type 2 heart block, pacemaker placed at the age of 14, and she currently has issues with an eating disorder dx with anorexia. Patient is reported to be approximately 68-70 pounds at the time of vaccination. March 8.2021- Husband states he and his wife came to receive the vaccine around 1630. After, receiving the vaccine the patient stated to her Husband "my arm really hurts." She begin experiencing s/s at approximately 1900 including: fever, chills, runny nose, fatigued and tired - reportedly temperature was 100.0 and the patient began to drink Gatorade and take Tylenol. Monday, 3.15.2021 patient continued to have symptoms therefore, (husband) contacted Moderna Representatives from the safety team, to determine if it would be safe for the patient to get the 2nd vaccine dose - advised everyone that does not have contraindications should be vaccinated-advised to reach out to PCP. Husband stated that the patient did not want to go to her PCP because of her eating disorder. The patient worked from bed during the week per the husband and spent 90-95% of her time in the bed after receiving the vaccine. Husband states on Saturday 3.20.2021 the patients fever had subsided however, she continued to feel poorly and remained bedbound most of the time. Husband is an Pilot 3.23.2021 stated once, he had landed he began trying to contact wife but she was not answering the phone, after several attempts to contact wife - Husband called a neighbor to check on wife. Upon, entering the residence the neighbor found wife lying on the floor unconscious and not breathing. The neighbor notified Husband and called 911. EMS arrived at the scene and pronounced the patient as a DOA. Husband states that the death certification list cardiac arrest, electrolyte imbalance, and heart block, as causes for death. Husband is concerned that the vaccine may have contributed in some way demise of his wife as he stated "she was never the same after the vaccination.~~

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4/22/2021	1244303	FL	76	M	3/30/2021	4/1/2021	Flu like symptoms, diarrhea, vomiting, weakness, no appetite and trouble drinking fluids for the first several days. Took him to the hospital due to concern over dehydration and not eating, but still having daily diarrhea. ER doc said that the electrolytes were fine and heart was ok, so, no reason to keep in hospital. That night he was I not able to get out of bed or even sit up. Monday called primary care doctor and decided to call hospice for more help. They provided 24/7 monitoring and care for several days. He just got worse every day until he died Tuesday early morning at about 1:10am at home.
4/22/2021	1244990	AZ	38	M	3/19/2021	3/19/2021	After receiving the second dose of the vaccine, my husband experienced left arm pain which he thought was from the injection. About a week later, the pain got worse and moved toward his chest. It got so bad, he had to be taken by ambulance to the hospital to find out he had been having a heart attack. He spent nearly three weeks in the hospital before he died on 4/15/21
4/22/2021	1242160	NY	78	M	4/1/2021	4/1/2021	CALLED TO TRANSFER PATIENT FROM 2C ADMITTING AREA TO ENDOSCOPY UNIT AROUND 1410. UPON ARRIVAL IN 2C TO TRANSFER PATIENT, PATIENT WAS ALERT AND RESPONSIVE TO NAME. WHEN WHEELED TO BEDSIDE IN ENDOSCOPY UNIT PATIENTS RIGHT ARM SLUMPED AND HE BECAME UNRESPONSIVE. RAPID RESPONSE CALLED. PATIENT TRANSFERRED TO STRETCHER, CODE BLUE CALLED, AND CPR STARTED. DR. ANESTHESIA AT BEDSIDE MANAGING AIRWAY. CODE TEAM RESPONDED. REFER TO ARREST RECORD.
4/22/2021	1243053	MN	89	M	2/16/2021	4/19/2021	Patient was hospitalized x 2 and died within 60 days of receiving a COVID vaccine
4/22/2021	1243648	NY	32	M	4/7/2021	4/8/2021	headache on 4/8/21, sudden death 4/11/2021

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4/22/2021	1242520	KS	35	F	3/10/2021	4/17/2021	35 y/o with asthma (on alvesco and singulair), GERD, morbid obesity (BMI 45) and RA (on prednisone and MTX, SZA.) Vaccinated for COVID 2.12. and 3.10 Recent lab 3/17- normal, including negative CRP. Code continued for 50 minutes, no shock advised. PEA, gave Epi X 4. Normal BS. Considered narcan. Over the weekend- 4/17 Chest pain that started with eating. Labile blood pressure. EKG showed NSR rate 64. Treated with ASA 325, clear liquid diet and rest. Treated with toradol and Zofran. Improved. At f/u on Monday, discussed chronic knee pain was overall better. Normal for her exam. BP 136/79. Felt dizzy and then passed out, hitting her head, became pulseless an apneic and was coded for over an hour.
4/22/2021	1245000	SD	71	M	3/10/2021	3/30/2021	Blood clots in the lungs, pulmonary embolism
4/22/2021	1243358	MN	82	M	3/9/2021	4/7/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine
4/22/2021	1242205	GA	81	F	3/28/2021	4/1/2021	8 days after the 2nd Pfizer shot sudden vomiting including blood and then collapse and died. No other symptoms of sickness leading up to this.
4/22/2021	1242376	MN	63	M	4/10/2021	4/13/2021	Vaccine on 04/10/21.Shortness of breath, dizziness, nausea 04/13/2021. Death on at hospital on 04/14/2021 Autopsy found Bilateral pulmonary thromboembolus
4/22/2021	1242573	CO	15	M	4/18/2021	4/19/2021	Heart failure
4/22/2021	1242582	OH	60	M	4/10/2021	4/10/2021	Pfizer-BioNTech COVID-19 Vaccine EUA Pt presented to ED on 4/10/21 @0523 with c/o SOB, F/C and cough. Admitted to ICU with acute hypoxic respiratory failure on BiPAP, non-STEMI, acute decompensated heart failure, acute kidney injury and suspected severe sepsis. Reportedly received 2nd dose of COVID-19 vaccine 2 days prior. Shortly after admit, pt developed worsening respiratory status requiring intubation @1045. Pt with continued hypoxemia despite 100% FiO2 and PEEP of 15. Pt experienced cardiac arrest with PEA @1100 with return of spontaneous circulation. Repeat arrest with PEA@1135 with return of spontaneous circulation. Family decision to change code status to DNR CCA, repeat arrest- time of death 1203.

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4/22/2021		1242654		81	M	2/9/2021	3/18/2021	NA Comfort Cares-acute hypoxic respiratory failure in the setting of bilateral pulmonary extensive infiltrates due to ARDS, pneumonia and possible component of CHF exacerbation. Non-ST elevation myocardial infarction.
4/22/2021		1242660	NJ	94	M	4/14/2021	4/21/2021	Patient has a long standing chronic history of CHF which he was recently hospitalized for, returning from an overnight stay at the hospital as a DNR/DNH/DNI.
4/22/2021		1243311	PA	68	F	4/19/2021	4/19/2021	PER hospital note: Patient received Covid-19 vaccine on Monday (4/19/21), since then has been feeling fatigued. Per patients husband she was difficult to arouse this morning (4/21/21) and ultimately unresponsive. Patient was transported to hospital via EMS (4/21/21)where she expired a short time later.
4/22/2021		1242858	NC	77	F	1/7/2021	4/19/2021	Patient contracted COVID 19 and subsequently expired from respiratory distress, following completion of the serious of two vaccination shots. She received her Moderna vaccinations on 1/7/21 and 2/4/21. I do not have access to the lot # info- would have to contact vaccination site to obtain
4/22/2021		1242906	OH	44	M	4/14/2021	4/19/2021	Pharmacy was contacted by an aunt, who is also a healthcare provider. This contact was requested by the family. Per nurse practitioner who is the aunt of the deceased), patient passed away on Monday, 4/19/2021. He was found unresponsive on a jogging trail, where he had been jogging, by a third party person. They had called an ambulance and could not revive him. Family requested a VAERS report due to the proximity in time to his 2nd Pfizer vaccination. He had received his vaccination at 9:56am on 4/14/21 (lot ER8730) and per father the only side effect he indicated was a sore arm. Autopsy pending per family.
4/22/2021		1242950	MI	65	M	4/22/2021	4/22/2021	Receiver of vaccine was reported dead on 04-22-2021 TOD 0809 to Medical Examiner's Office Report # 052-EMF-79-21
4/22/2021		1243206	WI	90	F	3/7/2021	4/7/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/22/2021		1243301	MN	88	F	2/18/2021	3/2/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series

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4/22/2021	1242850	CO	80	M	3/5/2021	3/6/2021	Received #2 Moderna on 3/5/2021. Started to not feel well the next day. By 3/9/2021, he was too sick to get out of bed. Friends stayed with him the previous night and opted to call 911 for hospital transport on 3/9. He was admitted to a Medical Center and diagnosed with pneumonia. He died on 3/18/2021 in patient.
4/22/2021	1243346	MT	90	M	3/17/2021	3/21/2021	Pt received vaccine on 03/17/2021. Pt's wife stated that pt never felt well after receiving the vaccine. Per hospital notes, pt lost his balance and fell at home approximately 12 hours prior to admission. By report, he laid on the floor for around 12 hours before emergency services were activated and he was brought to the ED. Primary diagnosis was a closed left hip fracture with other hospital problems of the fall at home, bradycardia, coronary artery disease, hypokalemia, protein calorie malnutrition, type 2 myocardial infarction and essential hypertension.
4/21/2021	1237092	MI	32	M	4/10/2021	4/14/2021	Massive pulmonary thromboemboli
4/21/2021	1237104	TN	65	M	4/20/2021	4/21/2021	Pt received vaccine on 4/20/21 at 1:00pm, observed 30 mins post injection with no adverse reaction noted. Pt collapsed at home early morning on 4/21 & transported to ED via ambulance where he later expired.
4/21/2021	1237427	NC	57	F	3/25/2021	3/26/2021	Arm soreness 1-3 days post vaccine flu like symptoms 4-7 days post vaccine Severe back pain 4-10 days post vaccine Death 11 days post vaccine
4/21/2021	1237434	NY	73	F	4/1/2021	4/6/2021	Patient discovered down and unresponsive with immediate declaration of death. Pronounced dead 4/6/2021 11:45 PM
4/21/2021	1237478	TX	64	F	4/6/2021	4/6/2021	6-8 hours following the vaccine, the patient developed a severe head ache, SOB and fatigue. Patient took an unknown OTC medication, this did not help her symptoms. Her headache receded on 04/08, and her symptoms improved, but never fully resolved (per patient's son).

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4/21/2021	1237511	NY	68	M	4/18/2021	4/18/2021	Patient brought in by ambulance after cardiac arrest witnessed by patient's wife at 4/19/21 1:37AM. Per ED, the wife reports he had complained of feeling weak over the last few days without clear reason, then this morning patient had episode of emesis after which he told wife to call 911 and then suddenly became unresponsive. In ED was intubated, started on hypothermia protocol, Patient sedated on Propofol and started on a heparin drip, clopidogrel, aspirin and empiric antibiotics for aspiration Pneumonia
4/21/2021	1237530	MN	91	F	3/30/2021	3/30/2021	Mom was feeling fine the day of the vaccine. Last spoke with her at 6:30 PM and she said she wasn't feeling anything but would go to bed early. I said OK I will check on you in the morning. She never woke up!
4/21/2021	1237709	IA	26	M	4/19/2021	4/20/2021	Patient deceased
4/21/2021	1237672	CT	84	M	2/10/2021	4/13/2021	Presents with dyspnea for a few days. Pt was tested positive for COVID 19 one wk ago (outside health system). Pt also c/o L arm numbness. Pt denied f/c, CP, n/v/d, abd pain, HA, syncope. In ED, Pt was found to have hypoxic O2 sat at 89% and was put 2L NC. Pt got loading dose of ASA and dexamethasone (7 day course), completed 5 day course of remdesivir and received tocilizumab due to increased oxygen requirements. Pt also has mildly elevated troponin and cardiology was consulted in ED. St elevation noted 4/20 AM, heparin bolus given for acute coronary syndrome and ticagrelor LD. Left heart cath on 4/20/21 showed 3 vessel disease but due to difficulty revascularizing LAD in setting of worsening K+, Bicarb, S no further revasc attempts were made. Upon return to MICU, pt found to be hypotensive and bradycardic. PEA arrest. Family contacted during code and in agreement to transition to comfort measures.
4/21/2021	1237704	MT		F	3/10/2021	3/25/2021	Death, blood clots in liver
4/21/2021	1237089	IA	85	M	2/3/2021	2/4/2021	Father received 2nd vaccine and died two days later of heart failure. Was not in critical condition prior to the vaccine.

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4/21/2021	1235817	WA	74	F	4/1/2021	4/5/2021	My mother passed away/death cause: natural causes; This is a spontaneous report from a contactable consumer for patient (reporter's mother). A 74-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) at age of 74 years old, via an unspecified route of administration, administered in Arm Left on 01Apr2021 11:15 (Batch/Lot number was not reported) at single dose for covid-19 immunisation. Medical history included Stage 4 metastatic lung cancer, Diabetes type 2, Hypertension. Other medications in two weeks was Yes, while unspecified. The reporter reported that my mother passed away/death cause: natural causes on 05Apr2021 07:00. 4 days after receiving this vaccine. No treatment received. An autopsy was not performed. The patient was not diagnosed with COVID-19 prior to vaccination, and Since the vaccination, the patient has not been tested for COVID-19. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Information on batch/lot number has been requested.; Reported Cause(s) of Death: My mother passed away/death cause: natural causes
4/21/2021	1237860		78	M	2/26/2021	2/27/2021	This 78 year old male received the Covid shot on 2/26/2021 and died the next day on 2/27/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1237540	MI	65	F	3/27/2021	4/10/2021	Pt presented to ED w/SOB, fever, cough, sore throat, headache, chest congestion, generalized weakness, & fatigue that had started 4/4/21 and diagnosed w/COVID-19 (4/10/21). She had just received 2nd vaccine (3/27/21), but had been exposed to COVID-19 the following day from a relative. She was discharged w/dexamethasone and pulse oximeter. Symptoms had continued to worsen and returned to ED where she was admitted for acute hypoxemic respiratory failure and tachycardia secondary to COVID pneumonia requiring steroids, remdesivir, oxygen, but unfortunately succumbed to her illness (4/18/21) given condition critical and prognosis poor.
4/21/2021	1237069	KY	65	F	3/18/2021	4/2/2021	Spouse reported that patient was taken to The Hospital after unresponsive in the home on 4/2/2021. States was told that cause of death was heart failure.

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4/21/2021	1236916	NJ	66	M	4/12/2021	4/16/2021	On 4/16 at around 10:24AM, patient presented to emergency department via EMS status post a witnessed cardiac arrest. After the witnessed cardiac arrest, EMS was called and reported that the patient was unresponsive. Per EMS, patient was immediately intubated and chest compressions started. EMS reports an initial cardiac rhythm of VFib and shocked patient once. Patient was given 3 epinephrine and brought into the ED. After prolonged CPR and resuscitation for more than hour and a half, the patient was made DNR/DNI and was pronounced dead at 11:45AM.
4/21/2021	1236785	OH	77	M	4/16/2021	4/17/2021	Resident found unresponsive and without vital signs the morning on April 17, 2021 at 6:35am. The nurse started CPR, called a code, 911 called, AED applied. Local EMS responded, took over the code. EMS had contact with the local hospital ER, code called at the facility. Resident expired.
4/21/2021	1235915	NY	63	M	4/18/2021	4/19/2021	My father complained of soreness and body aches from the shot Sunday night to my mom and Monday morning to his boss at work. My sister found him that afternoon in my parent's home unresponsive and call proceeded to call 911 and start CPR. But it was to late and he was already gone.

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4/21/2021	1235832	NH		F	3/26/2021		wound up in the ER with hypoxia and sepsis; wound up in the ER with hypoxia and sepsis; shortness of breath; increased confusion; This is a spontaneous report from a contactable Nurse. A female patient of an unspecified age received first dose of bnt162b2 (BNT162B2), via an unspecified route of administration on 26Mar2021 (Lot Number: EL9269; Expiration Date: 01May2021) as single dose for Covid-19 immunisation. The patient medical history was not reported. The patient's concomitant medications were not reported. It was reported that the female patient who we sent out with shortness of breath and increased confusion, she wound up in the ER (emergency room) with hypoxia and sepsis and she passed away. The events were serious as hospitalization and death. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Sender's Comments: Based on the limited available information, the Company considered there was not a reasonable possibility that the reported events were related to the suspect product BNT162B2 (COMIRNATY). 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: increased confusion; shortness of breath; wound up in the ER with hypoxia and sepsis; wound up in the ER with hypoxia and sepsis

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4/21/2021	1235830	SC		M			died about a month ago; two weeks after testing positive for the virus; two weeks after testing positive for the virus; This is a spontaneous report from a non-contactable consumer. An 80-years-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unspecified date at SINGLE DOSE for covid-19 immunisation. Medical history included pre-diabetes and atrial fibrillation (Underlying health issues). The patient's concomitant medications were not reported. The patient previously received first dose of bnt162b2 on an unspecified date at SINGLE DOSE for covid-19 immunisation. The patient died about a month ago, two weeks after testing positive for the virus. The death occurred about four weeks after the second dose of the Pfizer/BNT vaccine. The patient died on an unspecified date. 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: Deceased

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4/21/2021	1235829	HI	69	M	3/5/2021	3/6/2021	Drowning; He didn't feel well; This is a spontaneous report from a contactable consumer (patient's wife). A 69-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) dose 1 via an unspecified route of administration administered in left arm on 05Mar2021 13:00 (Lot Number: En6198) as single dose for COVID-19 immunisation. Medical history included hypertensive cardio disease, remote myocardial infraction. No COVID prior vaccination. No known allergies. No COVID was tested post vaccination. There were no concomitant medications. No other vaccine was received in four weeks. The patient didn't feel well Saturday on 06Mar2021 12:00 AM, went surfing Sunday morning on 07Mar2021 as usual for the last 60 yrs. He was in excellent shape and surfed every day. At about 7am the reporter received a phone call that the patient had been pulled from the water unresponsive. But what the reporter didn't understand was he had his arm over his board. But his face was in the water. The reporter realize he drowned but something happened before that. The events resulted in Emergency room/department or urgent care. It was unknown if patient received treatment for events. The patient died on 07Mar2021. An autopsy was performed that revealed drowning. The outcome of event didn't feel well was unknown.; Reported Cause(s) of Death: Drowning; Autopsy-determined Cause(s) of Death: Drowning

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4/21/2021	1235822	NY	49	F	3/29/2021	3/1/2021	microangiopathic hemolytic anemia; thrombocytopenia; severe hyperbilirubinemia/cholestasis with coagulopathy; severe hyperbilirubinemia/cholestasis with coagulopathy; severe hyperbilirubinemia/cholestasis with coagulopathy; thrombotic microangiopathy; jaundice; nausea; vomiting; diarrhea; This is a spontaneous report from a contactable physician. A 49-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 intramuscular, administered in Arm Left on 29Mar2021 13:45 (Batch/Lot Number: ER8733) as single dose for covid-19 immunisation. Patient was not pregnant. The COVID-19 vaccine was administered at Doctor's office/urgent care. Medical history included Metastatic breast cancer. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant Therapy included Clinical trial oral drug - ARV-471 on 22Mar2021. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. Patient presented to the hospital on 05Apr2021 complaint of (c/o) 1 week of jaundice, nausea, vomiting, and diarrhea, which started on an unknown date in Mar2021, and on 05Apr2021 found to have evidence of microangiopathic hemolytic anemia, thrombocytopenia, and severe hyperbilirubinemia/cholestasis with coagulopathy. Work-up revealed like thrombotic microangiopathy although etiology unclear. ADAMTS13 level 29 with no inhibitor not suggestive of Thrombotic thrombocytopenic purpura (TTP). Patient eventually died of this acute presentation. She also had a history of metastatic breast cancer and had also just started taking a phase 1/2 oral clinical trial drug ARV-471 on 22Mar2021. Unclear if the drug, COVID vaccine, or breast cancer may have contributed to current illness. Adverse event resulted in: Doctor or other healthcare professional office/clinic visit, Emergency room/department or urgent care, Hospitalization, Prolongation of existing hospitalization (vaccine received during existing hospitalization), Life threatening illness (immediate risk of death from the event), Patient died. Patient hospitalized for 5 days. Date of Death was on 09Apr2021. Death cause: Death certificate stated metastatic breast cancer. No autopsy performed. Therapeutic measures were taken as a result of events included plasmapheresis, steroids, antibiotics. The patient underwent lab tests and procedures which included Nasal Swab: negative on 05Apr2021. The

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outcome of the events was fatal.; Sender's Comments: Based on temporal association and the limited information available, the causal association between BNT162B2 vaccine and the 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 RAs, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: severe hyperbilirubinemia/cholestasis with coagulopathy; jaundice; nausea; vomiting; diarrhea; microangiopathic hemolytic anemia; thrombocytopenia; severe hyperbilirubinemia/cholestasis with coagulopathy; severe hyperbilirubinemia/cholestasis with co

4/21/2021 1235815 FL

53 M

3/11/2021

3/25/2021 stroke; Brain bleed; Brain blood clot; This is a spontaneous report from a contactable consumer via a Pfizer sponsored program named Corporate (Pfizer) Social Media Platforms. A 53-years-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration, administered in Arm Left on 11Mar2021 13:15 as single dose for covid-19 immunisation. Medical history reported as none. The patient's concomitant medications were not reported. The patient experienced brain blood clot on 25Mar2021 08:00 , stroke and brain bleed on an unspecified date. The patient was hospitalized for brain blood clot, stroke, brain bleed for 7 days. Therapeutic measures were taken as a result of brain blood clot, stroke, brain bleed included Ventilator. The patient died on 02Apr2021. An autopsy was not performed. The outcome of events was fatal. No other vaccine in four weeks; No covid prior vaccination. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Brain blood clot; stroke; Brain bleed

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4/21/2021		1235811	DC	52	F	3/12/2021	4/4/2021	COVID pneumonia; Hematological; bleeding; having hemoxysis; slight troponin increase; GI bleed; headaches; COVID-19 test was positive; COVID-19 test was positive; nauseous; abdominal discomfort; body aches; This is a spontaneous report from a contactable physician. A 52-year-old female patient received her first dose of BNT162B2(PFIZER-BIONTECH COVID-19 VACCINE, Batch/Lot number was not reported), via an unspecified route of administration at the age 52-year-old on 12Mar2021 at single dose for COVID-19 immunisation. Medical history included hemodialysis for many years, adherent to medical care, multiple DVTs and Pes (On anticoagulants), morbid obesity, Patient was on dialysis for renal failure and had lupus anticoagulant (positive), Afib, allergic to shellfish. Family history included renal failure and had lupus anticoagulant. Concomitant medications included warfarin sodium (COUMADIN); metoprolol; amitriptyline; calcitriol; ergocalciferol (VIT D); calcium; calcium acetate (PHOSLO); amiodarone; albuterol. The patient previously allergic to Cipro, clindamycin, doxycyclin, Lyrica, tetracycline. The patient previously was non-responder to hepatitis B vaccine. The patient previously received first dose of BNT162B2(PFIZER-BIONTECH COVID-19 VACCINE) on 17Feb2021 for COVID-19 immunisation. The patient hasn't been treated with immunomodulating or immunosuppressing medications or received any other vaccines around the time of COVID-19 vaccination. The patient wasn't smoker/ former smoker. There was no any other vaccinations within four weeks prior to the first administration date of the suspect vaccine. A nephrologist who reported patient in her hemodialysis unit who were vaccinated with BNT162b2 but were recently diagnosed with COVID-19. More detail is below on each patient. The patient COVID results were sent to the local health department for genetic sequencing (pending) and SARS titers were drawn (pending). Unfortunately, the HD unit does not have B/L information (although the B/L # was put on the patient's COVID vaccine cards, a record was not kept in the HD unit). Day she came in for dialysis she was already short of breath she said she'd had body aches for 5 days, got short of breath on 05Apr2021. The day before, started getting cough, nauseous, chills, abdominal discomfort on 04Apr2021. The patient was sent to the ER from dialysis

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and was admitted for SOB on 05Apr2021 and passed away on 09Apr2021 due to a GI bleed. Patient is over 500lbs so was unable to fit into hospital imaging equipment for CT scans or weight measurements. COVID-19 test was positive on 05Apr2021; the patient experienced COVID pneumonia on 05Apr2021. The patient admitted on 05Apr2021 to regular floor. The patient was moved to an Intensive Care Unit on 06Apr2021. The patient experienced short of breath on 05Apr2021 and required much more O2 than normal. Sometimes required BP support while on Dialysis and BP was 113/61 in ER. Pressure dropped to 100/70 and required mitrodrine after fluid was removed. The patient needed 4 liters supplemental O2 vs. only needing 2 liters at home. The patient experienced tachypnea and hypoxemia and no Respiratory failure. Respiration was 22. After 5 litres of O2 improved. Pulse 93 in ER. Cardiovascular: There was no heart failure, cardiogenic shock, Acute myocardial infarction, arrhythmia and myocarditis. The patient Had chest pain which resolved when O2 was administered. Gastrointestinal/Hepatic: There was no Vomiting, Diarrhea. The patient experienced nausea but no vomiting or diarrhea and complained of abdominal pain. There was no Jaundice and acute liver failure. Neurological: There was no altered consciousness, altered consciousness, encephalopathy, meningitis and cerebrovascular accident. The patient had headaches a couple days before admitting to ER. Hematological: There was no Thrombocytopenia, Disseminated intravascular coagulation. INR was 3 due to large dose of coumadin, and platelets were 180 and white count 6.8. Slight troponin increased at 0.37 at admittance, BNP 39. The patient started coughing up blood, having hemoxysis and bleeding on unspecified date. Laboratory test or diagnostic studies was reported that test for SARS-CoV-2 by PCR, or other commercial or public health assay. Xray showed vascular congestion with superimposed infiltrate which could represent pneumonia. Blood count was 11 and 36.7% at ER. Clinical chemistry: Sodium was 133; BUN was 68; Creatinine was 10. Evidence of hypoxemia: Pulse oO2 was 90 in ER. CT scans: unknown results. Urinalysis: On dialysis so does not make urine. The patient had received Remdesivir, from 06Apr2021, Hydroxychloroquine/chloroquine, Azithromycin from

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06Apr2021 and Corticosteroids from 06Apr2021 for COVID-19. The outcome of event "GI bleed" was fatal, the event "chest pain" and "body aches" was recovered and other events was unknown. The patient died on 09Apr2021. An autopsy was not performed. Information on the lot/batch number has been requested.; Sender's Comments: Based on temporal association, a contributory role of the suspect drug cannot be excluded for the events vaccination failure, COVID-19, COVID-19 pneumonia, and sepsis. However, the patient's multiple medical comorbidities including renal failure requiring dialysis, lupus, and morbid obesity along with the risk of COVID-19 infection in light of the current pandemic are the more likely explanations for the development of these infections. The events gastrointestinal hemorrhage, hemorrhage, hemolysis and troponin increased are attributed to intercurrent medical conditions, and are considered unrelated to the suspect drug. The patient is currently on warfarin which may increase the risk for bleeds. This case will be reassessed upon receipt of additional information. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: GI bleed

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4/21/2021	1235806	NC		M	3/24/2021	4/1/2021	diabetic coma; blood sugar kept dropping; This is a spontaneous report from a contactable consumer (patient's neighbor). A 60-year-old male patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on 24Mar2021 (Batch/Lot number was not reported) as single dose for covid-19 immunisation. Medical history included diabetes and coronary artery disease, and back surgery. The patient's concomitant medications were not reported. They think the patient went into a diabetic coma from low blood sugar dropping on 01Apr2021 and the patient passed away in his sleep. Reporter does not know if it had anything to do with the shot or anything but he thought they may want to know that. The patient started having problems with his blood sugar on Thursday 01Apr2021. The patient's blood sugar kept dropping and he went to bed that night and died. Patient was found deceased Friday morning 02Apr2021. Information about batch/lot number has been requested.; Reported Cause(s) of Death: Blood glucose decreased; diabetic coma
4/21/2021	1237878		71	F	2/25/2021	4/13/2021	This 70 year old white female received the Covid shot on 2/25/2021 and died of a heart attack on 4/13/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1237947	CA	65	F	4/1/2021	4/12/2021	Patient admitted 4/12/21 with fatigue and abdominal pain. Found to have UTI but no definite sepsis, and acute renal failure. Treated with iv antibiotics and iv fluids. Over next 48 hours developed worsening encephalopathy and thrombocytopenia. MRI/MRA/MRV showed no acute findings. Hyperammonemia noted, with no known Hx of cirrhosis; US did not show portal vein or hepatic vein thrombosis. Encephalopathy worsened, no clear etiology; EEG just showed generalized encephalopathy. Renal function worsened. Patient became obtunded and was intubated 4/16/19. Platelet nadir of 31k. Dialysis started. Left common femoral DVT developed. Patient had DIC type picture. Respiratory failure worsened, hypotension developed, patient passed away 4/20/21. No clear etiology of encephalopathy and thrombocytopenia identified, unclear if related to J&J vaccine received 2 weeks prior.

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4/21/2021	1235825	NH		F	3/26/2021		bradycardia; hypotension; This is a spontaneous report from a contactable nurse (Registered nurse with title of Infection Preventionist). A female patient of an unspecified age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL9269; expiration date: 01May2021) via an unspecified route of administration on 26Mar2021 at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient was with bradycardia, hypotension (seriousness criteria: hospitalization, death) and she passed away in the emergency room (ER), critical labs, she didn't even make it one day, the reporter send her out and she passed away in the ER. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Sender's Comments: A causal relationship between BNT162B2 and the events hypotension,bradycardia cannot be excluded based on temporal association. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate .; Reported Cause(s) of Death: bradycardia; hypotension
4/21/2021	1238356		69	F	3/10/2021	3/14/2021	This 69 year old female received the Covid shot on 3/10/21 and went to the ED on 3/14/21 and was admitted on 3/14/21 with weakness, lack of appetite, malignant neoplasm of brain and lung and died on 4/18/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1240133	AL	65	M	4/20/2021	4/21/2021	Recipient was found deceased the next day after receiving 1st dose pfizer vaccination.

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4/21/2021	1237890		93	F	1/20/2021	3/13/2021	This 93 year old white female hospice patient received the Covid shot on 1/20/2021 and went to the ED on 3/12 for COPD exacerbation, shortness of breath and extremity weakness. She returned to the ED on 3/13/21 and was admitted for generalized weakness and dehydration. The patient subsequently died on 4/13/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1237884	NH	90	F	1/8/2021	4/3/2021	Resident have had multiple PNA tx with IM Rocephin and IV Zosyn, Difficulty in swallowing, Elevated HCV RNA, 02/15 PCR Quant, ER visit following weakness and involuntary UE movements/jerking. Elevated amonia levels controlled with use of Lactulose. 02/22/2021 RUE and RLE extensive DVT. Worsening pressure wound and development of arterial wounds. Admitted to Hospice on 03/31/2021. Resident deceased on 04/03/2021.
4/21/2021	1238843	MN	88	F	1/23/2021	2/18/2021	per patient's family report: patient complained severe leg pain a few days before she was found dead in her apartment on 2/18./2021. It was likely she had sudden death as she did not activate her neck alert or call button in her apartment. Family request we report the incident, she was last seen on 12/15/2020 for pacemaker check, she also had medical message communication with me on 2/8 to request refill on her Percocet that she takes occ for her joint pain only at bed time. family suspect possible DVT with PE after getting more informed about vaccine side effects. however no autopsy was done.
4/21/2021	1238733	TN	61	F	4/20/2021	4/20/2021	Resident was found kneeling over walker with face down in the bathtub right before 1700. Code called and initiated. Resident pronounced dead at 1721 by EMS.
4/21/2021	1238623	CA	70	M	1/22/2021	2/1/2021	Patient was asymptomatic and was vaccinated on 1/22/2021. A facility caregiver tested positive for COVID, so patient was tested and received results on 1/27/2021 indicating positive for COVID-19. Patient expired early morning of 2/1/2021, still completely asymptomatic. Patient's physical condition had been fairly stable for the previous few years.

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4/21/2021		1238566		47	M	4/9/2021	4/18/2021	On April 18, 2021, nine days after the person got his second dose of Moderna vaccine, he committed suicide using a gun in the presence of his family.
4/21/2021		1238478	IL	63	M	4/7/2021	4/14/2021	He was healthy before vaccine. After vaccine a small amount of chills for a couple days. He was sicker and was exposed to COVID 19, so went to hospital 4/14/2021 tested neg for influenza and + Coronavirus. Died on 4/15/2021
4/21/2021		1238418	NH	84	M	3/26/2021	3/30/2021	3/30- Resident was sent to ER was found to have acute CVA, R vertebral occlusion, carotid stenosis, 17mm lung mass suspicious for malignancy, family opted for palliative and or Hospice. 4/03-re-admitted to the facility. 4/14 Admitted to Hopsice. Resident deceased on 4/16.
4/21/2021		1240013	MN	80	M	2/9/2021	2/11/2021	not feeling well and short of breath on 2/11/21, 2/12/21 more short of breath ambulance came. Went into PEA in ambulance with CPR. They gave TPA for suspected blood clot. He initially improved. He did not recover and died 4/4/21. He spent the entire time in hospital or TCU with complications. We brought him home 4/2 to die at home.
4/21/2021		1238342		72	M	2/20/2021	3/27/2021	This 72 year old white male hospice patient received the Covid shot on 2/20/21 and went to the ED on 3/27/21 and was admitted on 3/27/21 with shortness of breath, pneumonia, hyponatremia, anemia, bilateral pleural effusion, metastatic cancer and died on 4/17/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021		1238326		82	M	3/6/2021	4/6/2021	This 82 year old male hospice patient received the Covid shot on 3/6/21 and went to the ED on 4/6/21 and was admitted on 4/6/21 with respiratory distress, acute hypoxemic respiratory failure, anasarca, atrial flutter, hypothyroid and died on 4/15/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021		1238316	PR	85	M	1/12/2021	2/28/2021	Suffered a fall, stopped eating, on February 28, 2021 was found without vital signs.

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4/21/2021		1238302		75	F	3/23/2021	4/4/2021	This 75 year old white female received the Covid shot on 3/23/21 and died on 4/4/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021		1238188	TX	61	F	3/15/2021	4/16/2021	The decedent suffered fever and malaise after the second dose on 04/13/2021.
4/21/2021		1238440	NJ	76	M	2/22/2021	3/11/2021	Patient presented to ED on 3/15/2021 with fatigue, subjective fevers, dry cough, and diarrhea found to have COVID pneumonia. CT PE negative at that time. Hospitalization complicated by RUE superficial cephalic vein thrombus, epistaxis, GIB, gluteal abscess, and AKI. Patient made DNR. Suspected cause of death: ventricular tachycardia secondary to renal failure and metabolic abnormalities in the setting of COVID ARDS.
4/21/2021		1238286		85	M	2/16/2021	2/21/2021	This 85 year old white male hospice patient received the Covid shot on 2/16/21 and went to the ED on 2/21/21 and was admitted on 2/22/21 with altered mental status, pneumonia, severe sepsis, bladder cancer, UTI, dementia and died on 4/19/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021		1238123	NH	71	F	3/26/2021	4/14/2021	4/14-Resident c/o not feeling well and declined scheduled dialysis. c/o bilateral shoulder pain and fatigue. AP- 44, BP- 80/45, c/o headache, no chest pain and no SOB. Sent to CMC ER- patient deceased on 4/14/2021.
4/21/2021		1238185	PA	68	F	4/19/2021	4/21/2021	Received 2nd COVID vaccine on 4/19/21. Apparently hadn't been feeling well since. Presented to the ED on 4/21/21 with hypotension, bradycardia, hypoxia and a GCS of 3. Does have a history of ESRD on HD, but no missed dialysis sessions. Found to have a potassium of 8.7. There was concern for pulmonary embolism but was not hemodynamically stable enough to undergo imaging. Went into PEA arrest x 3 in the ED and ultimately died. Of note, patient did have a recent ankle fracture recently and apparently has been non-ambulatory for at least the past few days.

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4/21/2021	1237923		85	M	2/19/2021	4/5/2021	This 85 year old white male received the vaccine on 2/19/21 and went to the ED on 4/05 and was admitted with generalized weakness, hyponatremia, fever and elevated bilirubin. On 04/16/21, he went to the ED and was admitted to the hospital on 4/17 with poor appetite and hospital admission dx of ketonuria, leukocytosis, renal insufficiency, elevated troponin, hematuria, generalized weakness and died on 4/19/2021. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1238235	MO	56	M	4/10/2021	4/11/2021	Information received by wife. Patient was fatigued 4/10/21 after vaccination. His wife stated that she talked with him and he seemed fine. When his wife went to bed early that evening, the patient was sitting in the recliner in the living room. On the morning of 4/11/21, patient's wife found him unresponsive in the recliner. She called an ambulance but patient was deceased. Patient's wife stated that she noted a trashcan next to the chair the patient was sitting in. The trashcan did not have emesis in it but patient's wife assumes he had been nauseated that evening before he passed away.
4/21/2021	1238254		85	M	2/23/2021	4/15/2021	This 85 year old male received the Covid shot on 2/23/21 and subsequently died on 4/15/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1238268		91	M	2/19/2021	3/21/2021	This 91 year old white male received the Covid shot on 2/19/21 and subsequently died on 3/21/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation..
4/21/2021	1238270	NY	74	M	3/31/2021	4/10/2021	Patient was already in hospital for severe COPD. While there, he was given J&J Covid-19 vaccination. Approximately 11 days after vaccination, patient developed vomiting that could not be controlled. He later developed abdominal pain that worsened and also could not be controlled. Intravenous pain killers eventually hastened his passing.

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4/21/2021	1238276		58	M	3/22/2021	4/15/2021	This 58 year old white male hospice patient received the Covid shot on 3/22/21 and died on 4/15/21. Please refer to the other details submitted within this report and contact the person who submitted this report via email for additional follow up details and investigation.
4/21/2021	1238280	CO	70	M	3/10/2021	4/5/2021	The decedent was visiting family. There are no reported adverse effects known.
4/21/2021	1238170	OR	63	F	4/10/2021	4/20/2021	Found dead at home 10 days post vaccine administration. Unclear correlation.
4/21/2021	1236771	CO	84	M	3/2/2021	3/3/2021	I do not have exact information on vaccine (either Moderna or Pfizer). He was vaccinated in February 2021 first dose, March 2, 2021 second dose by Health Services. He had malaise, fatigue, weakness and slept for four days after first dose. He had extreme malaise, fatigue, weakness and was unconscious for 4 days (3/2-3/5) until he passed away.
4/20/2021	1232707	NJ	57	F	4/9/2021	4/15/2021	Patient died at home per medical examiner, suspected cardiovascular event
4/20/2021	1231384	IA	70	M	2/24/2021	3/13/2021	Sharp Chest Pain resulting in Death 2 hours later, 03/13/2021 @ 12:08
4/20/2021	1232709	TX	83	F	1/29/2021	1/31/2021	Mother had a stroke 2 days later.
4/20/2021	1232759	MT	66	F	4/9/2021	4/16/2021	SAW OBITUARY FOR PATIENT IN PAPER SHE HAD JUST RECEIVED VACCINE NOT TO LONG AGO SO WANTED TO MAKE SURE THIS WAS REPORTED
4/20/2021	1233229	MN	73	F	3/25/2021	4/15/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/20/2021	1232805		81	F	2/24/2021	3/5/2021	Patient had several ED visits and was admitted to the hospital, all within 6 weeks of receiving COVID vaccination. ED visits 3/5/21, 3/18/21, and admissions on 3/22/21.
4/20/2021	1232936	PR	89	F	2/9/2021	2/26/2021	Taken to the Hospital due to a fracture, severe UTI and sepsis. Dies at the Hospital.
4/20/2021	1232938	MN	81	M	2/23/2021	4/14/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series

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4/20/2021	1232970	KY	75	F	2/23/2021	4/19/2021	Patient passed away.
4/20/2021	1232988	PR	80	F	1/11/2021	1/27/2021	Taken to the Hospital due to COVID-like symptoms (strong cough). At the Hospital she is diagnosed with COVID-19, problems with kidney and hemoglobin levels. Dies at the Hospital due to COVID-19.
4/20/2021	1233186	IN	73	F	4/9/2021	4/13/2021	The patient is a 73yr old female with multiple comorbidities including but not limiting to ESRD on dialysis, DM, COPD on home oxygen, OSA not compliant with CPAP at home, pulmonary hypertension, tachy-brady syndrome s/p pacemaker in March 2021, with multiple admissions (?6) this year already, admitted with septic shock, NSTEMI on 4/13/2021. She underwent R foot debridement and amputation on 4/16/2021. ID team treated with Vanco/Cefepime. On 4/18 afternoon, she developed PEA and coded for about 25min. Since ROSC, she never regained consciousness. This morning, at the beginning of my shift at 7am, she's on bicarb drip, maxed Levophed 100, Epi 100 drips and full vent. However, she was getting paced and BP stayed in 40s. I discussed with ICU pharmacist and gave her stress dose Solu-cortef. Checked serum cortisol level, turned out to be appropriate later. Lactic acid 22 and bicarb was only 2 despite being on Bicarb drip. I called Shauna/daughter to inform her about guarded prognosis (imminent death) and asked to bring husband to come see her asap. Before family arrived, she developed another PEA and code blue was called. She was given Epi, bicarb pushes and CPR started immediately. Code blue was unsuccessful. At 8:13am, she was pronounced dead. I called daughter again to notify her of patient's death. Family arrived around 10am. I met both daughter and husband at bedside and offered emotional support. Chaplain was consulted. Disposition - critically ill patient with multi-organ failure, septic shock from R foot osteomyelitis, ESRD on dialysis, DM, COPD on home oxygen, OSA not compliant with CPAP at home, pulmonary hypertension, tachy-brady syndrome s/p pacemaker in March 2021 - Patient coded and did not survive

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4/20/2021		1232673	SD	83	M	3/25/2021	3/25/2021	Patient was admitted to the hospital with pneumonia the evening after her received the vaccine in the morning. He had been struggling with his COPD/ pneumonia since 3/1/21. He was hospitalized and died 8 days later
4/20/2021		1232994	MN	90	F	3/25/2021	4/16/2021	Patient death within 60 days of receiving the COVID vaccine series
4/20/2021		1232171	MA	98	F	4/8/2021	4/20/2021	resident with acute SOB on 4/13 sent to ED dx with pneumonia. Sent to rehab. Passed away in her sleep on night of 4/20/21
4/20/2021		1233385	CA	67	F	3/22/2021	4/7/2021	Pt presented with abd pain, dark stool, altered mental status, febrile, hypotensive, septic, cardiogenic shock, progressed to multi organ dysfunction.
4/20/2021		1232815	OH		U			Abdominal pain, vomiting, headache, hypotension, syncope, coma, shock, death at 2:00 pm 03/08/2021
4/20/2021		1231568	WI	74	F	3/26/2021	3/27/2021	Unknown onset of adverse events. PT received second COVID vaccine on 3/26/21. She was found deceased in her residence (where she lives alone) by family on 3/28/21. She was found in bed, appropriately covered with blankets. Son last spoke with PT around 17:30 hours on 3/26 after receiving the vaccine, and reported the PT did not complain of any symptoms, did not sound short of breath, and did not complain of any breathing difficulty. Based on postmortem presentation, believed PT died late night of 3/26/early morning of 3/27. Suspect death is likely due to PT's heart disease, Medical Examiner agreed with the assessment. I spoke with the clinic that administered the second dose, and was informed that the PT did not exhibit any signs/symptoms during the observation period immediately following the vaccine being given. PT's PCP was contacted, and agreed to certify DC based on known medical history. PCP also agreed that the death did not sound related to the vaccine based on lack of symptoms as reported by the administering clinic and family.
4/20/2021		1232096	PR	74	M	1/27/2021	2/17/2021	2/17/2021 He was transferred to the hospital because he was having respiratory problems and died in the hospital due to respiratory arrest.

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4/20/2021		1232109	PR	74	M	2/6/2021	2/28/2021	On 2/28/2021 while having lunch at noon he suffered an apparent heart attack.
4/20/2021		1231694	FL	71	M	1/20/2021	1/21/2021	suffered a massive heart attack the morning following his first dose of Moderna vaccine. He was hospitalized for 21 days, first at Hospital and then . He passed away on February 11, 2021, at .
4/20/2021		1232138	PR	94	F	3/17/2021	3/29/2021	Resident began coughing then complained of abdominal pain and was taken to the Hospital. He began to vomit and breathed in. Had a heart attack
4/20/2021		1232635	WV	82	F	1/27/2021	1/28/2021	Patients husband was bringing his daughter to a vaccine event. Spouse spoke of concern over his wife having a Pfizer COVID-19 vaccine in January and withing 24 hours being found unresponsive. Patient details that she did not show symptoms of distress after this second vaccination. He went to check on her in the morning on 1/28/21 at different points in the morning but when checking on patient at around 11:00 AM she was found laying on her side unresponsive, not breathing. Emergency medical profesisonals arrived but resuscitation efforts were unsuccessful.
4/20/2021		1232413	FL	71	F	4/2/2021	4/3/2021	beginning the day after the vaccine Patient experienced dairrhea, extreme nausea, cramps, coughing and weakness. This persisted for 3 days. Patient suffered a stroke or multiple strokes either 5 or 6 days after administration of the vaccine. She has since died as a result of the strokes.
4/20/2021		1232416	PR	95	F	1/25/2021	3/1/2021	Loss of apatite to the point of no ingestion through mouth. During hospitalization, the medical staff identified a mass at the abdomen.
4/20/2021		1232447	PR	85	F	3/8/2021	4/1/2021	Dies at long term care facility doe to a stroke.
4/20/2021		1232456		87	M	3/26/2021	4/9/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/20/2021		1232541	NJ	32	M	4/10/2021	4/11/2021	Patient found unresponsive at approximately 12:00 am 10/11. EMS called and patient was pronounced dead at scene.

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4/20/2021		1232551	SD	83	M	2/22/2021	2/23/2021	Patient was administered dose 2 of Moderna vaccine on 2/22/2021 and on evening of 2/23/2021 patient experienced a witnessed cardiac arrest, was transported to the ED and expired
4/20/2021		1232115	PR	88	F	2/6/2021	3/14/2021	Resident was in Hospice and was presenting with an infection. On the morning of 3/14/2021 in the round of caregivers they found him without vital signs.
4/20/2021		1236412		96	M	1/28/2021	3/13/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 95 and admitted to ED on 2/26/21 with leg edema and diarrhea. Had periods of bradycardia in the 40s during admission. Diagnosis was heart failure exacerbation which caused a significant decline in his condition resulting in eventual palliative care before his death. Notable comorbidities include CAD s/p cabg, T2DM, HFrEF, CKD, HTN, recurrent UTIs.
4/20/2021		1232799	KY	56	M	4/6/2021	4/9/2021	No information really known. Office was notified yesterday by county coroner that patient was found deceased in his home on 4/9/19. Coroner was requesting patient records. Unknown if death related to the Moderna Covie-19 vaccine but reporting this as death occurred 3 days after the vaccine and coroner gave office no information. You can contact the coroner involved with this case.
4/20/2021		1233431	PA	83	F	2/28/2021	2/28/2021	Based on the medical professionals caring for her, she took the vaccine on February 28,2021. She became fatigued and never woke up.
4/20/2021		1241405		68	M	3/10/2021	3/23/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Circumstances surrounding his death are not documented in chart. Comorbidities include Hepatitis C, HTN, T2DM.

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4/20/2021		1241404		84	M	2/10/2021	3/25/2021	WEAKNESS, SHORTNESS OF BREATH, NASAL CONGESTION, DEATH Narrative: Patient died after COVID vaccine dose #1 01/07 visit for chemo, stable 01/21 visit for chemo, stable 01/27 hematology visit d/t rash, likely heat rash 02/09 chemo for multiple myeloma, reports fatigue but no dyspnea 02/10 COVID vaccine dose #1 03/02 chest xray with concern for bilateral pneumonia, treated with antibiotics 03/08 pt having pain in back of the neck 03/09 pt having shortness of breath, transported to hospital with persistent generalized weakness with body ache and shortness of breath; diagnosis: atypical pneumonia, viral vs. bacterial, acute dyspnea with hypoxia, nonproductive cough, chest congestion, headache, and malaise 03/25 pt passed away COVID vaccination not likely contributor to patient's death, but is more likely due to advanced age (83 y/o) and comorbidities, especially active multiple myeloma, receiving chemo. No immediate reaction after first vaccination. Hospitalized a month after vaccine and illness persisted, leading to patient's passint. No COVID infection documented.
4/20/2021		1241403		88	M	1/8/2021	3/24/2021	Death Narrative: Patient tested positive for COVID-19 on 1/25/21 after receiving her first vaccine on 1/8/21. He was discharged from hospital on 1/26/21 with admitting diagnosis of COVID pneumonia. He did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient had made it through the COVID infection period but suffered complications including pneumonitis, lung, heart, and kidney failure requiring high flow oxygen. He required readmission to hospital for the complications in 3/2021 but ultimately passed away on 3/24/21 likely due to the multi organ failure complication of COVID

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4/20/2021	1241402		65	M	3/2/2021	3/14/2021	DEATH. Narrative: Patient died after receiving COVID vaccine dose #1. 07/18/20: admitted to hospital for weakness/lightheadedness causing legs to give out and fall backwards, resulting in hematoma 12/15/20: seen by PCP, stable 02/03 seen in ID clinic for HIV follow up, nothing out of the ordinary 03/02 COVID vaccine dose #1 03/14 Pt died Cause of death unknown and undocumented at this time. Patient did not have an ADR immediately after vaccine or hospitalized before or after vaccine. Last hospitalization was July 2020 due to fall and associated hematoma. Death not likely due to vaccine, but due to comorbidities, including active HIV infection with detectable viral load. No known previous COVID infection.
4/20/2021	1241401		74	M	1/14/2021	4/13/2021	DEATH Narrative: Patient died after COVID vaccine dose #1. 01/14 COVID vaccine dose #1 04/13 pt died Patient with advanced ALS, progressive respiratory difficulty and passed away while on hospice. Vaccine did not likely contribute to the patient's death, but was due to advanced ALS. Patient was not hospitalized prior to vaccine or immediately after vaccine. No adverse event following vaccine. No previous COVID diagnosis known.
4/20/2021	1236413		70	M	2/11/2021	3/7/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was hospitalized in 02/2021 at facility for unknown reason until his passing on 3/7/2021. He had dx of HCV in 01/2021 that was cured but left him with cirrhosis s/p TIPS procedure. Was not liver transplant candidate due to home O2 needs. Other major comorbidities include COPD and diabetes.

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4/20/2021	1236411		91	M	2/17/2021	2/25/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 90 and suffered cardiac arrest at home on 2/25/21. Patient had afib w/ a pacemaker, cardiomyopathy, CKD4, and PVD.
4/20/2021	1236410		75	M	2/11/2021	3/3/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient found deceased at home on 3/3/21. No apparent cause of death. Telephone appt on 2/10/21 was unremarkable other than patient having mild shortness of breath and chest discomfort. Comorbidities include COPD, HTN, HLD, and age of 74.
4/20/2021	1236409		98	M	1/23/2021	3/5/2021	Death Narrative: Patient was not previously COVID positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 97 and admitted to Hospital on around 2/20/2021 due to a fall at home. He later passed away on 3/5/21.
4/20/2021	1236408		78	M	1/22/2021	3/14/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there and ADR that occurred between the observation period and the date of death. Patient was hospitalized in early 02/2021 at Medical Center in the ICU for a bleeding ulcer. Was inpatient for over a month, but do not have records due to it being outside facility. Received a colonoscopy report which showed. diverticulosis and CT of abdomen showing pleural effusion, umbilical hernia and gallstones. Notable comorbidities include emphysema, CKD, CAD, ICM, and T2DM.

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4/20/2021	1236407		81	M	2/16/2021	3/23/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 81 and presented to the ED w/ altered mental status on 2/18/21 after receiving COVID vaccine on 2/16/21. Patient was also previously admitted earlier that month for a retroperitoneal hemorrhage that had similar presentation of altered mental status. CT this admission showed a new CVA. He was eventually transferred to the ICU for nonconvulsive status epilepticus and eventually transitioned to hospice care after further decline in status. Wife elected to stop dialysis and he passed away on 3/23/21. Comorbidities include ESRD on dialysis, CVA, DM, prostate cancer.
4/20/2021	1236405		82	M	3/4/2021	3/27/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 82 and had a PMH significant for parkinsonism w/ dementia, difficulty walking and performing daily tasks, CAD, afib, and osteomyelitis. Patient was authorized for home health aide on 3/18/21 after wife overwhelmed with his care. Listed cause of death on death certificate says "unknown-history of dementia and heart conditions~~
4/20/2021	1233672	MN	82	M	3/18/2021	4/16/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/20/2021	1233445	MD	53	F	4/1/2021	4/2/2021	Patient found in pulseless arrest on stairwell of her apartment building on the night of 4/2/21. Patient transported via ambulance to hospital where she passed away.
4/20/2021	1233510	MN	46	F	4/8/2021	4/19/2021	Death. Multiple pulmonary thrombi.

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4/20/2021	1241400		74	M	3/1/2021	3/30/2021	Death Narrative: Patient was not previously COVID-19 positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there and ADR that occurred between the observation period and the date of death. Patient was a resident at an assisted living facility and by 3/11/21 he had several falls within the last week, one of which he hit his head and need to be evaluated by the ER due to him being on warfarin. Patient had dementia and psychosis and told wife he was falling intentionally. He deceased at the rehab facility on 3/30/21 after requiring hospitalization 4 times over the last for not getting blood flow to his brain per wife.
4/20/2021	1235472	TX	75	F	4/15/2021	4/17/2021	My mother never had a reaction with the 1st shot and after the 2nd shot doing fine Thursday afternoon and Friday. She began having sx Saturday and passed Sunday early morning
4/20/2021	1233604	WI	104	F	2/26/2021	4/14/2021	Patient was in ED x 2 and died within 60 days of receiving a COVID vaccine series

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4/20/2021		1233617	MI	69	M	3/24/2021	3/29/2021	5:30 pm 3/29/21 received phone call from aunt that ems had taken dad to hospital because he was feeling unwell. he vomited prior before and just didn't feel right. ems showed up and observed him, glucose was 139..not out of range...vitals stable..2nd moderna vaccine 5 days prior...ems said that is was probably side effects...asked if he really wanted to go in...said yes, took him to hospital...5:45 daughter called hospital to get status check....she is poa for medical...er doc said he was intubated and on vent.....er doc said he was very sick...6:50 pm daughter got to er and room he was on vent and knocked out...he had antibiotics, sleeping meds...meds to rise bp in iv.....er doc came in daughter asked why he was on vent...asked about o2 doc said he was fine just unresponsive...labs were being done at time...had him on dextrose, propofol, dexmedtominine,..asked to have him transferred to own hospital..8:10 dr. comes in with lab results...kidneys and livers were showing multi organ failure...trypsin was high as well..red flags were: creatine 9.93, gsr-5, hemoglobin-7, liver lft-500, trypsin 14, covid test was negative, white count was in range, daughter mentioned vaccine again and doc said nothing nor did she mention heart being in trouble, no answers regarding what the cause of this was...for the record he only had kidney issues due to type 2 diabetes, was not at dialysis level...9:30 ems shows up to take dad to another hospital were not ready from him yet...9:41 dad heart started to drop on monitor withing 15 secodes iit flatlined in front of daughter.....med staff did cpr...brought in epi pens and manual cpr for heart...a little after 10 heart was started it ran for 4 minutes then crashed again..10:05 continued cpr until 10:28, dr showed that walls i heart not squeezing very damaged, brought in echo during process, 10:28 time of death
4/20/2021		1233587	VA	87	F	1/21/2021	2/20/2021	Patient received two dose Moderna series of vaccinations for COVID 19 (1/21/2021 and 2/18/2021). Patient reported to ED feeling weak on 2/20/2021, but was not tested for COVID at that time. Reportedly, patients family were all tested for COVID and were positive on or about 2/21/2021. The patient was later admitted to the hospital on 4/13 with COVID. She subsequently expired on 4/14.

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4/20/2021	1233769	OH	57	F	3/25/2021	4/6/2021	According to death certificate patient died of "blunt force injuries from a motorcycle accident~~
4/20/2021	1233795	MI	62	F	4/6/2021	4/7/2021	Information obtained from the Hospital. Began to not feel well the next day, SOB, diarrhea and fatigue. Was admitted to hospital on 4/9/21, diagnosed with COVID, placed on a vent and died on 4/19/21.

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4/20/2021	1234152	MA	47	M	3/12/2021	3/18/2021	<p>Pt. had (what we think) a small seizure on Thursday, March 18th and then again on Saturday, March 20th. On Sunday, March 21st, 911 had to be called as his seizure did not end. He had a grand male. He was seizing for several hours. At the time this was all occurring he has been on anti seizure meds for a few years Divalproex 1000 mg am and 1000 mgs pm daily). He passed 1 week later, March 28 at approx 6:45pm at the Clinic. I am unable to get any information on his medical report for that week. Statement from his Nurologists is on second page. Additional information for Item 18: Statement: 47 year old gentleman who passed away on March 28 from aspiration pneumonia secondary to status epilepticus and on a history of multiple sclerosis / additional leukoencephalopathy of unknown etiology (both treated with rituximab), prior seizures (on valproic acid) and pulmonary embolism (on apixaban). The key reason for reaching out is in light of the announcement about the side effects of the Johnson & Johnson vaccine specifically cerebral venous sinus thrombosis. While he had a known history of seizures, he had no clear trigger for these seizures; including that his valproic acid level was therapeutic (83.0 mcg/mL) at time of presentation. He had, however, received the Johnson & Johnson vaccine on March 12 before having what in hindsight appeared to be repeated seizures between March 18-21; he had a more significant one on March 21 that hospitalized him. This time frame appears consistent with the reported cases of central venous sinus thrombosis associated with the Johnson & Johnson vaccine. Equally, he was taking apixaban at that point in time and his PLT (173) / INR (1.1) / PTT (36.6) at time of presentation were all normal and stable. He did have an elevated ProBNP (552.0) at presentation; nasopharyngeal swab was negative for COVID / Influenza A/B / RSV and non-contrast head CT did not show any clear new abnormalities. His only D-dimer was obtained on March 23 and was 226. He did not have a CT angiogram or venogram. Overall the link between the vaccine and pt. seizures is not definite. At the same time, the similarity with the reported cases has led to me wanting to report it in case of the possible link. If you require further information then please don't hesitate to email me Pt. med list at the time of this incident Modifinil - 100 mg/1per day/AM Sertraline - 100 mg/1per day/AM</p>

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								Vitamin D3 - 50 mg/1per day/AM Divalproex - 500 mg/2per day/AM Eliquis - 5 mg/1per day/AM Furoseminde - 20 mg/1per day/AM Metoprolol - 100 mg/1per day/AM Lisinopril - 10 mg/1per day/AM Divalproex - 500 mg/2per day/PM Eliquis - 5 mg/1per day/PM Metoprolol - 100 mg/1per day/PM Melatonin - 5 mg/1per day/PM Quetiapine - 50 mg/3per day/PM
4/20/2021		1234428	AL	77	F	2/10/2021	2/12/2021	PFIZER-BIONTECH COVID-19 VACCINE EUA. Patient received vaccination on 2/10/21. No adverse reactions reported following vaccination. Patient had unplanned weight loss x 1 month of 14.1% and 6 month loss of 20.8% according to nursing nutrition notes. HT: 60in Wt 122lb. Patient died on 2/12/21.
4/20/2021		1234488	CA	87	F	3/2/2021	3/2/2021	Patient had an undiagnosed/unknown UTI at the time of her second vaccine on 3/2/21. She was admitted to Hospital on 3/3/21 with organ failure; she passed away on 3/5/21. Her cause of death is listed as Sepsis, and UTI. The vaccine was not listed as a cause of death, but might have been a "tipping point" in her inability to recover with antibiotic treatment.
4/20/2021		1235191	KS	40	F	2/11/2021	3/25/2021	my sister had a ruptured brain aneurysm on 3/25/2021
4/20/2021		1235449	CA	88	M	2/6/2021	2/8/2021	Laboring to breath. Hospitalized.
4/20/2021		1233606	MA	52	M	4/8/2021	4/9/2021	52 m active alcoholic with lab abnormalities c/w heavy etoh including pancytopenia (anemia to 7s, thrombocytopenia to 70s, mild leukopenia-since 12/20); 2 recent admissions (feb march 2021) with likely etoh-induced pre-renal AKI; DM; who received 2nd dose of moderna 4/8/21. After not being in contact with his family for several days, family sought him at his residence where he was found pulsless and apneic on the floor with some scant blood near his face. CPR-->transported to hospital where upon attempting to intubate profuse bleeding into larynx/pharynx noted. Despite ongoing cpr and mechanical ventilation team in ER was unable to re-establish pulse. He was pronounced dead at about 8 PM 4/9/21.

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4/19/2021	1228594	PA	68	M	4/10/2021	4/16/2021	Contacted Veteran's son. He did mention that his father was not healthy, but also that his father did not voice any specific changes to his health as recently as Tuesday (4/13) when they last spoke after receiving his second dose of vaccine on 4/10. He did mention that the coroner had declared his father's death "natural" and was not planning to do an autopsy.
4/19/2021	1228481	NY	58	M	2/25/2021	3/15/2021	The patient had previously been diagnosed with COVID-19 in November 2020, but did not require hospitalization and had recovered. He received his first dose of the Pfizer COVID vaccine on 2/25/2021, and on 3/15/2021, collapsed suddenly at home and was unable to be resuscitated. An autopsy was performed at the request of the family, and a massive pulmonary embolus was found in the main pulmonary artery and extending far into the segmental pulmonary arteries of both lungs.
4/19/2021	1228903	CA	75	M	4/6/2021	4/9/2021	patient had massive intracerebral hemorrhage 3 days after vaccination. family claims patient was doing well until vaccination. there is a suspicion that patient might have had sinus venous thrombosis that lead to the the ICH.
4/19/2021	1228761	TX	91	F	3/18/2021	3/25/2021	Note from 3/25/2021: PMH of asthma, PVD, Diabetes Mellitus type 2, Diastolic CHF , Aflutter , hypothyroidism , and allergies, who presents to facility with after her home provider saw her and concerned for pneumonia and worsening respiratory status. Lab work-up showed elevated WBC of 20.61, low potassium 3.2 , and BNP of 764. Her troponin was also elevated 0.147. Chest CTA done showed atypical infectious process with consolidation at the left lung base and secondary to pulmonary mycobacterium avium complex infection in the bronchiectatic form .Patient is a 91 year old female with PMH of asthma, PVD, Diabetes Mellitus type 2, Diastolic CHF , Aflutter , hypothyroidism , and allergies, who presents to facility with after her home provider saw her and concerned for pneumonia and worsening respiratory status. Lab work-up showed elevated WBC of 20.61, low potassium 3.2 , and BNP of 764. Her troponin was also elevated 0.147. Chest CTA done showed atypical infectious process with consolidation at the left lung base and secondary to pulmonary mycobacterium avium complex infection in the bronchiectatic form .

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4/19/2021		1228798	MD	96	M	3/5/2021	3/11/2021	a few days after his congestive heart failure got worse and continued on a down ward spiral. He refused to go to hospital and last few days hospice was brought in. He died not being able to breath. Autopsy was not done.
4/19/2021		1228838	LA	69	M	2/26/2021	2/26/2021	Weak, Lethargic, No Appetite - DEATH 3/13/2021
4/19/2021		1228875	OH	63	M	3/5/2021	3/7/2021	woke up with trouble breathin like couldn't get enough air into lungs, happened when sleeping for several nights
4/19/2021		1228974	MN	59	M	3/11/2021	3/28/2021	PATIENT GOT FIRST DOSE OF MODERNA ON 03/11/21 AND PASSED AWAY ON 03/28/2021
4/19/2021		1228976		79	F	2/22/2021	3/10/2021	Death SHORTNESS OF BREATH
4/19/2021		1229005		70	F	2/27/2021	4/1/2021	Death
4/19/2021		1229053	MN	91	F	3/4/2021	3/12/2021	PATIENT RECEIVED FIRST MODERNA DOSE ON 03/04/2021 AND PASSED AWAY 03/12/2021
4/19/2021		1229092	MN	62	F	3/11/2021	4/14/2021	PATIENT GOT FIRST MODERNA DOSE 03/11/2021 AND SECOND DOSE 04/08/2021 AND PASSED AWAY ON 04/14/2021
4/19/2021		1228448	KY	67	M	4/8/2021	4/9/2021	Received vaccine 04/08/2021. Was admitted to the hospital later in the day with cardiac arrest. Deceased 4/9/2021
4/19/2021		1227451	IL	85	F	4/3/2021	4/7/2021	presented to Emergency room with complaints of approximately 5 days of progressively worsening shortness of breath with a dry nonproductive cough, increased weakness, and wheezing. Symptoms not controlled with increased use of rescue inhaler albuterol. Patient's daughter reached out and spoke with patient's pulmonologist Dr. today who ordered oral steroids however patient reports she had not started taking them yet. Patient was initiated on 15 L non-rebreather and received 2 duo nebs EN route to the hospital. It was reported she did have some intermittent chest tightness although on my review, she denied this. Upon arrival to the emergency room, patient was initiated on BiPAP and receive 40 mg of IV Lasix at 125 mg of IV Solu-Medrol. Patient expired 4/19/2021
4/19/2021		1229079		78	F	2/27/2021	4/15/2021	Death

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4/19/2021	1227966	OH		M			got the shot for covid and died a few weeks later; This is a spontaneous report from a contactable consumer. A male patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The relevant medical history and concomitant medications were reported as none. The patient got the shot for covid and died a few weeks later on an unspecified date. It was unknown if an autopsy was performed. The outcome of the event was fatal. Information on the Lot/Batch number has been requested.; Reported Cause(s) of Death: got the shot for covid and died a few weeks later
4/19/2021	1229034	NE	97	F	4/8/2021	4/9/2021	Pt. had hx of SOB prior to vaccination and Dx with hear failure Woke up day after vaccination with being very tired. Admitted to hospital with UTI, Sepsis
4/19/2021	1227470	CA	83	M	4/2/2021	4/2/2021	My uncle started feeling unwell the evening he got his 2nd Covid 19 vaccine. By the next evening, he started vomiting violently, trembling and sweating. He lived in country and his caregiver didn't think to take him to the hospital. The symptoms calmed down after a while, but he was not able to hold any food or liquids down. Eventually, he fell asleep and his caregiver left for the night. He returned on Easter Sunday at 9:30 am and found my uncle deceased.
4/19/2021	1229138	MI	76	M	3/29/2021	4/1/2021	Death reported to Health department from Medical Examiner office, no further details provided

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4/19/2021	1227922	PA		F			<p>BLOOD CLOT; BROKE TAIL BONE; VACCINE EXPOSURE DURING PREGNANCY; This spontaneous pregnancy report was received from a pharmacist via a company representative, and concerned an approximately 40 year old female. The patient's height, weight, and medical history were not reported. The patient received Covid-19 vaccine Ad26.COV2.S (suspension for injection, route of administration not reported, batch number: unknown) dose and vaccination site were not reported, administered in 2021 for prophylactic vaccination. No concomitant medications were reported. In 2021, the patient experienced vaccine exposure during pregnancy. The date of the patient's last menstrual period and expected delivery date were not provided. In 2021, the patient experienced broke tail bone during labor and gave birth (live birth). On an unspecified date in 2021, the patient experienced a blood clot and died. It was noted that she was at high risk for clots because she was 4 weeks post partum (gravida 1, para 1). Action taken with Covid-19 vaccine Ad26.COV2.S was not applicable. The patient died of a blood clot and broke tail bone in 2021; the outcome of vaccine exposure during pregnancy was not reported. It was unspecified if an autopsy was performed. This report was serious (Death). This case, from the same reporter is linked to 20210430297.; Sender's Comments: V0: The case concerns a pregnant female subject around age of 40, who developed thrombosis, skeletal injury and exposure during pregnancy an unspecified time after Janssen COVID-19 vaccine was administered intramuscularly for prevention of symptomatic SARS-CoV-2 virus infection. The subject's past medial history, last menstrual period, estimated date of delivery and concomitant medications were not provided. Per the reporter (pharmacist) the patient was at a high risk for blood clots because she was 4 weeks post-partum. The patient broke her tail bone during the labor, gave a birth, and later died of a blood clot. No additional information was provided. It is not known whether the autopsy was performed. Given alternative explanation and risk factors of pregnancy, labor and skeletal injury (trauma) the event of thrombosis is considered inconsistent with the causal association to immunization, per the WHO causality classification for adverse events following immunization. Events of skeletal injury was result of an accident and</p>

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therefore not considered related. Company causality for event of thrombosis is considered not related to Janssen COVID-19 vaccine (Level 4 -Insufficient information available to confirm a possible, probable or a definitive case of venous thrombosis, per the Brighton Collaboration case definition); Reported Cause(s) of Death: BLOOD CLOTS; BROKE TAIL BONE

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4/19/2021	1227925	KS		M			<p>SUSPECTED PULMONARY EMBOLISM; THROMBOCYTOPENIA; This spontaneous report received from a health care professional from a state immunization program concerned a 60 year old male. The patient's height, and weight were not reported. The patient's past medical history included cancer, and concurrent conditions included overall poor health. The patient received COVID-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown), date of administration was not reported, for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, approximately 24 hours post-vaccination, the patient was taken to the hospital after being found unresponsive. It was suspected that the patient had experienced a pulmonary embolism, resulting in his death. Laboratory results revealed thrombocytopenia. Reportedly, no heparin was used in his treatment. On an unspecified date, the subject died from suspected pulmonary embolism, and had not recovered from thrombocytopenia. An autopsy had not been performed at the time of the report, as it was pending family's approval. The action taken with COVID-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0: This is a spontaneous report of a 60-year-old male patient, who died of a suspected pulmonary embolism approximately 24 hours after receipt of the Janssen COVID-19 vaccine. The patient had an unspecified cancer and was described as in overall poor health. He was brought to a hospital, where it was suspected that he had died due to a pulmonary embolism. He was also found to be thrombocytopenic. The patient's cancer could provide a plausible alternative explanation for the event, although there are insufficient details to make a meaningful medical assessment at this time.; Reported Cause(s) of Death: SUSPECTED PULMONARY EMBOLISM</p>

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4/19/2021		1227926	NJ		M			<p>BLOOD CLOT; This spontaneous report received from a consumer via a company representative and concerned a male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, a week or so after the Covid-19 vaccination the patient passed away in his sleep. The patient had no underlying condition. An autopsy was performed on an unspecified date and the patient was found to have blood clot. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: A male patient of unspecified age passed away in his sleep an unspecified time after receiving the Janssen COVID-19 vaccine for prevention of COVID-19 infection. It stated that the patient had no underlying condition. A blood clot was found by autopsy; no further details are provided. There is insufficient information to make a meaningful medical assessment. Additional information is being sought.; Reported Cause(s) of Death: BLOOD CLOT; Autopsy-determined Cause(s) of Death: BLOOD CLOT</p>

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4/19/2021	1227818			F			<p>BLOOD CLOT; This spontaneous report received from a consumer via media by a company representative concerned a female of unspecified age. The patient's height, and weight were not reported. The patient was prone to blood clots her entire life, but managed it. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration and batch number were not reported) dose (1 total), start therapy date were not reported, for prophylactic vaccination. The batch number was not reported. Per procedure, no follow-up will be requested for this case. No concomitant medications were reported. On an unspecified date, the patient developed a blood clot. A day after the vaccination, the patient died from the blood clot. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: This anecdotal report from media involves a female patient of unspecified age who was prone to blood clots her entire life and on an unspecified date developed a blood clot and died from the blood clot a day after received the Janssen COVID-19 Vaccine Ad26.COV2. Concomitant medications, and details of the event were not reported. This case has insufficient information to make a meaningful medical assessment. The case will be assessed further when additional information is received.; Reported Cause(s) of Death: BLOOD CLOT</p>

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4/19/2021	1227962			M	4/9/2021	4/11/2021	suddenly passed away; This is a spontaneous report from a contactable healthcare professional reporting on behalf of friend's husband. A 43-year-old male patient received the first single dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 09Apr20201, for COVID-19 immunisation. Medical history and concomitant medications were not reported. The patient suddenly passed away on 11Apr2021. It was unknown if an autopsy was performed or not. The patient passed away at home and he was otherwise healthy. The reporter stated there was not a way to know if it was related to the vaccine as of right now. Information on lot number/batch number has been requested.; Sender's Comments: Limited information precludes a medically meaningful assessment of the case. A possible contributory role of the suspect product BNT162B2 to the development of event Sudden death cannot be totally excluded. The case will be reassessed if additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: suddenly passed away
4/19/2021	1228372	NJ	79	M	2/12/2021	4/14/2021	Patient's wife called in mid March 2021 letting us know that the patient, needed to re-schedule his 2nd dose of Moderna Covid-19 vaccine - he had missed his scheduled 2nd dose date due to being hospitalized - doctors had thought he might need a defibrillator but then discharged him without one. Patient's wife called back on 4/16 to let us know that he passed away on 4/14.

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4/19/2021	1227970	OH	88	F	3/3/2021	3/9/2021	Mom died of a Brain Stem stroke; This is a spontaneous report from a contactable consumer (who reported for the mother). An 88-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration in the left arm on 03Mar2021 at 11:30 (at the age of 88-year-old) (Lot Number: EN6198) as single dose for COVID-19 immunisation. The patient was not tested for COVID-19 after vaccination. Relevant medical history included COVID-19 prior of vaccination. Concomitant medication included atorvastatin (LIPITOR) taken for an unspecified indication, start and stop date were not reported. On 09Mar2021 at 09:45, the patient experienced a brain stem stroke; the event required emergency room visit, the patient was hospitalized on 09Mar2021 and the event was considered serious also as life-threatening and causing disability. The patient received unspecified corrective treatments. The patient died due to brain stem stroke on 11Mar2021. An autopsy was not performed.; Reported Cause(s) of Death: Brain stem stroke

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4/19/2021	1227977	IN		M	3/24/2021	3/26/2021	<p>Pulmonary embolism/ blood clot/ passed out; This is a spontaneous report from a contactable consumer (patient's daughter). A male patient of an unspecified age received BNT162B2 (Pfizer COVID-19 vaccine), dose 1 via an unspecified route of administration, administered in arm, side unknown, on 24Mar2021 14:30 (Lot Number: EN6208) as single dose for COVID-19 immunisation. Vaccination facility type was clinic. Medical history included colon cancer in 2011. He had cancer in 2011 but resolved that year without chemotherapy or radiation. His lab work was good. There were no concomitant medications. No prior vaccinations (within 4 weeks). No family medical history relevant to AE. The patient experienced pulmonary embolism on 26Mar2021 with fatal outcome. The reporter was reporting on the Pfizer COVID vaccine that her father received. She stated he died from a blood clot after receiving the first dose. Stated she needs help because he had no health issues and he died. She just wanted this information to be out there and for people to be aware. This morning they had been reading on the news that the Johnson and Johnson vaccine is on hold. It seems to be put on the market without research. She felt like her father was a guinea pig. Her mother didn't want to get her second dose. Stated there seems to be an issue with Pfizer too. Her father had no issues whatsoever. His death certificate stated the cause of death was a pulmonary embolism, but he had no history of blood clots. Passed away Friday 26Mar2021 at 11:33 am. The reporter stated when he went to Emergency Room they thought he was having a heart attack. All physicians were wondering what happened because he had no health issues. The event required a visit to the emergency room that day because he passed out at his job. The patient underwent lab tests and procedures which included lab work: good in 2011. The patient died on 26Mar2021. An autopsy was performed that revealed pulmonary embolism.; Reported Cause(s) of Death: Pulmonary embolism; Autopsy-determined Cause(s) of Death: Pulmonary embolism</p>

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4/19/2021	1227979	TX		M		3/1/2021	got clots all over the body; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date as single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient experienced got clots all over the body in Mar2021 and he passed away. Pfizer has not been reporting any effects of blood clot. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: got clots all over the body

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4/19/2021	1227980	TX	51	M	3/27/2021	3/1/2021	Blood Clot/The Blood clot was in the legs and went to his lungs; Blood Clot/The Blood clot was in the legs and went to his lungs; fell; Leg pain; This is a spontaneous report from a contactable consumer. A 51-year-old male patient received his first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on 27Mar2021 (Batch/Lot Number: EP6955) as single dose for covid-19 immunisation. Medical history included thrombosis from 2020 to an unknown date, it was Months ago in 2020, He was prescribed a medicine for blood clots, but since then he has had no issues, anxiety from an unknown date and unknown if ongoing. Her brother in law had anxiety about even getting the vaccine. The patient experienced leg pain on Mar2021 , pulmonary thrombosis, leg thrombosis and fall on an unspecified date. The patient died on 02Apr2021. An autopsy was not performed. The clinical course was the following: The Blood clot was in the legs and went to his lungs, his leg never got red or anything and it was a blood clot. He was having such bad leg pain, it's too bad, had there been some sort of warning, he would have thought to wait till next year. There was nothing the day he got vaccine, but that night his leg started hurting, his girlfriend said let me go get a cold wrap and she wrapped it, he's a farmer. He wakes up the next day and his leg is still hurting, the 3rd day it goes on, his leg still hurting and no one is thinking it a blood clot, he calls the doctor and tells the doctor his leg is hurting, they suggest ibuprofen for inflammation, the next day thought maybe it's better, by Friday he was making breakfast, fell and died. With his girlfriend she said what's going on, and he went straight to hospital, they said the clot in his leg went to the lung. The Blood clot when it was in the leg it never got hot, red, or anything like that. He had the vaccine in the morning and on that same day the leg pain started later that night. It Started out with Leg Pain, she does not know if it was right or left but it was just one leg.; Reported Cause(s) of Death: Thrombosis pulmonary; Thrombosis leg; Fall; Leg pain

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4/19/2021	1228009		76	M	3/14/2021	4/11/2021	respiratory and cardiac arrest Narrative: Patient with PMH of esophageal cancer, larynx cancer, liver cancer, PTSD, A. fib, and alcohol abuse. He received his COVID-19 vaccines on 2/14/21 and 3/14/21. Both vaccines were administered without complications and patient was observed for 15 minutes post-vaccination without adverse effects. No other adverse events noted between time of last COVID-19 vaccinations and death. On 4/11/21, patient's wife called 911 in which EMS found patient unresponsive with abnormal breathing. Wife reported that patient was breathing up until 5 minutes prior to EMA arrival, but had been unresponsive. Wife reports that patient suffered from multiple forms of cancer, PTSD, and alcohol abuse. Wife believed that patient quit smoking and drinking but the morning of death found vodka and cigarettes in his coat. Wife reports that patient asked for help getting up from the stairs and then laid down in the bed, and went unresponsive afterwards. EMS attempted to revive the patient with CPR but were unsuccessful. Per EMS note patient suffered from respiratory arrest, cardiac arrest, then cardiac death. Patient was not brought to the hospital prior to death. It is very unlikely that the COVID-19 vaccinations contributed to this patient's death due to his extensive PMH with substance use disorder and cancer.
4/19/2021	1228351	NC	35	M	3/4/2021	3/8/2021	He died unexpectedly early in the morning. He woke up suddenly, said he needed help, and then was gone.

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4/19/2021	1227927	NC		U			PASSED AWAY; This spontaneous report was received from a partner, and concerned a 64 year old patient of an unspecified sex. The patient's height, and weight were not reported. The patient's past medical history included strokes; concurrent conditions included heavy smoker, caffeine consumption, unspecified heart issues, and felling unwell. The patient received Covid-19 vaccine Ad26.COV2.S (suspension for injection, route of admin, and batch number were not reported) dose, vaccination site, and start therapy date were not reported, for prophylactic vaccination. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient passed away. It was reported that the patient received Covid-19 vaccine in the morning and passed away later that day. The patient had felt unwell upon waking up that morning prior to vaccination. The coroner ruled out the vaccine as a potential cause of death due to the individual's past and concurrent medical conditions. It was unspecified if an autopsy was performed. Action taken with Covid-19 vaccine Ad26.COV2.S was not applicable. This report was serious (Death).; Sender's Comments: V0: A 64-year-old patient of unspecified sex received the Janssen COVID vaccine in the morning and died later that day. The coroner ruled out the vaccine as a potential cause of death due to the individual's past and concurrent medical conditions, although these conditions weren't specifically reported. Given the coroner's assessment and symptoms preceding vaccination, there is a plausible alternate explanation for the death.; Reported Cause(s) of Death: PASSED AWAY
4/19/2021	1230493	KS	66	M	1/29/2021	2/16/2021	Patient had just been advised that his cancer had stopped growing and would be able to resume his immunotherapy drug Tagrisso. After receiving his first dose he went downhill very quickly. On the evening of 2/23 he had an unexplained seizure and went to the ER through 2/26. He was discharged to Hospice and passed away on 2/28.
4/19/2021	1230024	FL	57	F	3/18/2021	3/31/2021	Shortness of breath, hypoxia, Pulmonary Embolism, intubation death.

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4/19/2021		1230054	TX	82	M	1/31/2021	2/1/2021	Pfizer COVID-19 Vaccine EUA Patient received vaccine dose #1 on 1/14/2021 and Dose #2 on 1/31/2021. Patient presented to ED on 2/1/2021 with complaints of acute mental status change. He was recently diagnosed with enterocoal/pseudomonas UTI four days prior to presenting to ED and was being treated with Augmentin and Levaquin. Patient screened positive for COVID-19, with the sample analyzed using PCR or equivalent. Patient suffered a cardiac arrest on 2/7/2021 x3, developed three pressor shock, and required maximum ventilator settings. Patient subsequently expired.
4/19/2021		1230079	IN	73	M	2/19/2021	3/27/2021	My husband passed away two weeks and one day after getting his last vaccine
4/19/2021		1230230	CA	64	M	3/25/2021	3/26/2021	Fatigue, dizziness, heart attack and death
4/19/2021		1230283	NC	75	M	3/29/2021	3/29/2021	Reported to the vaccination clinic by county EMS: Pt expired at his home following a call to 911 for a cardiac event for which resuscitation efforts were unsuccessful. This occurred on the same day as his last dose of the Moderna vaccine.
4/19/2021		1230357	LA	70	F	4/14/2021	4/14/2021	On the morning of Friday 4/16/21, patient came to vaccine clinic to let us know that his wife passed away the night of her second dose of her Pfizer covid vaccine. He states that she complained of arm pain at the injection site that evening (4/14/21) and went to bed around 9:30pm because the pain was excruciating. He said around 2:00am, she woke up stating she couldn't breathe. This has happened before, so she went and sat up in the living room which helped her last time. For whatever reason, she then went into her bedroom where he said she fell out. He noticed foam coming from her mouth and called 911. EMS was unable to revive her. She passed away at home.
4/19/2021		1230008	AL	73	F	3/10/2021	4/16/2021	Patient presented to ER on 4/16/21 complaining of chest pain. Patient stated she had the J&J vaccine a month ago and had been having problems. She was also being seen by a cardiologist.
4/19/2021		1230389	VA	65	F	3/8/2021	3/15/2021	High fever, severe night sweats, blood clots in lungs

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4/19/2021		1230246	NJ	62	M	3/15/2021	3/20/2021	My husband developed severe COVID symptoms, despite testing negative for COVID via pcr tests on Sunday 3/21 /21 and Tuesday 3/23. He was hospitalized on 3/28 due to low blood oxygen levels. Was diagnosed with COVID and pneumonia. Treated with remdesivir and a steroid, then monoclonal antibodies. Despite making progress to the extent doctors were cautiously optimistic on 4/9/21 he would be discharged on 4/16/21, he instead was transferred to ICU on 4/10/21, placed on a ventilator on 4/11/21 and died on 4/15/21.
4/19/2021		1230868	NY	72	M	4/1/2021	4/3/2021	My dad took vaccine 4/1 5pm, he had arm pain 4/2 morning, felt like fever in the afternoon. After 5pm, he compliant with joint pain. He was found on the floor dead 4/3 at 1am at home.
4/19/2021		1230879	CA	68	M	3/1/2021	3/1/2021	Heavy lethargy followed by death.
4/19/2021		1231112	FL	87	F	3/22/2021	3/24/2021	Patient was admitted to the hospital approximately 2 days after receiving the Moderna vaccine. She was under Hospice care before receiving the vaccine.
4/19/2021		1231272	LA	68	F	2/10/2021	2/11/2021	PATIENT RECEIVED THE WND INJECTION APPROX 4:00PM. DAY OF - INITIAL COMPLAINT CHRONIC FATIGUE AND REDNESS & TENDERNESS AT THE INJECTION SITE. NEXT DAY CHRONIC FATIGUE, REDNESS AND TENDERNESS AT THE INJECTION SITE. APPROX 9:30 PM PATIENT COMPLAINED OF A POUNDING HEADACHE AND FATIGUE. SHE DIED A FEW HOURS LATER. CORONER'S OFFICE PROCLAIMED TIME OF DEATH APPROX MIDNIGHT THURSDAY NIGHT/FRIDAY MORNING.
4/19/2021		1229152	NJ	65	F	4/16/2021	4/17/2021	101.5 fever Friday night, followed by a seizure at 3am. She was found unresponsive late Saturday afternoon, and was pronounced dead at the hospital. Sudden cardiac arrest.
4/19/2021		1228986		79	F	2/6/2021	4/18/2021	Death
4/19/2021		1230371	IL	44	M	4/10/2021	4/13/2021	Patient passed away on 4/13 after presenting to local hospital with near syncope and AKI. Records from local hospital are unavailable, unclear regarding cause of death and circumstances thereof.

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4/19/2021		1229366		73	M	3/3/2021	3/9/2021	Hospitalization and death within 6 weeks of receiving COVID vaccination.
4/19/2021		1229211	FL	80	F	3/20/2021	4/6/2021	hemorrhage in the brain
4/19/2021		1229214	NY	62	F	4/9/2021	4/13/2021	WE RECEIVED A CALL ON TUESDAY AFTERNOON THE 13TH OF APRIL FROM THE MEDICAL EXAMINER REQUIRING INFORMATION ON HOW TO CONTACTB THE PATIENT'S DOCTOR. WHEN ASKED AS TO WHAT HAPPENED WE WERE TOLD THAT THE PATIENT WAS FOUND DEAD IN HER APARTMENT ON TUESDA.Y. WE DID INFORM THEM THAT THE PATIENT HAD RECEIVED THE JANSSEN VACCINE AT THE PHARMACY ON FRIDAY THE 9TH. WE DONT KNOW THE CAUSE OF ADVERSE EVENT.
4/19/2021		1230324	CT	59	M	3/9/2021	3/10/2021	Fatigue, , Body aches, Swollen hands (noted on the 27th), Death (31st)
4/19/2021		1229270	CA	79	M	3/8/2021	3/15/2021	Fever and diarrhea following a couple days after the vaccine Being administered. The day prior to hospital emergency admission uncontrollable throwing up extreme side/Stomach/chest pain. Was taken by ambulance to emergency.
4/19/2021		1229917	CA	69	M	3/25/2021	4/2/2021	4/3/21 at 0052 during Q15 rounds the patient was found laying awake on the floor next to his bed. He denied falling. Vitals showed BP 95/57, Temp 96, O2 sat 77%. He was evaluated and transferred to an acute care hospital with cardiac specialty. He was found to have elevated triponin and chest x-ray showed lung infiltrates; COVID test was negative. Diagnosis was MI and pnuemonia. He received a right coronary artery stent. The patient was intubated on full ventilation support. On 4/4/21 the patient went into cardiac arrest 3 times and was resuscitated. On 4/5/21 his condition declined and he went into cardiac arrest again and was resuscitated around noon. The patient died in acute care on 4/7/21 at 0608.
4/19/2021		1229390	NE	61	M	3/18/2021	4/18/2021	Pt found unresponsive in hospital room with large amount of vomit. Patient pronounced dead shortly after with cause of death noted to be aspiration pneumonia with hypoxemia leading to cardiac arrest. Pt received vaccine 1 month prior so I wanted to report this.

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4/19/2021		1229396		76	F	3/9/2021	3/12/2021	Death R41.82 - Altered mental status N39.0 - Urinary tract infection N17.9 - Acute kidney injury (CMS/HCC) A41.9 - Sepsis (CMS/HCC)
4/19/2021		1229552	AL	50	F	4/16/2021	4/16/2021	We administered the second dose of the Moderna COVID-19 vaccine on Friday, April 16th. We were contacted by the patients family to report that the patient began a fever and chills the night of 4/16, she subsequently began having nausea, vomiting, and sweating followed by a seizure, and was taken to the emergency department where she died the following day. She was encouraged to receive the vaccine at the encouragement of her oncologist.
4/19/2021		1229825		85	F	3/31/2021	4/1/2021	Death
4/19/2021		1229734		73	F	2/16/2021	4/1/2021	Death
4/19/2021		1229797	GA	72	M	3/29/2021	4/4/2021	Patient was vaccinated on 3/29/2021 with dose 1 of Moderna. Patient developed COVID symptoms on 4/4/2021 and passed away on 4/16/2021.
4/19/2021		1229805		72	M	2/6/2021	3/19/2021	Death
4/19/2021		1229810	AZ	88	F	2/16/2021	2/17/2021	No adverse reactions
4/19/2021		1229733	AL	68	M	3/9/2021	3/10/2021	PATIENT DIED THE DAY AFTER GETTING VACCINE
4/19/2021		1229218	TX	81	F	3/31/2021	3/31/2021	My mom had a brain aneurysm 45 minutes after receiving her second Covid vaccine on Wednesday, March 31st, 2021. She was rushed to Medical Center. After her CT Scan she was put on Life support that morning. After consulting with Doctors we took her off Life Support at 4:00 pm on Friday April 2nd and she passed away 29 hours later at 9:00 pm on Saturday, April 3rd.
4/19/2021		1229878	WA	58	M	3/23/2021	4/3/2021	Dissection of the right ICA with occlusion of the right ICA, right MCA and portions of A1 segment of the ACA
4/19/2021		1229048		59	F	4/5/2021	4/11/2021	Patient received the COVID vaccine and one week later had a fatal brain aneurysm.
4/18/2021		1225829	CA	61	F	3/17/2021	3/17/2021	Extreme weakness & Fatigue Dizziness Fainting Death 04/09/2021

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4/18/2021	1225566	WI	81	M	2/11/2021	2/18/2021	Patient had a sudden change in status one week after receiving his first Moderna Covid 19 vaccine. He had sudden onset of tachypnea RR = 40/min, apparent severe pain, greatly elevated blood pressure, with normal heart rate (on beta blocker), diaphoresis. had been enrolled in hospice for 14 months prior to this episode, but had experienced only slow decline prior to this acute event. He died at home under hospice care on 2/27/2021.

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4/18/2021	1224923		73	M	4/6/2021	4/9/2021	<p>My uncle died three days after taking the vaccine; he felt strange and he felt like something was in his throat; he felt like he wasn't doing well; This is a spontaneous report from a contactable nurse reporting for her uncle. A 73-years-old male patient received bnt162b2 (BNT162B2), via an unspecified route of administration on 06Apr2021 (Batch/Lot number was not reported) as single dose for covid-19 immunisation . Medical history included psoriasis , cardiac pacemaker insertion on an unknown date (He recently had a pacemaker implanted several months ago) , hypertension from an unknown date. The patient died three days after taking the vaccine on 09Apr2021 , he felt strange and he felt like something was in his throat on 09Apr2021 with outcome of unknown. The patient underwent lab tests and procedures which included blood pressure measurement: 150/90 on 09Apr2021. It was not reported if an autopsy was performed. Course of the event: The reporter's uncle died three days after taking the vaccine. He was at home getting ready to watch a basketball game with the reporter's aunt when he began to complain that he felt strange and he felt like something was in his throat. Both the patient and the reporter's aunt are also RN's. My aunt checked his BP and the first time it was 150/90. His BP was taken a second time but the reporter cannot remember what the 2nd reading was. He then said he was going to the bathroom and asked her to call # because he felt like he wasn't doing well. The reporter's aunt called #, and assisted the reporter's uncle to lay down in bed. She remained on the phone with #who arrived at the scene shortly thereafter. They performed CPR at the scene and he was transported to the hospital. The reporter believes the patient was pronounced dead at home. The patient was about 5"10, heavy set stature. He recently had a pacemaker implanted several months ago and has a history of psoriasis and HTN. There is additional concomitant medical history I will have to confirm. Information about lot/batch has been requested.; Sender's Comments: The information available in this report is limited and does not allow a medically meaningful assessment for the reported patient's sudden death. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer</p>

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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: My uncle died three days after taking the vaccine

the client died yesterday; This is a spontaneous report from a non-contactable other healthcare professional (hcp) from a Pfizer-sponsored program. A patient of unspecified age and gender received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE, Solution for injection, lot number and expiry date were not reported) via an unspecified route of administration on an unspecified date at a single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient died on 08Apr2021. The cause of death was unknown. It was unknown if an autopsy was performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Sender's Comments: Death of unknown cause is assessed related as a cautionary measure and for reporting purposes. 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: the client died yesterday

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4/18/2021	1224899	IL	94	F	3/23/2021		<p>passed away; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported that a 94-year-old female patient (reporter's mother) received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 1 via an unspecified route of administration on 23Mar2021 (Batch/Lot number was not reported) as a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient passed away on an unspecified date. It was unknown if an autopsy was performed. The reporter said that patient died because she is 94 years old and not with the vaccine. Information on the lot/batch number has been requested.; Sender's Comments: Based on the available information, this female patient death is attributed to her advanced age (94 years old) and assessed unrelated to BNT162B2 vaccine.; Reported Cause(s) of Death: passed away</p>

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4/18/2021	1224884	VA	81	F	2/2/2021	2/18/2021	Shock; Reduced Central pulse volume; Loss of consciousness; potential anaphylactic reaction; found unresponsive in a swimming pool; This is a spontaneous report received from a contactable Physician. An 81-year old female patient received her second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 02Feb2021 (Batch/Lot number was not reported) as SINGLE DOSE for covid-19 immunisation. Medical history included cardiac arrest, congestive heart failure, difficult breathing and arrhythmia. Concomitant medications included metoprolol; omeprazole; propranolol; duloxetine; fosinopril; pravastatin; hydrochlorothiazide, triamterene (TRIAMTERENE HCTZ); levothyroxine sodium (SYNTHROID); insulin glargine (BASAGLAR); asa and ranitidine hydrochloride (ZANTAC). The patient previously minocycline for swelling and the patient had a historical vaccine of shingrix on 11May2020. The patient received her first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 12Jan2021 for covid-19 immunisation. The reporter stated that the patient was found unresponsive in a swimming pool on 18Feb2021. The patient also experienced shock, reduced central pulse volume and loss of consciousness and potential anaphylactic reaction on an unspecified date. The patient did not received any recent vaccines for SARS-CoV2 other than Pfizer_BioNtech COVID-19 Vaccine prior to the event being reported. The patient died on 22Feb2021. It was not reported if an autopsy was performed. Outcome of the events was fatal. Information on Lot/Batch number has been requested.; Sender's Comments: Based on temporal association, a contributory role of BNT162B2 to the reported events cannot be excluded. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: found unresponsive in a swimming pool; Shock; Reduced Central pulse volume; Loss of consciousness; potential anaphylactic reaction

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4/18/2021	1224535	IL		U	3/16/2021	3/16/2021	decreased fetal movement; decreased fetal heart tones; 34 weeks pregnant; This is a spontaneous report from a contactable pharmacist. This pharmacist reported information for both mother and fetus. This is a fetus report. A fetus patient of an unspecified gender received the first dose of bnt162b2, transplacental on 16Mar2021 (Lot Number: Unknown) as single dose for covid-19 immunisation. The 31-year-old mother received this vaccine via Intramuscular. The patient medical history and concomitant medications were not reported. The mother presented to obstetrician office 2 weeks after covid vaccine with complaints of decreased fetal movement. Mother was taken to emergency c-section due to decreased fetal heart tones in the office. Baby was delivered with apgars of 0 and ultimately fetal demise. Mother was 34 weeks pregnant and had an otherwise uncomplicated pregnancy. The onset date of events decreased fetal movement and decreased fetal heart tones was 30Mar2021. The events were result in Doctor or other healthcare professional office/clinic visit and hospitalization for 3 days. The outcome of the events was fatal. The patient died on an unspecified date in 2021 due to events. It was not reported if an autopsy was performed. Information on the Lot/Batch number has been requested.; Sender's Comments: The reported events are likely due to an intercurrent condition and not related to BNT162B2 .,Linked Report(s) : US-PFIZER INC-2021359597 Mother case; Reported Cause(s) of Death: 34 weeks pregnant; decreased fetal movement; decreased fetal heart tones
4/18/2021	1224177	GA	29	F	2/24/2021	3/12/2021	Blood clot blocking blood flow to brain - 1st episode: (3/12/21) stabilized, minor limited movement left side - 2nd episode: (3/24/21) no blood flow to brain, death (maintained on life support for organ donation)

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4/18/2021	1224058		57	F		3/13/2021	<p>PAIN; DEATH; HEART FAILURE; This spontaneous report received from a consumer concerned a 57 year old female. The reporter obtained the information from news/media. The patient's height, and weight were not reported. The patient's concurrent conditions included bronchitis. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, 1 total start therapy date were not reported for prophylactic vaccination. The batch number was not reported. Per procedure, no follow up will be requested for this case. No concomitant medications were reported. On an unspecified date, the patient took vaccine and experienced pain. On 09-MAR-2021, the patient experienced wet cough; she said her cough was different. On 11-MAR-2021, the patient went to work and sweat profusely and blamed the A/C in her office. On 12-MAR-2021, the night before the patient passed, she was exhausted and went to bed. On 13-MAR-2021 08:00, the patient made a horrible noise, tried to revive in her bed to no avail. The paramedics worked on her on the floor of her bedroom, ambulance and finally the hospital. On 13-MAR-2021, the patient experienced heart failure. On 13-MAR-2021 09:00, the patient died from unknown cause of death. An autopsy was performed on an unspecified date. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome of heart failure and pain was not reported. This report was serious (Death, Other Medically Important Condition).; Sender's Comments: V0: 20210417613 -covid-19 vaccine ad26.cov2.s -Death and heart failure. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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4/18/2021	1227286			M			within two weeks of receiving the vaccine the patient died; This is a spontaneous report based on information received by Pfizer from Merck & Co., Inc. A contactable Consumer reported for a male patient of an unspecified age that received bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date as single dose for covid-19 immunisation. The patient medical history and the patient's concomitant medications were not reported. The patient died within two weeks of receiving the vaccine on an unspecified date. 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: within two weeks of receiving the vaccine both family members died
4/18/2021	1225854	PA	53	M	4/6/2021	4/16/2021	Death, 04/16/2021

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4/18/2021	1224836	FL		M		4/6/2021	Guillain-Barre Syndrome; urinary incontinence; confusion; lethargy; dehydration; expired; This is a spontaneous report from a contactable physician. A 76-year-old male patient received second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot and expiry were not reported), via an unspecified route of administration on an unspecified date as single dose for covid-19 immunisation. The patient received first dose of bnt162b2 on an unspecified date for Covid-19 immunization. The patient's medical history and concomitant medications were not reported. The physician reported that the patient received his second Pfizer vaccine dose and 2 weeks after receiving the vaccine he presented to her office with urinary incontinence, confusion and lethargy. He was admitted to the hospital and within a few days later, day 5, he was diagnosed with Guillain-Barre Syndrome. Following tests and a lumbar puncture. He was hospitalized x2 weeks, received IVIG x 5days. He was then transferred to a Nursing Home. He was readmitted to the hospital with dehydration and expired 2 days later (last night). The physician asked, "have you seen this type of thing before, with GBS?" The physician considered the case as non-serious. The outcome of the events was unknown except for expired. The patient died on 06Apr2021 as he expired. There was no autopsy done. Information on the lot/batch number has been requested.; Sender's Comments: Limited information precludes a medically meaningful assessment of the case. Based on the current available information, a possible contributory role of the suspect product to the development of events cannot be totally excluded. Additional information including relevant medical history, detailed clinical course, and specified concomitant medications is required to better assess 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: expired

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4/18/2021	1227320	CA	71	M	1/16/2021	1/18/2021	about 2 days after the 1st dose of the moderna vaccine, felt very tired and unwell for several days. He felt okay for about 2 weeks then on January 29, 2021 he felt intense chest pain. Concerned it was a heart attack, he was brought to the hospital. He stayed one night and the hospital ran several tests like EKG, stress test and others. Found his results to be normal and was released on January 20, 2021. Even the moment he was released, he felt very dizzy but hospital was not concerned and thought maybe side effect of medication. He continued to feel dizzy, fuzzy brain and hard time staying awake during the day and sleeping through the night for the rest of the week. He passed sometime in the early hours of February 6, 2021. Doctor's suspicion is a blood clot. He has no history of blood clots, heart problems or any health issues.
4/18/2021	1225942	WI	16	F	3/19/2021	3/28/2021	Patient was a 16yr female who received Pfizer vaccine 3/19/21 at vaccine clinic and presented with ongoing CPR to the ED 3/28/21 after cardiac arrest at home. Patient placed on ECMO and imaging revealed bilateral large pulmonary embolism as likely etiology of arrest. Risk factors included oral contraceptive use. Labs have since confirmed absence of Factor V leiden or prothrombin gene mutation. Patient declared dead by neurologic criteria 3/30/21.
4/18/2021	1226135	VA	84	F	2/12/2021	2/19/2021	My mother died in the hospital after being in the ICU for a week with severe breathing problems. Her symptoms matched that of a Covid patient but she tested negative for Covid twice (once was the 24 hour test).
4/18/2021	1226196	CT	56	M	4/16/2021	4/18/2021	Patient arrived to Hospital in cardiac arrest 48 hours after administration of the Pfizer Vaccine.
4/18/2021	1226364	NJ	80	M	3/5/2021	3/16/2021	Patient developed unspecified pneumonia which led to extremely high troponin levels. Patient died due to cardio pulmonary disease due to complications from COVID vaccine.

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4/18/2021		1227130	OH		M		3/12/2021	<p>PNEUMONIA; BLOOD CLOTS; This spontaneous report received from a consumer concerned an 89 year old male. Initial information was received on 13-APR-2021 and processed with additional information received on 15-APR-2021. The patient's height, and weight were not reported. The patient's past medical history included congestive heart failure (ejection fraction 20%), large lower left groin hernia, atrial fibrillation, and dementia. No known drug allergies was reported. There was no history of blood clots. The patient received vaccination with covid-19 vaccine ad26.cov2.s (suspension for injection, intramuscular, batch number: Unknown) dose was not reported, administered on 04-MAR-2021 for prophylactic vaccination. Vaccination site was not reported. Batch number was not reported, will be requested. Concomitant medications included apixaban twice a day for atrial fibrillation. On 11-MAR-2021, the patient was taken to Emergency Room (ER) and diagnosed with pneumonia. Patient was awake over 48 hours 'felt due to dementia and illness'. On 14-MAR-2021, the patient was taken back to hospital and X-ray and CAT scan showed saddle pulmonary embolism. On 15-MAR-2021, the patient was discharged to a home with hospice. On 23-MAR-2021, the patient deceased. It was unknown if autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, Hospitalization Caused / Prolonged).; Sender's Comments: V0: An 89-year old man experienced fatal saddle pulmonary embolism 10 days after vaccine. Relevant medical history included congestive heart failure with ejection fraction 20%, atrial fibrillation (A Fib), and dementia. Relevant concomitant medication (others not reported) included Eliquis for A fib. The patient was diagnosed with pneumonia in the Emergency Department 7 days after vaccine, and 3 days later was brought back to the hospital and diagnosed with saddle pulmonary embolus. He was discharged home on hospice the next day and died 19 days after vaccine. There was no reported thrombocytopenia. The patient's age, concurrent pneumonia, and complicated past medical history are confounders. There is insufficient information to make a meaningful medical assessment. Additional information has been requested, including attempts to contact the patient's treating physicians.; Reported Cause(s) of Death: PNEUMONIA; BLOOD</p>

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								CLOTS
4/18/2021		1227272	MD	83	F	3/8/2021	3/9/2021	<p>massive stroke; massive blood clot in brain next day; This is a spontaneous report from a contactable healthcare professional. An 83-year-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 08Mar2021 10:00 (Batch/Lot number was not reported) as a single dose for COVID-19 immunization. There were no medical history and concomitant medications. Patient is not pregnant at the time of vaccination. Patient did not receive any other vaccines within 4 weeks and no other medications within two weeks prior to the COVID vaccine. The patient was not diagnosed with COVID-19 prior to vaccination. Patient has not been tested for COVID-19 since the vaccination. Patient has no known allergies. On 09Mar2021 19:00, patient had massive blood clot in brain and stroke. AE resulted in: emergency room/department or urgent care, hospitalization, life threatening illness (immediate risk of death from the event). Patient died on 13Mar2021 with cause of death: massive stroke. Outcome of the event "massive blood clot in brain next day" was unknown. Autopsy was not performed. Treatment received for AEs include anticoagulant. Information on the lot/batch number has been requested.; Sender's Comments: Based on the current available information and the plausible drug-event temporal association, a possible contributory role of the suspect product BNT162B2 to the development of events Stroke and Thrombosis cerebral cannot be totally excluded. The case will be reassessed if additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: massive stroke</p>

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4/18/2021		1227282	GA		U			I know a physician in died afterwards; This is a spontaneous report from a Pfizer-sponsored programs from a contactable consumer. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (Lot number was not reported) as single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient knows a physician and died afterwards on an unspecified date. It was unknown if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: I know a physician in (name) died afterwards
4/18/2021		1227287			M			within two weeks of receiving the vaccine both family members died; This is a spontaneous report based on information received by Pfizer (Case Number: 01903495). A contactable Consumer reported for two family members. A male patient of an unspecified age received bnt162b2 (BNT162B2), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for covid-19 immunisation . The patient medical history and concomitant medications were not reported. The patient died on an unspecified date within two weeks of receiving the vaccine . It was not reported if an autopsy was performed. No follow-up attempts are possible, information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Unknown cause of death

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4/18/2021	1227279	NJ	67	F	3/14/2021	4/4/2021	heart attack; stopped breathing; This is a spontaneous report from a contactable consumer. A 67-year-old female patient (mother) received second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE; lot number and expiry date: unknown), via an unspecified route of administration on 14Mar2021 (67-year-old) as single dose for COVID-19 immunization. Medical history included Hypothyroid, Sleep Apnea, Known allergies: Shellfish, Sulfa, Possible Tree Nut allergy. Patient is not pregnant. Concomitant medications included levothyroxine sodium (SYNTHROID); apixaban (ELIQUIS); senna [senna alexandrina]; valsartan; clopidogrel; metoprolol; atorvastatin; macrogol 3350 (MIRALAX). The patient previously took vitamins, Claritin , first dose of bnt162b2 on 24Jan2021 01:00 PM (67-year-old) for COVID-19 immunization and exactly 3 weeks after the first dose, the patient had a heart attack and stroke. Exactly 3 weeks after the second dose (04Apr2021), the patient stopped breathing and died. It was reported that death cause was unknown but also likely heart attack (unspecified date). Ae resulted in: [Emergency room/department or urgent care, Hospitalization, Life threatening illness (immediate risk of death from the event), Disability or permanent damage, Patient died]. Number of days hospitalization is 10. Patient had no covid prior vaccination. The patient was covid tested post vaccination. The patient underwent lab tests and procedures which included covid test (Nasal Swab): negative on an unspecified date. The patient died on 04Apr2021. An autopsy was not performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: stopped breathing; death cause: likely heart attack
4/18/2021	1225903	UT	78	F	2/1/2021	2/4/2021	Brain Bleed - Hemorrhaging Stroke
4/17/2021	1222469	KY	52	M	4/15/2021	4/16/2021	REPOERTED BY FAMILY MEMBER THAT THEY FOUND PATIENT DEAD IN SLEEP, NOT BREATHING SUSPECTING HEART ATTACK...AUTOPSY WILL BE PERFORMED
4/17/2021	1222565	PR	93	M	3/3/2021	3/5/2021	Resident was in Hospice and began to stops wallowing. Respiratory cardiac arrest

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4/17/2021	1222742	CT	84	M	4/14/2021	4/16/2021	This patient was admitted to Hospital, and subsequently transferred with acute coronary syndrome and cardiogenic shock two days after receiving a COVID-19 vaccination. He died of complications of acute coronary syndrome on April 17, 2021.
4/17/2021	1222817	MI	60	F	4/9/2021	4/14/2021	Patient called me Wednesday April 14,2021 at 12:44 pm explaining that she was having a hard time breathing that day. Due to her chronic lung health, I didn't think much of it. She passed away in the early hours of Thursday April 15,2021 in her sleep.
4/17/2021	1222837	PR	76	M	3/3/2021	3/25/2021	On 3/25/2021 POC alleges that the resident begin to develop fever and urine infection. He was transferred to the hospital on 3/26/2021 where he had white secretions in his mouth. On 3/28/2021 he died in the hospital from respiratory cardio failure.
4/17/2021	1222399	PR	75	M	3/3/2021	3/20/2021	POC alleges that she observed that resident began to swell and retain fluids and the nurse noticed that he was not urinating, felt a lot of tiredness and had swollen legs. He was evaluated by the doctor and sent for several studies (EKG) and his heart was weakened. He was sent to do another study, because snoring was heard. He was transferred to the hospital to the ER, he had the fluid in his lungs. He is placed intensive and dies on 3/23/2021 from heart failure.
4/17/2021	1222852	PR	101	F	3/31/2021	4/10/2021	The manager says the patient lost her appetite, presented a cough with difficulty swallowing

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4/17/2021	1221915	FL	79	M	3/24/2021		<p>Acute intertribal hemorrhage; Stroke; Starting getting confused; Had a fall; Brain bleeding, brain hemorrhage; Induced coma; This spontaneous case was reported by a consumer and describes the occurrence of CEREBRAL HAEMORRHAGE (Acute intertribal hemorrhage), CEREBROVASCULAR ACCIDENT (Stroke), CONFUSIONAL STATE (Starting getting confused), FALL (Had a fall), HAEMORRHAGE (Brain bleeding, brain hemorrhage) and COMA (Induced coma) in a 79-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No medical history reported). On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) Dosage form. On 24-Mar-2021, the patient experienced COMA (Induced coma) (seriousness criterion medically significant). On an unknown date, the patient experienced CEREBRAL HAEMORRHAGE (Acute intertribal hemorrhage) (seriousness criterion death), CEREBROVASCULAR ACCIDENT (Stroke) (seriousness criterion medically significant), CONFUSIONAL STATE (Starting getting confused) (seriousness criterion medically significant), FALL (Had a fall) (seriousness criterion medically significant) and HAEMORRHAGE (Brain bleeding, brain hemorrhage) (seriousness criterion medically significant). The patient died on an unknown date. The reported cause of death was intra cerebral hemorrhage. At the time of death, CEREBROVASCULAR ACCIDENT (Stroke), CONFUSIONAL STATE (Starting getting confused), FALL (Had a fall), HAEMORRHAGE (Brain bleeding, brain hemorrhage) and COMA (Induced coma) outcome was unknown. Not Provided Concomitant medication not provided. No treatment information/hospitalization information provided. This case concerns death of a 79-year-old male patient who expired from acute intertribal hemorrhage after receiving mRNA-1273 vaccine. three days after vaccine administration, the patient developed confusion and fell with subsequent events ensuing. Based on the available information causal association between the event if confusion leading to fall and product use cannot be excluded. The other events are assessed as directly related to the fall and unlikely due to product use.;</p>

RECVDATE VAERS_ID STATE AGE_YRS SEX VAX_DATE ONSET_DATE SYMPTOM_TEXT

RECVDATE	VAERS_ID	STATE	AGE_YRS	SEX	VAX_DATE	ONSET_DATE	SYMPTOM_TEXT
							Sender's Comments: This case concerns death of a 79-year-old male patient who expired from acute intertribal hemorrhage after receiving mRNA-1273 vaccine. three days after vaccine administration, the patient developed confusion and fell with subsequent events ensuing. Based on the available information causal association between the event if confusion leading to fall and product use cannot be excluded. The other events are assessed as directly related to the fall and unlikely due to product use.; Reported Cause(s) of Death: intra cerebral hemorrhage
4/17/2021	1222851	NY	76	F	3/11/2021	3/12/2021	12 hrs after receiving, did not feel well headache , nausea, 48 hrs later had seizure during sleep ,affecting her speech , speech got worse over the day drs were running test , then had another seizure causing them to resuscitate, hospital was giving he4 seizures medications , she was giving 5 and a small amount of sedation, 1# days later they had them almost to a halt , ran several test to determine what could have caused the seizures and could find no reason , she never regained consciousness, she passed away 18 days later . I would like to know if the vaccine caused the seizures .
4/17/2021	1222390	WA	72	M	3/20/2021	4/1/2021	Patient's wife presented for her 2nd dose of Moderna today. She reported to us that her husband died between his 1st dose of Moderna and now (date not reported). His death was NOT related to COVID.
4/17/2021	1222366	PR	78	F	2/23/2021	4/7/2021	Died a natural death
4/17/2021	1222324	PR	82	F	2/23/2021	3/11/2021	From 3/11/2021 until 3/29/2021 the patient was in the hospital due to lack of appetite and kidney failure. The doctor certifies that the cause was more natural
4/17/2021	1222285	PR	81	F	2/9/2021	2/10/2021	Hospice patient, started with dysphagia. POC of the home refers death by asphyxiation

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4/17/2021	1221916	MA	83	M	2/27/2021	3/29/2021	<p>blood clot in his brain; Patient collapsed on the floor at night 2 days after receiving 2nd dose; brain was dead; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of BRAIN DEATH (brain was dead), CEREBRAL THROMBOSIS (blood clot in his brain) and LOSS OF CONSCIOUSNESS (Patient collapsed on the floor at night 2 days after receiving 2nd dose) in an 83-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 0021B21A and 001821A) for COVID-19 vaccination. The patient's past medical history included No adverse event (no medical history reported). On 27-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 27-Mar-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 29-Mar-2021, the patient experienced LOSS OF CONSCIOUSNESS (Patient collapsed on the floor at night 2 days after receiving 2nd dose) (seriousness criterion hospitalization prolonged). On 30-Mar-2021, the patient experienced CEREBRAL THROMBOSIS (blood clot in his brain) (seriousness criteria death and hospitalization prolonged). The patient died on 08-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, LOSS OF CONSCIOUSNESS (Patient collapsed on the floor at night 2 days after receiving 2nd dose) outcome was unknown. Not Provided</p> <p>DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 30-Mar-2021, X-ray: blood clot (Positive) x-rays revealed blood clot in his brain. No concomitant medications were reported. After the 2nd dose, On 29Mar2021, at night, he collapsed on the floor and was taken at the hospital on same night by ambulance. So he was hospitalized on 30Mar2021 and upon doing tests and x-rays, they found blood clot in his brain. He stayed in hospital through out and transferred to hospice center on 06Apr2021 where he passed away on 08Apr2021. His brain was dead and never recovered from the clot. Unknown treatment medications were given at the hospital. Very limited information regarding these events have been provided at this time. No further information is expected.; Sender's Comments: Very limited information regarding these events have been</p>

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								provided at this time. No further information is expected.; Reported Cause(s) of Death: Unknown cause of death
4/17/2021		1221576	MO	58	M	4/15/2021	4/16/2021	Death
4/17/2021		1223167	NY	74	M	2/13/2021	3/5/2021	My father received the first dose on 2/13, and started to rapidly decline thereafter. He started having neurological issues, memory issues, and balance issues and eventually collapsed and was hospitalized on 3/5, intubated twice in two weeks, with his death occurring on 3/31/21.
4/17/2021		1222868	PR	74	F	3/31/2021	4/8/2021	According to POC the resident was transferred to the hospital on 4/8/2021, due to low pressures, high pulse and cough. They certify death by COVID 19, because it affected the lungs.
4/17/2021		1221918		66	F	1/11/2021	1/11/2021	Died; The initial case was missing the following minimum criteria: Reporter with no first-hand knowledge. Upon receipt of follow-up information on 13Apr2021, this case now contains all required information to be considered valid. This is a spontaneous report from a Pfizer-sponsored program. A non-contactable consumer reported that a 66-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 11Jan2021 (at the age of 66-year-old) (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. Relevant medical history and concomitant medications were not reported. The patient previously received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 21Dec2020 for COVID-19 immunisation. The patient died on 11Jan2021; the cause of death was unknown. On 11Jan2021, the patient experienced cardiac arrest and breathless with outcome unknown. The patient was found pulseless and breathless 20 minutes following the vaccine administration. MD found no signs of anaphylaxis. 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: Died

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4/17/2021		1223971	NY	81	F	3/13/2021	4/4/2021	4/4/21 at 11:30 pm the patient started to make snoring-like sounds in her sleep and could not be woken up. 911 was called and in the hospital a CT scan identified extensive large right-sided intraparenchymal hemorrhage within the frontal, parietal and temporal regions, extending into the ventricular system. The patient was put on the ventilator and administered blood pressure medication. A-line was inserted to read blood pressure. 4/11/21 at 8:11 pm the patient passed away due to cardiac arrest
4/17/2021		1224121	MD	80	M	4/8/2021	4/8/2021	My Husband and I received the same day a strong pain in our left arms. The next day my husband complained about pain in his entire body and weakness, and I had the same. In the evening he collapsed falling out of his wheelchair. He tried for an hour to sit down back in his wheelchair with my help, but he couldn't. He agreed that I call 911. Two nurses took him to Emergency Room at Hospital and didn't allow me to go with him. In the morning on Saturday, he was transferred to Room at Hospital and the next day to the Intensive Care Room, where he sadly passed away on Tuesday April 13 at 4:22 am.
4/17/2021		1223941	FL	30	M	4/9/2021	4/17/2021	Death 4/17/21
4/17/2021		1223867	NM	83	F	12/29/2020	1/18/2021	Approximately 1800, nursing staff reported patient had facial drooping and slurred speech. Patient vitals were stable. Symptoms resolved. 2/1/2021 Resident observed in the bedroom, unresponsive. No heartbeat or lung sounds upon auscultation. Pupils mid-dilated and fixated, no reaction to light. Carotid pulses were not palpable. Pronounced dead at 1422 by nurse practitioner.
4/17/2021		1223800	PA	89	F	1/30/2021	2/15/2021	resident unresponsive verbally and favoring L side with R side flaccid unable to take AM med. The writer obtained BS 90. The resident has R side face drop with drooling noted. The resident responded to painful stimuli only. Pupils dilated. Supervisor at bedside BS 102 rechecked. The family opted for comfort measures only. Age 68 On 2/15/2021 Z51.5: ENCOUNTER FOR PALLIATIVE CARE, Patient expired 2/23/2021

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4/17/2021	1223789	MA	61	F	3/5/2021	3/6/2021	My sister, received the J & J vaccine on March 5th. I now know that she was not feeling well for a few days afterwards. She then felt better until day nine after the vaccine. On the evening of the ninth day, she began having abdominal pain, vomiting & diarrhea, headache. This was Sunday evening. Unfortunately I wasn't aware of how she was feeling and she didn't go to the emergency rm. until Tuesday morning. Tests determined her platelet level was low and abdominal CT showed bleeding from her adrenal glands. She was given platelets, pain meds and admitted into the hospital. Later that night staff felt she wasn't responsive and a head CT was performed. It was determined she had a brain hemorrhage and emergency surgery was performed. It is my understanding that there was brain damage at that point. During the early morning hours of the 10th day, post surgery, a repeat CT scan was done showing more hemorrhaging and blood clots. She also developed a DVT and PE and was kept on a respirator until the 13th day post vaccine to allow family to say their goodbyes. On the morning of the 13th day patient was removed from life support and she passed.
4/17/2021	1223714	MA	36	M	3/20/2021	4/17/2021	This information is second hand, I have not been in contact with next of kin- I am reporting this because I don't know if anyone else including a medical examiner or his PCP would know that he was recently vaccinated. I was told that this patient was feeling sick for a couple of weeks. A friend visited him within the last couple days and he had a migraine headache. When they went to check on him today they found him deceased in his chair. Further investigation would be needed.
4/17/2021	1223683	NY	48	F	1/27/2021	2/12/2021	Patient reported severe headache on 2/12/21 at approximately 3:30 pm followed by vertigo, nausea, vomiting. Patient became unconscious and EMS was called, found patient on floor and she was brought to ED where CT revealed intracranial hemorrhage. Patient was admitted and supportive care given. She had worsening status on 2/17/21 with pupillary reflexes no longer present and withdrawal of care was performed on 2/21/21. Patient expired on 2/22/21.

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4/17/2021		1223669	OR	60	M	4/8/2021	4/11/2021	60 year old male died unexpectedly at home, found 04/11/2021. Last known contact was by phone with his brother on 04/10/2021. Cause of death was determined to be MI due to ASCVD due to tobacco dependence, cigarettes. Autopsy was not requested. This medical examiner was later contacted by the daughter of the decedent to report that he had received the Johnson & Johnson COVID vaccine on 04/08/2021, 2-3 days prior to his death.
4/17/2021		1224144	CA	79	M	3/23/2021	3/24/2021	Developed fever, nausea and vomiting about 24 hours later. Symptoms lasted two days and began to subside, at which time shortness of breath began. Patient drove himself to the hospital for evaluation and treatment on Saturday, March 27th where he collapsed in cardiac arrest. he was resuscitated and stabilized on life support. He died of multiple organ failure on Monday March 29th. The official diagnosis was Severe Septic Shock. It is unclear if any infective agent was identified. It should be noted that sepsis is a condition in which immune dysregulation is inherent and includes cytokine storm activity. The possible correlation between vaccination and the subsequent development of sepsis should be investigated.
4/17/2021		1223644	TX	75	M	4/2/2021	4/3/2021	Not feeling well, malaise, fatigue, intermittent upper stomach pain (sharp) beginning day after vaccine administration lasting 8 days resulting in death on 4/10/21
4/17/2021		1223630	CA	60	F	4/9/2021	4/10/2021	Nausea vomiting throughout the day and continuous the next night, sense on impending doom
4/17/2021		1223378	SC	58	F	3/12/2021	3/16/2021	please find attached document provided by spouse.
4/17/2021		1223371	IL	81	F	2/11/2021	2/25/2021	Patients First dose 01/13/2021 and second dose of Moderna Covid 19 vaccine was administered on February 11th. Patient developed pulmonary embolism in both lungs and hospitalized February 25th. Patient later developed PCP Pneumonia and died March 23rd.

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4/17/2021		1222901	NY	90	M	3/18/2021	3/18/2021	Patient had started peritoneal dialysis at home with me, his wife, 8 days before the second shot. All was going well. We got his second shot on the morig of March 18. His only reaction seemed to be soreness at injection site. At 11 pm we started dialysis as usual, with the cyclor. At 12 pm he was having trouble breathing after just having been filled with 1500 ml of dialysate. This was the first time this happened. I gave hi nitro glycerine and had the cyclor take out the 1500 ml of dialysate, and stopped the therapy for the night. He then felt better, and apologized for waking me up. In the morning he was dead. I believe it is possible that the vaccine tipped the balance of patients already taxed system. As I know that people who have serious diseases and are older are encouraged to take the vaccine, this outcome should be known to the CDC.
4/17/2021		1223056	IL	62	F	2/26/2021	3/14/2021	My wife started to fall and pass out had no strength to get up this happened two to three times cinch she got the shot the last time she past out in the shower and i rushed her to hospital were she pasted away from blood clots to the right side of the neck and stated bleed on the brain
4/17/2021		1223040		74	M	4/2/2021	4/5/2021	Admitted 4/5/2021 with severe cdiff pancolitis, severe sepsis, multi-organ failure. Discharged to hospice on 4/9/2021.
4/17/2021		1223650	FL	37	F	3/12/2021	3/15/2021	In the evening on March 15th, she began having shortness of breath and chest pain. She asked her boyfriend for her blood pressure cuff so she could take her blood pressure. As he was getting it she told him to call 911 and then her eyes rolled back in her head and she stopped breathing. Paramedics attempted to revive her but were unsuccessful. She was taken to the hospital and pronounced dead. Cause of death listed as heart disease.
4/17/2021		1222581	VA	50	M	4/17/2021	4/17/2021	2nd covid vaccine today. Apparently COVID + on 3/29 presumably after the first vaccine. Complained of HA and then went in to cardiac arrest.

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4/16/2021		1219505	IA	87	F	3/3/2021	3/7/2021	STARTING HAVE SEVERE PAIN IN LOWER NECK UP INTO LEFT SIDE OF HEAD SEVERAL DAYS AFTER VACCINE. ER ON 3/15/21 SHOWED ARTHRITIS IN C-3. SENT TO DR FOR FOLLOW UP. 3/17/21 PUT ON ORAL PREDNISONE, PAIN SHOTS X4 IN AREA. 3/19/21 RETURN TO ER, INCREASED PAIN AGAIN, LOSE OF SIGHT IN LEFT EYE, CT SHOWED POSSIBLE VERTEBRAL ARTERIAL OCCLUSION WITH POSSIBLE DISECTION. ADMITTED. ALSO SAW MICRO VASCULAR CHANGES AND ATROPHY. NEURO CONSULT FOR THROMBECTOMY VS MEDICATION MANAGEMENT. PER FAMILY, PAIN MEDS, NO FURTHER MRI OF BRAIN, COMFORT CARES. PT DIED 3/22/21.
4/16/2021		1219334	MO	64	M	3/17/2021	3/22/2021	Death on 3/22. Unknown cause. Family found him unresponsive. Did not pursue autopsy.
4/16/2021		1219229	NE	83	F	2/10/2021	3/2/2021	Pt. c/o symptoms of fatigue and dizziness on 3/2. On 3/3 pt. presents to ER, afebrile, c/o fatigue, feeling of being lightheaded, reports syncope and falling x's 2. Pt. according to MD documentation was in good health. Denies any recent illness. Pt. was found to be bradycardic, sick sinus syndrome, r/o MI. Pt. was transferred to higher level of care hospital on 3/3. Pt. had emergency pacemaker insertion. She became hypotensive and hypoxic post-op and was found to in lactic acidosis. Pt. expired on 3/3/21.
4/16/2021		1219100	KY	54	F	3/17/2021	3/19/2021	This patient was at work two days after her vaccine and went to the bathroom. When she did not come back to work after around 20 minutes, she was found unresponsive and an ambulance was called. The patient was declared deceased at the ER with the cause of death initially as cardiac arrest however a full autopsy was performed and Coroner's office is awaiting that report at this time. We did not know of the death until we went back this week to complete the second round of vaccinations. Since the death happened in such close proximity to the vaccination date we felt it prudent to report.
4/16/2021		1219667	CA	63	M	4/6/2021	4/9/2021	Patient had a Hemorrhagic stroke and passed away.

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4/16/2021	1219000		93	F	1/11/2021	2/6/2021	Patient was alert and verbally responsive in usual state of health on 1/11/2021 received Moderna vaccination dose 1. Patient seemed stable until 2/6/21. Then on 2/6/21, patient was noted with slight elevated temp of 99.2, pulse 100, spo2 94%RA at 2:15am. By 5:20am, patient was pronounced dead.
4/16/2021	1220223	MN	73	M	3/22/2021	4/6/2021	None stated.
4/16/2021	1219067	FL	64	M	3/20/2021		03/24/21, patient hotel , patient fainted , tried to revive by family , ems was called , patient underwent surgery , patient did not survive surgery , death certificate was for acute infarction and dyslipidemia , patient passed
4/16/2021	1219772	IA	73	M	3/8/2021	4/16/2021	Patient died 1 month after vaccination, cause of death is failure to thrive
4/16/2021	1219816	NH	63	M	2/25/2021	3/23/2021	Resident passed on 3/23/2021. Resident continues to decline medically. 2/22 He was admitted to nursing home with worsening pressure injury.
4/16/2021	1219828	NC	94	M	3/19/2021	3/1/2021	Patient received his first Moderna vaccine 3-19-21. He was due for his 2nd dose 4-16-21. We followed up with his sister due to missed appointment and was informed that he passed away 4-15-21 due to a blood clot.
4/16/2021	1220155	CA	79	M	2/4/2021	2/8/2021	Internal bleeding resulting in death.
4/16/2021	1220264	CT	73	M	3/17/2021	4/6/2021	Patient was scheduled for second dose on 4/14/21. Wife called that morning to say that patient passed away on 4/6/21. Wife Callie stated he saw the neurologist on 4/1/21. On 4/6 he was doing very well in the am and pm. She put him to bed, he woke up and called to her, gasped and passed away. She reports he tolerated the 3/17 vaccination well. I called the doctor on 4/16/21 for more information but he has not returned my call as of yet.

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4/16/2021	1218987	FL	70	F	2/2/2021	2/5/2021	Date and time of vaccination: (list both if they received both shots): 02/02/21 1100, 02/23/21 1200 Date and time adverse event started: 02/05/21 1100 SOB AFTER FIRST SHOT ,FATIGUE , WAS ADMITTED TO HOSPITAL FOR 7 DAYS , RELEASED AND THEN RETURNED TO THE HOSPITAL , SENT BACK TO , SAW THE DOCTOR 24TH OF MARCH , DOCTOR ADVISED WATER REDUCTION AND THE PATIENT HAD DEVELOPED CHF , PATIENT PAST ON THE 29TH
4/16/2021	1218454	MN	58	M	3/12/2021	4/3/2021	Patient's sister, spoke to Public Health staff to say that he passed away suddenly on 4/3/21 from a cardiac arrest, he had no underlying health conditions she states but did take some medications, she believes for blood pressure.
4/16/2021	1220012	NH	90	F	1/8/2021	3/22/2021	02/21/21- Resident has been refusing meds and meal with continued poor PO nutritional intake, and lethargic. She continue to have periods of medication refusal and continued poor PO intake. 3/8 She developed shingles to her R buttock and was started on Acyclovir cream x7 days. She continues to decline medically. Admitted to Hospice on 3/12, poor PO intake and weight loss. 3/23 Resident passed.
4/16/2021	1220532	OR	77	M	3/14/2021	3/31/2021	On 4/16/2021 I received a phone call from public health informing us that the patient died on 3/31/2021.
4/16/2021	1216626			M			None stated.

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4/16/2021	1217480	NJ		M		4/1/2021	DEATH; This spontaneous report received from a consumer concerned a 60 year old African American, Not Hispanic or Latino male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose was not reported, 1 total administered as approximately on 26-Mar-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On 01-APR-2021, the patient died from unknown cause of death. It was reported that, the patient death occurred about 6-7 days after receiving the vaccine. It was unknown, if an autopsy was performed. The patient death occurred about 6-7 days after receiving the vaccine. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: 20210416142-covid-19 vaccine ad26.cov2.s -Death. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/16/2021	1217813	MI	66	M	4/13/2021	4/13/2021	deceased on 4/13/21
4/16/2021	1218288	NJ	88	M	4/13/2021	4/14/2021	4/14/2021 at ~8am, Patient was out of bed and in his wheelchair and consumed 100% of his breakfast. During lunch time, he only consumed 25% of his meal. At ~2pm, patient was noted to be unresponsive. Oxygen saturation was 88% and B/P was low and oxygen was administered and Oxygen Saturation increased to 92%. The patient was placed in bed and Dr and the family were notified. The resident was continuously monitored by the Hospice nurse, who happened to be on-site and the primary nurse. At ~6:30pm it was noted that patient was having labored breathing so 0.25 ml of Morphine Sulfate Solution 20mg/ml was administered with relief. At 8:30pm, patient expired.

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4/16/2021	1218410		95	F	1/29/2021	2/5/2021	<p>Patient presented after falling on February 5 with injury to her scalp. She apparently also fell on 2/4/21. Family was uncertain as to whether patient loss consciousness. According to family, patient has been weak over the last day or 2 with no other complaints aside from some diarrhea. EMS was notified PM Feb 5, and the patient was found to have atrial fibrillation with elevated heart rate to the 160s and hypoxic to the low 80% range on room air. She had a low-grade temperature and elevated respiratory rate according to EMS. Evaluation in the ED demonstrated bilateral chest infiltrates on chest x-ray (right greater than left), elevated heart rate with atrial fibrillation, and back pain. Imaging demonstrated a T11 compression fracture (possibly new), elevated pro-calcitonin (2.80 ng/mL) and elevated troponin (1.45 ng/mL). Her venous blood gas showed mild hypoxemia (7.39/25/41/33/57), and head CT did not show acute changes and her cervical CT was negative for fracture. Pelvic x-ray did not show fracture. She was covid positive. Admitted for acute hypoxemic respiratory failure and severe sepsis secondary to COVID-19 pneumonia and acute metabolic encephalopathy. Received 3 days of remdesivir and 4 days of IV dexamethasone. Also ceftriaxone was given 4 days for possible UTI. Goal of care switched to inpatient hospice on 2/8/21.</p>

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4/16/2021		1218467	KY	67	M	3/14/2021	3/14/2021	Patient hospitalized Hospital Admission Diagnoses: Severe sepsis (CMS/HCC) [A41.9, R65.20] Discharge Diagnosis: Patient Active Problem List Diagnosis Date Noted *Elevated troponin 03/30/2021 *B12 deficiency 03/30/2021 *Acute systolic heart failure (CMS/HCC) 03/25/2021 Discharge Diagnoses: Patient Active Problem List Diagnosis Date Noted *Elevated troponin 03/30/2021 *B12 deficiency 03/30/2021 *Acute systolic heart failure (CMS/HCC) 03/25/2021 *Acute respiratory failure with hypoxia (CMS/HCC) 03/24/2021 *Acute pulmonary edema (CMS/HCC) 03/24/2021 *IVH (Intraventricular hemorrhage) (CMS/HCC) 06/06/2018 *Brain edema (CMS/HCC) 06/06/2018 *Brain compression (CMS/HCC) 06/06/2018 *Benign essential HTN *Coronary artery disease * Type 2 diabetes mellitus with hemoglobin A1c goal of less than 7.0% (CMS/HCC) *Nontraumatic right thalamic hemorrhage (HCC) 06/05/2018 Consults: IP CONSULT TO PULMONOLOGY IP CONSULT TO CARDIOLOGY INPATIENT CONSULT TO PHARMACY INPATIENT CONSULT TO PHARMACY IP CONSULT TO NUTRITION SERVICES IP CONSULT TO NUTRITION SERVICES Procedures: Intubation Catheterization Significant Diagnostic Studies: Cardiac Catheterization
4/16/2021		1218464	MD	66	F	3/13/2021	3/19/2021	EMS was dispatched to patient's home for "non breathing." EMS found patient on the floor in the kitchen with sheet already over her. No pulse, patient cold to the touch, jaw was locked shut. Patient's family members stated the last time they saw the patient alive was around 2:30 am on the same day. Patient pronounced dead on arrival at 6:20 am. No evidence of foul play noted.
4/16/2021		1218848	PA	62	M	4/1/2021	4/2/2021	Angioedema on 4/2/21 leading to death
4/16/2021		1218468	KY	82	M	3/18/2021		Patient's daughter called and reported he was hospitalized for a heart attack and passed away on 4/5/2021.

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4/16/2021		1218469		72	M	4/12/2021	4/13/2021	death Narrative: Patient passed away on April 13, 2021 at home at 1810 He was 72 years old had severe aortic stenosis and hypertension and had an aortic valve replacement (TAVR) at hospital on Jan 20, 2021. He was readmitted to hospital for shortness of breath which was evaluated from Feb 19 - Feb 21, 2021 I spoke with his daughter today. She was with him at home when he went to the bathroom and since he had not come out for some time, she knocked on the door and found him collapsed in the bathroom. She called 911, who did CPR, however he had passed away. He was referred to the coroner. He had his first Moderna vaccine on March 15, 2021 after which he had not had any side effects. He received his second dose on April 12, 2021 and had not mentioned any side effects other than mild abdominal discomfort. Daughter said his shortness of breath had been improving after his discharge from the hospital. He had not complained of chest pain, cough, fever, diarrhea, in the last few days. I paid condolences to daughter and told here we would be reviewing the case to see if there was any relationship to him receiving the Covid19 vaccine and that the case had already been referred to the coroners office.
4/16/2021		1218602	ME	62	F	3/1/2021	4/12/2021	colonic necrosis 62 yo woman history of prior L occipital CVA and DVT on Xarelto presented to Hospital on April 6 with mental status changes. Patient was noted to be in severe metabolic acidosis, renal failure and shock. Chest x-ray showed interstitial infiltrates and she tested positive for SARS-CoV2. She required intubation and mechanical ventilation. CT brain showed encephalomalacia and atrophy, no new changes. She was transferred on April 8. She was given IV bicarb for persistent metabolic acidosis. Initially she was only treated with steroids, then antibiotics were added for fever and persistent hypotension. She started to spike fevers up to 40. Abdominal CXR ordered prior to MRI, showed possible pneumatosis. A follow up CT April 13 abdomen/pelvis was done which shows colonic pneumatosis, with air in the SMV, portal vein, air in the liver. No thrombocytopenia; platelets on April 13 were 310k, as low as 260 on April 8.

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4/16/2021	1218714	MI	54	M	4/15/2021	4/16/2021	Patient was returning to unit. When patient reached unit doors, patient collapsed. Health Care called, 3 nurses and Mini Ambulance deployed. Upon the Staff's arrival CPR was in progress, AED in place, Narcan administered. Ambulance call, transported to Facility. Patient pronounced 0724 hours
4/16/2021	1218764	IL	72	F	2/10/2021	4/6/2021	Patient with Hx of AML received 1st dose COVID vaccine 2/10/2021, 2nd dose 3/4/2021. She developed DVT of the right leg, AML relapse. The patient has been diagnosed with AML back in 2016 and underwent several lines of therapy including chemotherapy with 7 and 3 and the last treatment was decitabine with maintenance treatment with ivosidenib. Having severe leukocytosis and right-sided leg edema with DVT raised concern about blast crisis and leukostasis. Patient was admitted to hospital and received. ceftriaxone and azithromycin for possible pneumonia. She underwent leukopheresis on the 4/6/2021, 4/7/2021. Patient received IV heparin gtt for DVT but later on was on hold given worsening thrombocytopenia. She was transferred from one hospital to another hospital. I do not think the development of DVT was due to COVID vaccine. But prior to COVID vaccine, patient was in AML remission.
4/16/2021	1218779	MD	78	F	4/14/2021	4/16/2021	Death
4/16/2021	1219577	NH	84	F	3/26/2021	3/27/2021	3/27/2021- @3 AM resident with increase in SOB with unresponsive episodes. Pt states she has history of unresponsive episodes related to cardiac issues, declined hospitalization.
4/16/2021	1236415		44	M	3/25/2021	3/30/2021	death Narrative: Patient received Moderna covid vaccine #1 on 3/25/21. No notes entered after this time and date of death is recorded as 3/30/21. No scanned records. No autopsy results available. 5 days from date of vaccine to date of death.

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4/16/2021	1228012		78	M	1/11/2021	2/21/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 78 and receiving home based primary care prior to COVID vaccination for multiple conditions including CKD, T2DM, w/ complications, and CHF.
4/16/2021	1228013		74	M	2/1/2021	2/4/2021	Death. Narrative: Patient was not previously COVID positive and did not have any predisposing factors (PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 74 but no cause of death listed or notes of recent care. Patient was hospitalized with chest pain in 6/2020 and has h/o of severe multivessel CAD, HFrEF, and polysubstance abuse.
4/16/2021	1228014		85	M	1/27/2021	2/20/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there and ADR that occurred between the observation period and the date of death. Patient was 84 and receiving palliative care for metastatic prostate cancer. Comorbidities include T2DM, HTN, MI s/p PCI, and CKD.
4/16/2021	1228015		73	M	12/29/2020	2/2/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was admitted to hospital from 11/18/20-1/26/21 for Dx: generalized weakness. Previously admitted 10/21/20-11/17/20 for a pulmonary embolism. Patient did not last long after being discharged from short term rehab and passed away at home on 2/2/2021

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4/16/2021	1228016		93	M	12/29/2020	2/17/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 92 and a resident at facility when he passed away. Patient has been LTC resident since 2/15/2019 and received hospice services prior to receiving first Pfizer vaccine dose. Patient receiving hospice care for terminal colon cancer.
4/16/2021	1228017		85	M		1/29/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 84 with comorbidities of CKD, COPD, Coronary arteriosclerosis w/ 2 stents. Death was reported by daughter and unclear of the cause.
4/16/2021	1228011		91	M	1/19/2021	2/21/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors (PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of the administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient was 90 yo and admitted on 2/10/21 for SOB and a fall resulting in a femur fracture. Patient was on Eliquis and has h/o CABG x5, dementia, bradycardia s/p pacemaker. Patient was discharged to a rehab facility where his condition declined ultimately resulting in transfer to inpatient hospice. He eventually required care in ICU where he eventually deceased.

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4/16/2021	1236414		85	M	2/8/2021	3/18/2021	death Narrative: Patient received Moderna covid #1 on 1/9/21 and #2 on 2/8/21. On 2/24/21, he was sent to the ER at a facility from a nursing home where he was admitted for skilled nursing care. He was sent to the ER due to fever, decreased mental status, renal failure, possible UTI and possible pneumonia. He was admitted and received IV fluids, Zosyn and Solu Medrol. On 2/26/21, a consult was placed for hospice care and he was accepted for hospice care at a contract nursing home. Upon review of scanned records, it appears he had a stroke/intercranial hemorrhage on 2/10/21 and that is why he was admitted to the nursing home for skilled nursing services. A date of death of 3/18/21 is recorded. No autopsy results recorded. 38 days from vaccine #2 and date of death.
4/16/2021	1228018		75	M	3/19/2021	3/28/2021	Deceased 3/28/21 "natural causes" Narrative: Per notes "Pathologist was informed that he died of natural causes". PCP indicated that death cert will only show HTN as cause of death.
4/16/2021	1236416		76	M	2/24/2021	4/3/2021	death Narrative: Patient received Moderna covid vaccine #1 on 1/22/21 and #2 on 2/24/21. On 3/4/21, he was admitted to a facility for shortness of breath x 1 week. Upon admission, he was found to be in heart block and was admitted to the ICU and placed on pressors. He did have a negative COVID PCR test on 3/4/21. He has a noted history of COPD, CHF and OSA. On 3/6/21, he underwent a new pacemaker placement. His course was complicated by the development of AKI, paroxysmal V tach and new flutter and was initiated on apixaban. He was discharged on 3/18/21. No further records available and a date of death was recorded as 4/3/21. No autopsy results available. 38 days from time of second vaccine to date of death.

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4/16/2021	1236417		51	M	2/27/2021	3/17/2021	death Narrative: Patient with noted history of ALS was given Moderna covid vaccine #1 on 2/27/21. On 3/5/21, notes were entered in system for family requesting a specialty bed as he was having difficulty sleeping as it was hard to breath when he laid down. He was sleeping sitting up in his wheelchair. On 3/8/21, a note was placed that he was planned to have a trach placed on 3/12/21 and that he was now under hospice care. No further notes entered and a date of death was recorded as 3/17/21. No autopsy results available. 18 days from date of vaccine to date of death.
4/16/2021	1236418		92	M	1/14/2021	2/10/2021	death Narrative: Patient received Moderna covid #1 on 1/14/21. On 1/29/21, a social worker note was placed that indicated that patient was now under home hospice care. No scanned records on file. No further notes regarding events from this time to date of death on 2/10/21. No autopsy results available. 27 days from date of vaccine to date of death.
4/16/2021	1236419		70	M	1/25/2021	2/9/2021	death Narrative: Patient, that is a facility resident, received his Moderna covid vaccine #1 on 12/28/20. On 1/14/21 due a continued decline in status, he was changed to hospice care. On 1/25/21, he received covid #2. He was noted to have a decline in oral intake and increase in somnolence over a few weeks prior to his date of death on 2/9/21. No autopsy results available. 15 days from date of second vaccine to date of death.
4/16/2021	1220723	AL	36	M	4/6/2021	4/14/2021	36 year old male with hx of hypertension , asthma, schizophrenia . he recieved Janssen vaccine on 4/6/2021. he started to fell unwell on 4/14 and on 4/15 he was found by his father unresponsive then sent to the hospital. Pt was diagnosed with massive pulmonary embolism, severe shock, acute renal failure ,Diabetic ketoacidosis , hyperglycemic hyperosmolar nonketotic coma, acute respiratory failure, patient expried from massive pulmonary embolism within 48 hours after admission.
4/16/2021	1219402	AK	63	F	4/14/2021	4/15/2021	Homebound visit complete 4/14/21 around 1230-1300, monitored for 15 minutes, left attended with home health nurse. Patient was found dead per EMS and had passed sometime during the night.

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4/16/2021	1228019		80	M	1/21/2021	2/1/2021	Narrative: 2/8/2021 UTI, sepsis, hyperglycemia, staphylococcus, MRSA infection-discharged to hospice care from Medical Center 2/9, passed 2/11.
4/16/2021	1221106	TN		M	2/10/2021	2/21/2021	Eleven days after receiving the dose, he died; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Eleven days after receiving the dose, he died) in a 79-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 011L20A) for COVID-19 vaccination. The patient's past medical history included COVID-19. On 10-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on 21-Feb-2021 The patient died on 21-Feb-2021. The cause of death was not reported. It is unknown if an autopsy was performed. Unknown Action taken with mRNA-1273 in response to the event was not applicable. Prior to the patient's receiving his first dose of the Moderna Covid-19 vaccine series, wife reported that he was hospitalized for Covid-19 infection for three weeks. While hospitalized, he was treated for Covid-19 infection with medications unknown to her and was very sick on a ventilator in the ICU. He was then discharged to a rehab facility for several weeks and moved to a nursing home for additional rehab. Eleven days after receiving the dose, he died on 21 Feb 2021. He had been getting along well and working on coming home prior to receiving the first dose. Limited information regarding the patient's death has been provided at this time and a causal relationship cannot be excluded; Sender's Comments: Limited information regarding the patient's death has been provided at this time and a causal relationship cannot be excluded; Reported Cause(s) of Death: Unknown cause of death

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4/16/2021	1220913	TX		M	2/3/2021		Husband died because of terminal pancreatic cancer; Sore arm; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of PANCREATIC CARCINOMA (Husband died because of terminal pancreatic cancer) in a 74-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 012M20A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included Diabetes. Concurrent medical conditions included Pancreatic cancer and Cancer (NOS) (for 30 years). On 03-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced PANCREATIC CARCINOMA (Husband died because of terminal pancreatic cancer) (seriousness criteria death and medically significant) and VACCINATION SITE PAIN (Sore arm). On 23-Feb-2021, VACCINATION SITE PAIN (Sore arm) outcome was unknown. The patient died on 23-Feb-2021. The reported cause of death was Pancreatic cancer. It is unknown if an autopsy was performed. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. He was on loads of different medication for cancer which the wife did not know about. Treatment information was not provided. As per the patient's wife on 23Feb2021, her husband died because of terminal pancreatic cancer which she thinks is not related to the vaccine This case was linked to US-MODERNATX, INC.-MOD-2021-069647 (Linked Report).; Sender's Comments: Based on the current available information and the temporal association between the product use and the start date of the event a causal relationship cannot be ruled out. US-MODERNATX, INC.-MOD-2021-069647.; Reported Cause(s) of Death: Pancreatic cancer
4/16/2021	1236406		93	M	1/26/2021	3/29/2021	death Narrative: pt had first vaccine on 1/26; caregiver declined second dose due to concerns of side effects; pt died 3/29/21 (not from COVID)

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4/16/2021	1220979			F			Death; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Death) in a female patient of an unknown age who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event. Concurrent medical conditions included No adverse event. On an unknown date, the patient received dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant medication list was not provided. Treatment information was not provided.; Sender's Comments: Limited information regarding the event has been provided at this time and a causal relationship cannot be excluded; Reported Cause(s) of Death: Unknown cause of death
4/16/2021	1228010		33	M	3/8/2021	3/17/2021	Death Narrative: Patient was not previously Covid positive and did not have any predisposing factors(PMH, allergies, etc.) for experiencing an adverse drug event. The ADR did not occur at the time of administration of the vaccine nor was there an ADR that occurred between the observation period and the date of death. Patient died of a drug overdose and had a UDS positive for fentanyl and alcohol on 3/8/21 patient tested positive for Chlamydia due to high risk sexual behavior and substance use disorder. Patient was admitted to facility on 2/26/21 to detox from alcohol.

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4/16/2021		1221127	TX		F	1/22/2021	1/29/2021	<p>Died of clots in brain; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of BRAIN STEM THROMBOSIS (Died of clots in brain) in a 76-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No medically reported history). On 22-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 29-Jan-2021, the patient experienced BRAIN STEM THROMBOSIS (Died of clots in brain) (seriousness criteria death and medically significant). The patient died on 30-Jan-2021. The reported cause of death was Brain stem thrombosis. It is unknown if an autopsy was performed. This is a 76 year-old, who received mRNA-1273 Vaccine) and died 8 days after receiving first dose of vaccine and subsequently experienced brain stem thrombosis. No medical hx or conmeds were provided. The reported cause of death was brain stem thrombosis. Very limited information has been reported at this time. Further information is expected. This case was linked to MOD21-075103, US-MODERNATX, INC.-MOD-2021-075124 (Linked Report).; Sender's Comments: This is a 76 year-old, who received mRNA-1273 Vaccine) and died 8 days after receiving first dose of vaccine and subsequently experienced brain stem thrombosis. No medical hx or conmeds were provided. The reported cause of death was brain stem thrombosis. Very limited information has been reported at this time. Further information is expected. MOD21-075103: US-MODERNATX, INC.-MOD-2021-075124:Patient's brother in law case; Reported Cause(s) of Death: brain stem thrombosis</p>

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4/16/2021	1221137	FL	93	F	1/22/2021	1/22/2021	My my grandma got them a derma vaccine on January 22 she died on February 11 she was admitted to the hospital with a blood clot in her leg they tried to do surgery but when they put her under the anesthesia she never woke back up. She was 93 years old and had many other health conditions but when I called the doctors office to ask them if they reported my grandma they just kept giving me the runaround I tried to call hospital as well and I got the same thing they told me to go back to the doctor. I think someone should know and I think it?s way too difficult for family members to try to report adverse side effects it took me all day to find someone that could help me get to this website. I think there may be a lot more adverse side effects but people don?t know how to report them.
4/16/2021	1221145	TX	53	M	4/2/2021	4/13/2021	My uncle unexpectedly passed away during the early morning hours of April 13. He had reported to my aunt that he was having shortness of breath, headaches, and in general not feeling well. She found him sitting up with a clear liquid pouring out of his nose and then he fell over dead.

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4/16/2021	1221163	CO	72	M	2/13/2021	3/21/2021	heart attack; couldnt walk; couldnt get out of bed; body ache and pains; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of MYOCARDIAL INFARCTION (heart attack) in a 72-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 030M20A and 033A21A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concurrent medical conditions included Neurological disorder NOS, Diabetes, peripheral artery disease, Disabled spouse (100% disable) and COPD. Concomitant products included GABAPENTIN for an unknown indication. On 13-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 20-Mar-2021, received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 2 dosage form. On 21-Mar-2021, the patient experienced MYOCARDIAL INFARCTION (heart attack) (seriousness criterion death), GAIT DISTURBANCE (couldnt walk), BEDRIDDEN (couldnt get out of bed) and PAIN (body ache and pains). The patient died on 21-Mar-2021. The reported cause of death was Heart attack. It is unknown if an autopsy was performed. At the time of death, GAIT DISTURBANCE (couldnt walk), BEDRIDDEN (couldnt get out of bed) and PAIN (body ache and pains) outcome was unknown. The action taken with mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) was unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. The patient had a medical condition of "agent orange". The patient was a veteran. Treatment included for the events was acetaminophen (Tylenol). Based on the current available information and the temporal association between the product use and the start date of the events a causal relationship cannot be excluded. This case was linked to US-MODERNATX, INC.-MOD-2021-075051 (Linked Report).; Sender's Comments: Based on the current available information and the temporal association between the product use and the start date of the events a causal relationship cannot be excluded. US-MODERNATX, INC.-MOD-2021-075051:Case for second dose; Reported Cause(s) of Death: Heart attack

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4/16/2021	1221166	IN	39	F			<p>needed kidney and/or bladder transplant; within 30 hs after second shot, she died; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (within 30 hs after second shot, she died) and TRANSPLANT (needed kidney and/or bladder transplant) in a 39-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On an unknown date, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On an unknown date, the patient experienced DEATH (within 30 hs after second shot, she died) (seriousness criterion death) and TRANSPLANT (needed kidney and/or bladder transplant) (seriousness criteria death, hospitalization and medically significant). The cause of death was not reported. It is unknown if an autopsy was performed. The reporter does not remember if this was from Pfizer or Moderna. Concomitant product use was not provided. Treatment information was unknown. This case concerns death of a 30 year old female 30 minutes after the administration of the mRNA-1273 vaccine. Patient is reported to have no underlying issue. Based on the current available information which includes a strong temporal association between the use of mRNA-1273 vaccine and onset of the reported events, causal relationship cannot be excluded. Reporter did not allow further contact; Reporter's Comments: Th; Sender's Comments: This case concerns death of a 30 year old female 30 minutes after the administration of the mRNA-1273 vaccine. Patient is reported to have no underlying issue. Based on the current available information which includes a strong temporal association between the use of mRNA-1273 vaccine and onset of the reported events, causal relationship cannot be excluded.; Reported Cause(s) of Death: unknown cause of death</p>

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4/16/2021	1221176	OR	49	U	3/30/2021	4/3/2021	he died; This spontaneous case was reported by a consumer and describes the occurrence of DEATH (he died) in a 49-year-old patient of an unknown gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On 30-Mar-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. Death occurred on 03-Apr-2021 The patient died on 03-Apr-2021. The cause of death was not reported. It is unknown if an autopsy was performed. No concomitant medications were reported. No treatment medications were reported. Action taken with mRNA-1273 in response to the event was not applicable. Very limited information regarding this event has been provided at this time. Further information has been requested; Sender's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested; Reported Cause(s) of Death: Unknown cause of death
4/16/2021	1221329	CA	62	M	3/12/2021	4/4/2021	My Dad was healthy no symptoms on first shot . On Second shoot just slight pain in arm , he felt sick on Sunday the 4 of April at around 7pm he had a upset stomach. He got worse at night. in the morning Monday the 5 April we decided it was time to take him to the hospital. Due to the covid 19 restriction we were not able to go in with him He was stable until 1 pm when he suffered 4 heart attacks . He Died . He was healthy he exercise and was active every day . We were told to report this because it was close to dates of vaccination.
4/16/2021	1221425	IN	50	M	3/18/2021	3/19/2021	Patient felt ok the day of the shot, next day got very sick. Said he felt terrible, felt like the vaccine was going to "do him in." He complained of weakness and shortness of breath. He was dehydrated and worried about his kidney function. Said he had a hard time going to the bathroom with stomach pains. On Mar 31, 2021, said he had fever, but didn't go to doctor. Was taken by ambulance April 3 to ER, admitted that night, transferred to ICU on April 4, on ventilator, proceeded to experience multiple organ failure and died on April 11, 2021

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4/16/2021	1221521	CO	63	M	4/13/2021	4/15/2021	Patient reported after 1st vaccine experiencing some itching. Patient also reported an increase in his BS after vaccine 1. Provider prescribed Atarax to patient for this, patient had previously been prescribed this as he has had a similar reaction to other vaccines and medication changes. Patient was seen by provider for high BS, patients insurance stopped paying for his insulin and they were transitioning him to Trulicity. Patient came to vaccine clinic on 4/13/2021. Patient was given 2nd dose of vaccine and monitored for appropriate period of time post vaccination. Patients family reports that patient had been feeling SOB for the past several weeks and more fatigue than usual. 4/14/2021, patient triggered an alert thru the monitoring system, nurse reached out to patient to discuss and schedule appointment for further DM education and appt with provider. Nurse had difficult time reaching patient, but patient did call back same day and scheduled appt on 4/23/21. Family reports they went to bed on 4/14/2021, brother went upstairs for bed checked on patient and he was unresponsive. 911 called, paramedics and fire department responded, but CPR was unsuccessful. Patient pronounced dead 4/15/2021 @ 12:26am.
4/16/2021	1222020	MN	68	M	2/25/2021	3/4/2021	Patient became unresponsive in his chair at home. CPR was attempted by patients wife and paramedics without success. Patient is deceased.
4/16/2021	1222021	WI	64	M	2/16/2021	2/16/2021	Client became ill approximately one hour after COVID immunization. Symptoms include weakness, light headed, general malaise. Client refused wife's offer for medical assistance.

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4/15/2021	1213302	IL	65	M	3/2/2021	3/18/2021	He received his first COVID19 shot (Pfizer) reportedly on 3/2/21, then began a new chemotherapy regimen on 3/10/21. On 3/18, he fell to the floor and could not get up. He was admitted to the hospital for sepsis, pneumonia, and chemotherapy-induced neutropenia, treated on IV antibiotics and discharged on PO antibiotics. His home insulin was also decreased but continued to have hypoglycemic to hyperglycemic events. Insulin was decreased in clinic afterward and was compliant on antibiotics. Returned to hospital again a few days later for sepsis and pneumonia/effusion. He later went to a nursing facility / on hospice. He ultimately required supplemental oxygen and breathing increasingly became labored. Patient ultimately died on 4/9/21.
4/15/2021	1213085	IL	87	F	2/5/2021	4/2/2021	End Stage dementia, overall decline, hospice care, expired
4/15/2021	1213115	NY	77	M	4/10/2021	4/10/2021	cardiac arrest at approximately 4:35pm, patient expired.
4/15/2021	1213131	FL	69	F	3/11/2021	3/29/2021	PATIENT DIED FROM BLOOD CLOT 3/29/2021 - AUTOPSY PERFORMED AND CONFIRMED
4/15/2021	1213138	OH	72	F	3/26/2021	4/6/2021	The day after vaccination had a terrible headache. Stroke on 4/6/21. Died on 4/11/21
4/15/2021	1213217	IN	78	F	3/5/2021	3/23/2021	Death - no symptoms, signs or treatment provided
4/15/2021	1213285		83	M	3/27/2021	4/8/2021	Death Narrative: Patient received his first COVID-19 vaccination 2/27/2021 and received his second COVID-19 vaccination 03/27/2021. Patient had not been tested for COVID per chart review and had no contraindications to receiving the vaccine. Patient did not experience any adverse events to the COVID-19 vaccine between time of vaccination and the time of death 12 days later. Of note, patient was receiving home hospice at the time of his death (04/08/2021) for his advanced acute myeloid leukemia.

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4/15/2021	1213286		100	M	2/7/2021	3/9/2021	death Narrative: Patient received Moderna COVID vaccine #1 on 1/10/21, he was seen by his PCP for a routine 6 month check up on 1/14/21. Notes at that time indicate he had a left great toe, he wound and was receiving home health and IV daptomycin through a PICC line. On 2/7/21, he received vaccine #2. Notes then indicate that on 3/9/21, he was found passed away in his home by family. No autopsy results available. 30 days form date of vaccine #2 to date of death.
4/15/2021	1213287		88	M	3/3/2021	3/27/2021	Death. Narrative: Patient received Moderna COVID vaccine #1 on 3/3/21. He is noted to be a dialysis patient. On 3/24/21, his wife took him to a facility ER due to intermittent shortness of breath over the previous week. He was admitted for fluid overload. On 3/27/21, he was found unresponsive and CPR was initiated and a code blue was called. He received defibrillation, epinephrine, IV calcium, sodium bicarb and amiodarone and was intubated; however he did not survive and time of death is recorded as 3/27/21 at 0138. No autopsy results available. 24 days from time of vaccine to date of death.
4/15/2021	1213288		90	M	2/9/2021	4/11/2021	death Narrative: Pt received second Moderna COVID vaccine dose on 2/9/21. Pt enrolled in hospice house for end-of-life care 4/8, however, diagnosis was not available in database for enrollment in hospice. Pt's son emailed affairs to report the passing of the patient 4/11/21 with no additional details or reasoning; death has not been verified. Was pt previously covid positive? no Are there any predisposing factors (i.e. PMH, HPI, allergy history etc) for patient experiencing adverse drug event? Yes, CHF potentially a contributing factor to hospice status and death Any occurrence of an ADR at time of administration or during time of observation? No Was there an ADR between observation period and date of death? No Was patient hospitalized prior to vaccination? No Was patient hospitalized prior to death No What are the possible cause of death? unknown, pt enrolled in hospice services outside of the facility.

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4/15/2021		1213289		100	M	3/4/2021	3/12/2021	death Narrative: Patient received Moderna COVID #1 on 2/4/21 and #2 on 3/4/21. He was seen by his PCP via telephone visit on 3/2/21 for a routine follow up, no acute issues noted and follow up was planned for 6 months. On 3/12/21, he passed away, no notes in medical records or scanned records to indicate what happened. No autopsy results available. 8 days from date of last vaccine and date of death.
4/15/2021		1213364		76	M	1/28/2021	2/19/2021	death Narrative: Patient received Moderna COVID #1 vaccine on 1/28/21. On 2/3/21, he was admitted to a facility for fever, weakness, chills and rigor. Noted history of B cell lymphoma not on chemotherapy at the time. He also had reports of productive cough with thick brown/green sputum. He was admitted to the hospital and given 1 round of methotrexate and Rituxan. Hospital course was complicated with bacteremia (given vancomycin and cefepime), A fib, AKI, HTN, neutropenia (received Neupogen), acute popliteal VT (unable to anticoagulated due to thrombocytopenia - platelets as low as 20). No bleeding issues noted. On 2/18/21, family opted to change his status to DNR with hospice/comfort care and he passed on 2/19/21. No autopsy results available. 22 days from date of vaccine to date of death.
4/15/2021		1213291	KS	95	M	3/3/2021	3/28/2021	Was informed at the time the client was to be seen for booster dose of COVID vaccine that he had recently passed away. Unable to contact family for more Information.
4/15/2021		1213081	NC	76	M	2/16/2021	2/17/2021	Fever, Sick on stomach, aches, fatigue, extreme weakness. Symptoms were extreme. Generally felt terrible after being very stable and active. No improvement and condition worsened daily with loss of appetite. Death occurred on March 13, 2021.
4/15/2021		1213304		62	M	3/11/2021	3/24/2021	death Narrative: Patient received Moderna Covid #1 on 3/11/21 in his home by nurse. On 3/25/21, a note was entered to indicate that is wife had called EMS the day before as "his heart stopped" and he passed en route to the hospital. No further details available. No autopsy results available. 13 days between date of vaccination and date of death.

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4/15/2021	1213431	NY	47	F	3/1/2021	3/16/2021	Patient admitted with massive portal vein thrombosis and low plt in setting of infection. Symptoms started one week prior
4/15/2021	1211001	AZ	66	F	3/22/2021	3/28/2021	Patient is deceased. Had a blood clot travel to her brain and causes an un recoverable stroke
4/15/2021	1213551		73	M	1/27/2021	2/6/2021	DEATH, ABDOMINAL DISTENTION, CHF EXACERBATION. Narrative: Pt died after completion of COVID vaccine series. Pt in CLC at time of both vaccinations. Hospitalized for CHF exacerbation 01/05 COVID vaccine dose #1 01/01 c/o abdominal distention, diarrhea 01/08 c/o increased SOB and continued diarrhea/abdominal distention, sent to ED, low potassium, borderline elevation troponin, gaseous distention on CT, admitted to hospital, states SOB and leg swelling for a few weeks now (likely unrelated to vaccine) 01/21 discharged from hospital to CLC; during course, found to have severe hypokalemia and renal failure, abd ileus, treated for electrolyte imbalance 01/26 admitted to hospital with c/o coffee ground emesis & abdominal distention 01/27 COVID vaccine dose #2 moved to critical care mid hospitalization with like aspiration PNA and numerous complications 02/06 patient passed away after withdraw of care Unlikely that vaccine contributed to death but death likely due to comorbidities and advanced age. Patient did not have acute specific ADR at time of vaccine or between vaccinations and date of death that could be attributed to vaccine. Hospitalized prior to and after vaccinations. Numerous comorbidities including acute on chronic HF and kidney failure pre-disposed patient to death.
4/15/2021	1213290	KS	77	M	3/3/2021	3/25/2021	Was informed at the time the client was to be seen for booster dose of COVID vaccine that he had recently passed away. Unable to contact family for more information.
4/15/2021	1212474		71	F	2/20/2021	2/25/2021	Death R05 - Cough J96.90 - Respiratory failure R55 - Syncope R41.82 - Altered mental status I95.9 - Hypotension M25.551 - Right hip pain Z79.01 - On apixaban therapy
4/15/2021	1212489		80	F	3/9/2021	4/13/2021	CARDIAC ARREST Death

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4/15/2021		1213566		73	M	2/3/2021	3/9/2021	death Narrative: Patient received his COVID #1 Moderna vaccine on 2/3/2021. On 2/9/21, he reported to our ER with severe upper back pain x 2 weeks, notes indicate that he fell 12/2020 and sustained a fracture to T5, he denied shortness of breath but did report a cough. He was given morphine 10mg IM x 1 dose, ondansetron 4mg SL x 1 dose and an outpatient RX for Norco and discharged. On 2/11/21, his wife reported that he fell out of bed and he was taken to a facility via EMS. No records from that visit are available. On 3/9/2021, it was reported that he passed away. No autopsy reports available. 34 days from time of vaccine to date of death.
4/15/2021		1212176		75	M	2/8/2021	3/18/2021	Death Metastatic adenocarcinoma Intertrochanteric fracture of left femur
4/15/2021		1212194		65	F	2/20/2021	4/4/2021	Death R06.02 - Shortness of breath J18.9 - Pneumonia
4/15/2021		1212220		62	F	3/12/2021	3/21/2021	Death SHORTNESS OF BREATH WEAKNESS - GENERALIZED
4/15/2021		1212233		81	M	1/5/2021	1/9/2021	death Weakness Fever Sepsis
4/15/2021		1212251	NY	84	M	4/6/2021	4/7/2021	Fall and stroke
4/15/2021		1212182		83	M	3/26/2021	4/12/2021	Death
4/15/2021		1212373	NY	57	F	3/24/2021	3/30/2021	The patient had an uneventful post-operative course and was discharged on post-op day 2. By report, on post op day 4-5, the patient began complaining of headache, back pain and abdominal pain. Continued home meds for post-op pain and constipation. On POD 8/9, the patient notified her daughter that she woke up short of breath. She was transferred by EMS to Hospital where she reportedly expired (this event was reported by the patient's daughter to doctor's office, the spine surgeon who managed her while inpatient at Hospital

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4/15/2021		1213047	PA	68	F	3/2/2021	3/3/2021	This is the patient's spouse reporting. The day following the vaccination, wife began to suffer mild, common vaccination symptoms such as fatigue, hills, and joint pain. In the days following, in addition to those symptoms, she began to cough and had a sore throat. By March 8th, she had lost her sense of taste and sense of smell. We realized we needed to have her tested for COVID-19. We went to a testing area. She was seen and tested. She tested positive for COVID-19 (as did I). The belief was that our illness was uncomplicated and we were sent home with instructions to monitor our symptoms. On 03/14/2021, I took her to the hospital because her condition was worsening.
4/15/2021		1212567	OR	47	M	4/10/2021	4/11/2021	he died while on his routine daily run; medical examiner agreed he should have an autopsy which showed coronary artery disease/likely an acute cardiac event
4/15/2021		1212771	HI	87	M	4/8/2021	4/8/2021	an 87 year old male with ESRD on PD, pAfib, CAD, HTN, HLD, hypothyroidism, who was brought in after a witness cardiac arrest. Patient apparently received the first dose of the Covid vaccine (pfizer) at around 11 am. He was doing fine the rest of the day until later in the evening when he had shortness of breath without chest pain, abdominal pain, nausea, vomiting. Upon EMS arrival, the patient appeared to have some agonal breathing and then went down, was in PEA arrest, received CPR with 1 dose of calcium, 1 dose of bicarbonate, and 3 doses of epinephrine with return of spontaneous circulation. Upon arrival in the ED, patient had an intraosseous line, on dopamine for soft blood pressure. Patient has been successfully intubated.
4/15/2021		1212788	TX	64	M	3/23/2021	3/30/2021	Patient's wife notified our corporate office on 4/15/21 that her husband received a J&J COVID vaccine from our pharmacy on 3/23/2021 and that he passed away one week later, 3/30/2021, in their yard after having a heart attack. Phone number provided is the wife's.
4/15/2021		1212820	CA	31	M	4/10/2021	4/13/2021	Unexpected death 3 days after vaccination
4/15/2021		1212869	MA	84	M	3/19/2021	4/3/2021	Patient expired on 4/3/2021 after refusing dialysis x 2 weeks
4/15/2021		1212969	MA	82	M	3/19/2021	4/13/2021	Patient Expired

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4/15/2021	1213035	NY	76	F	4/7/2021	4/12/2021	MY MOTHER, PATIENT, HAD BEEN MANAGING HYPERTENSION AND DIABETES FOR NEARLY 30 YEARS VERY WELL. SHE RECEIVED THE J&J VACCINE ON 4/7. PEOPLE WHO SAW HER AND SPOKE TO HER DAYS AFTER REPORTED SHE FELT GOOD AND LOOKED GOOD. ON 4/12, 5 DAYS LATER, PATIENT, WAS DEAD. SHE WAS FOUND DECEASED IN HER APARTMENT ON 4/13 SLUMPED IN A CHAIR. SHE HAD EATEN BREAKFAST, GOTTEN DRESSED AND APPEARED TO BE ON HER WAY OUT THE DOOR TO AN EYE DOCTOR APPT WHEN SHE SAT IN A CHAIR TO TAKE A REST. THE MEDICAL EXAMINER'S OFC REFUSED TO DO AN AUTOPSY, STATING HER PRE-EXISTING CONDITIONS, DESPITE HER RECENTLY GETTING THE J&J SHOT.
4/15/2021	1212295	KY	50	F	4/6/2021	4/7/2021	Patients mom states 12 hours after vaccination dev: fever, chills, stiff neck. Symptoms got progressively worse throughout the day. on the evening of 4/8/21 patients mom describes patient talking "out of her head", fever, chills, leg pain, "bad" headache. On 4/9/21 patient woke up around 5:30 AM, sister helped to bathroom. reported leg pain, neck pain, headache. Laid back down. Sister found patient unresponsive around 9:00 AM. Sister performed CPR. Pronounced dead at patient's home by EMS.

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4/15/2021		1215435	DE	60	M	3/7/2021	3/18/2021	Patient began experiencing back pain on March 14 and on or around March 18 he started coughing up blood clots according to a coworker. Patient lived alone and was unable to be reached on Sunday March 21. I went over to his house and found him deceased in his bed. Patient had a trashcan beside his bed and it appeared to have some blood in it. Patient had thick mucus coming out of his mouth and blood coming out of his nose. According to paramedics he had passed a few hours before finding him. Unfortunately Patient has been cremated so there is no way to say that this was related to the Covid 19 shot from Johnson and Johnson, however there are new reports that blood clots have been a side effect. I would like to speak with someone from the Department of Health to discuss this further. I feel this could be related to the vaccination and I would to know how long the Health Department knew about this possible side effect. If patient would have known sooner that the blood clots were a side effect I feel he would have gone to the Emergency Room. Patient had no health insurance and he was trying to prevent getting Covid. This has caused our family so much heartache and we are all very apprehensive about getting the Covid Vaccine ourselves. Please contact me as soon as possible, I am also patient's executor so I am able to speak to you on behalf of patient and our family. Thank you.
4/15/2021		1214800	TX	64	F	4/6/2021	4/6/2021	Patient per tracking received 2nd COVID vaccine on 4/5/2021 from Health Department. Patient to Hospital Emergency department via EMS 4/6/2021 with cardiac arrest and death
4/15/2021		1214882	IA	96	M	3/5/2021	4/3/2021	unknown
4/15/2021		1214997	MT	84	M	3/26/2021	4/14/2021	Patient was terminal when he received the vaccine

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4/15/2021	1215033	AR	52	F	3/31/2021	4/1/2021	Patient sister contacted Pharmacy on 4/09/2021 about 4:30pm to report that her sister had passed away on 4/1/2021 approximately 7 hours after receiving her first Covid-19 vaccine at our clinic. The sister reports that she spoke with her the evening of 3/31/2021 approximately at 7:45pm. The sister, indicated that her sister had been drinking and drank frequently. Stated her sister was an unhealthy person, drank everyday and could have been taking Alprazolam but wasn't sure. The sister stated that the patient's son had spoke/seen mom in the house around 8:30 pm. Patient was found in the household bathtub at around 1:00am, 911 was called and she was reported to be deceased upon arrival.

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4/15/2021		1215095	MN	62	F	3/18/2021	3/23/2021	Received her first COVID vaccine on Thursday, March 18. On 3/23/21 she started to have new onset of generalized muscles aches and weakness. She started feeling some pain in her back, which then spread to arms and legs. She is now beginning to feel weakness in her core and extremities. Having difficulty lifting arms above head. She is still able to walk without difficulty but legs do feel weak. Increase in SOB as well. Myalgias and chest pain resolved within a week, however she continued to feel weak, tired, and had DOE. She developed "brain fog" and talked to her boss about taking short-term disability as it had been hard to work. No appetite. On 4/1/21, she presented to the ED with 2 weeks of worsening generalized weakness, SOB, lightheadedness, dizziness and found to have acute anemia. Was admitted for further workup. Hgb at admission was 5.4. This admission diagnosed her with a new warm autoantibody hemolytic anemia. This is new since the COVID vaccine was administered. Upon admission there was no thrombocytopenia, so there was low suspicion for microangiopathic hemolytic anemia, TTP/HUS, or DIC. Peripheral blood smear at that time suggested a leukoerythroblastic blood picture (could be Bone Marrow recovery post chemo) but with marked normocytic, normochromic anemia, and with increased circulating erythroid precursors and increased red blood cell regeneration; spherocytes and fragments are present supporting hemolysis. DAT positive (both IgG and C3) along with other hemolysis lab including elevated LDH, Bilirubin, haptoglobin 3, and PBS c/w hemolysis; no evidence of MAHA. So warm autoantibody hemolytic anemia is the most likely explanation. She had negative cold agglutinin antibodies <1:32 on 4/9. Started on methylprednisolone on 4/2/21, but Hgb continued to steadily decline despite treatment. Continued on methylprednisolone 87.5mg daily. Rituxan 375mg/m2 was started on 4/6/21 with plans for weekly infusions for a total of 4 weeks. there was concern for a GI bleed on 4/10-4/11 due to bright red fluid appearing like blood in the toilet after a stool. This led to her receiving roughly 5 units of pRBCs. After these 5 units she started urinating red urine and we became highly concerned for hyperhemolysis. She did not have any further stools so we did not think a GI bleed was likely. She was given 1 dose of Eculizumab (Soliris) (4/12). This treatment is for

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						complement mediated intravascular hyperhemolysis. Unfortunately it did not appear to help her. On 4/14, we were thinking TTP could be contributory with numerous schistocytes on peripheral smear. Her T bili was up to 7.8, and her hemoglobin plasma was trending up, in the 380 -- > 610 and in the 800s today. Cr was worsening. Platelet count was dropping. With her worsening condition and concern for both hyperhemolysis and possible TTP, we decided to start her plasma exchange followed by her second dose of Rituximab. Unfortunately she became disoriented/confused following line placement and while receiving plasmapheresis. CT head returned without acute findings. She then had an allergic reaction with a rash during PLEX which was stopped (4L completed with a goal of 5L). Improved with benadryl. She was then administered rituximab. Then she developed worsening sinus tachycardia and HTN. Her respiratory status deteriorated and she eventually required high-flow oxygen to maintain saturations > 90%. CXR showed bilateral opacities, not drastically changed from previous films. Rituximab was stopped halfway through its infusion in case this was an adverse effect to the drug. She was given 20 mg IV Lasix per the nighttime sign-out. She was initially given ceftriaxone and azithromycin IV to cover CAP but later ABx were broadened to vanc and Zosyn with rising lactate of unknown source. Ultimately she had acute respiratory failure with hypoxia and need BiPAP. She was eventually intubated and a code blue was called. She unfortunately died shortly after intubation.
4/15/2021	1215373 TX	54 F	3/9/2021	4/6/2021	The pt missed her scheduled appointment for COVID vaccine #2, so I called her to reschedule. Today I reached her mother, who informed me that pt passed away last Tuesday. I did not ask for any details of her death at this time.	
4/15/2021	1216355 CA	82 M	3/12/2021	3/21/2021	At 5 AM on 3/21/2021 my father was in bed sleeping and started to gurgle, he was unresponsive, 911 was called he was unresponsive and taken to the Hospital and died at 3:22 PM on 3/21/2021. from a C V A.	
4/15/2021	1214783 IA	84 F	3/3/2021	3/5/2021	unknown details of event as pt was in LTC facility where medical records would be located. Pt is reported to have expired at the facility.	

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4/15/2021	1215403	OR	49	M	4/7/2021	4/14/2021	1 week post vaccination - patient, not responding to albuterol HFA, called 911, he passed out, was unresponsive, pronounced dead.
4/15/2021	1215380	MT	71	F	2/5/2021	3/31/2021	no symptoms
4/15/2021	1215882	OH	51	F	4/1/2021	4/14/2021	fatal pulmonary embolism from RLE DVT
4/15/2021	1216091	AZ	39	M	3/23/2021	4/13/2021	Patient at gym working out and had a seizure, when 9-1-1 crews arrived patient was post-ictal, while treating the patient he had another seizure, during transport patient went into cardiac arrest, crews provided ACLS care and transported patient to hospital for treatment. Resuscitation efforts were terminated by physician in emergency room.
4/15/2021	1216134	OH	51	F	3/19/2021	4/4/2021	Cardiac arrest...death

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4/15/2021		1216189	CA	78	F	4/1/2021	4/2/2021	78 year old woman admitted with severe back pain, inability to ambulate and leukocytosis on 3/31/21. History of hypertension, CHF, obesity, chronic kidney disease, and back pain. Work up included multiple consults. The patient was placed on SQ heparin for VTE prophylaxis. Acute L5 fracture was found along with emphysematous changes. Neurosurgical evaluation- no surgery was necessary. During the first 24 hours (before receiving the vaccine), the patient's Hg dropped 9.3 to 6.8 and platelets dropped 130K to 61 K with no apparent bleeding source. PRBC transfusion was given. GI consult was obtained the patient was scheduled to have EGD the following morning (day 3). Cardiology was obtained for elevated troponin and hypoxia. An echo obtained on day 2 showed moderate elevated pulmonary artery pressure, mild to moderate tricuspid regurgitation, and normal sized right atrium and ventricle. The patient received the Janssen vaccine upon request the morning of hospital day 2 (4.1.21 at 11:02). At 11:37PM on 4/1/21 the patient received 5mg IV metoprolol for elevated HR of 132 (BP 129/67). At 0128 on 4/2/21 the patient's heart rate dropped into the 60's and then declined further requiring cardiac resuscitation. The attempt was unsuccessful and the patient expired at 01:43 on 4/2/21. An autopsy was conducted (results available on 4/13/21) showed a 4 cm clot in the patient's right atrium and a mural thrombus in her femoral artery.
4/15/2021		1216240	OR	94	F	3/16/2021	4/8/2021	Massive stroke Death 4 Days later
4/15/2021		1216264	NJ	87	F	1/26/2021	3/28/2021	Patient admitted 3/28/2021 with severe COVID 19 pneumonia. She progressed to acute respiratory failure and was intubated. During her hospitalization she was diagnosed with acute myeloblastic leukemia. Her family withdrew care and she died on 4/7/2021
4/15/2021		1213567		85	F	2/8/2021	3/1/2021	Narrative: On 1/11/21, patient received Moderna COVID vaccine #1 and on 2/8/21, she received dose #2. No notes record any adverse events to vaccine. There is a scanned document from 2/24/21 where patient agreed to home hospice care. Date of death is recorded as 3/1/21. No documentation of any events from time of vaccines to date of death. No autopsy results reported. 21 days from date of vaccine #2 and date of death.

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4/15/2021	1212390	NY	81	F	3/9/2021	3/13/2021	Within 4 days of the vaccine she became weak, nauseous, body pain and developed a fever. She was unable to get out of bed at all. One week after vaccine she suffered a stroke.
4/15/2021	1215401	MS	69	M	4/5/2021	4/14/2021	PATIENT'S SISTER CALLED THIS AFTERNOON STATING HE HAD RECEIVED THE JANSSEN COVID VACCINE 4/05 AND THEY FOUND HIM DEAD THIS MORNING. THEY ARE NOT CERTAIN IF IT WAS FROM VACCINE. THEY CLAIM HE HAS NO OTHER HEALTH ISSUES AND IS NOT ON ANY OTHER MEDICATIONS. THEY HAVE NOT PERFORMED AUTOPSY. SHE WAS MORE RELAYING INFORMATION RATHER THAN BLAMING THE DEATH ON THE VACCINE. SHE REQUESTED WE SUBMIT REPORT TO VAERS; SHE HAS NO WAY TO AND DOES NOT KNOW HOW.
4/15/2021	1214056	MI	71	M	4/8/2021	4/8/2021	got up out of his chair to leave from his 15 minute wait and fell face down on the floor. He did not put his hands out and received a cut on his left cheek below eye from glasses. He was assisted onto his feet and back onto his chair. Vital signs were BP-117/64, Pulse 85, RR 18, O2 sat 98% (WNL). Water provided to patient. Had him take several deep breaths. Band Aid applied to cut on cheek. Patient did not complain of any symptoms. Denies dizziness. Refused to seek further medical attention or go to ER. He was then assisted back to his car by staff after the incident.
4/15/2021	1213568		76	M	2/26/2021	3/20/2021	death Narrative: Patient received Moderna covid vaccine # 1 on 2/26/21. Per scanned records on 3/18/21, he presented to the ER with reports of shortness of breath and was subsequently admitted and treated for acute CHF, NSTEMI and sepsis (ceftriaxone and azithromycin). He later developed AKI and surgery was consulted for placement of a Trialysis catheter. After placement of this catheter, he developed increasing respiratory distress and confusion and was transferred to the ICU where he received vasopressors, intubation and unsuccessful resuscitation after a code blue. Autopsy reports not available. 22 days from date of vaccine to date of death.

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4/15/2021	1213569		81	M	2/4/2021	2/24/2021	death Narrative: Patient received COVID vaccine #1 on 2/4/21. On 3/1/21, it was reported to the facility that patient had passed away on 2/24/21. No notes on file with respect to what happened around the time of his passing. No autopsy results available. 20 days from time of vaccine to date of death.
4/15/2021	1214705	IA	61	M	3/27/2021	4/4/2021	Patient passed away on April 4 2021
4/15/2021	1213571		74	M	3/1/2021	3/25/2021	Death. Narrative: Patient received Moderna COVID vaccine #1 on 3/1/21. On 3/17/21, he was admitted to a facility for a CABG. Per notes, after his CABG, he developed Pseudomonas pneumonia, AKI requiring dialysis and ultimately became oliguric. He required epinephrine, dobutamine, dopamine, amiodarone and went through two code blues prior to pronouncement of death on 3/25/21 at 2305. No autopsy reports available. 24 days from time of vaccine to date of death.
4/15/2021	1213572		85	M	2/1/2021	2/28/2021	death Narrative: Patient received COVID vaccine #1 on 12/30/20 and #2 on 2/1/21. He was an inpatient in the facility and had been under hospice care since 12/9/20. No adverse events to vaccine found per notes. On 2/27/21, he began to have short and rapid respirations and was unresponsive. He was given morphine, atropine sublingual, lorazepam and nebulizers per hospice care orders and was determined to be imminent. On 2/28/21 at 2230, he passed. No autopsy results available. 27 days from date of vaccination to date of death.
4/15/2021	1213955		72	M	3/9/2021	4/3/2021	My brother is now dead, less than one month after his second shot
4/15/2021	1213993	IL	61	M	2/5/2021	3/21/2021	Abdominal pain, transferred to ER 2/24/21, admitted to hospital, Expired at hospital 3/21/21

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4/15/2021	1213570		83	M	2/12/2021	3/21/2021	death Narrative: Patient received Moderna Covid vaccine #1 on 2/12/21. On 2/17/21, his son contacted the clinic social worker to inquire about home health services as he thought Patient had had a stroke (no longer able to walk and slurred speech). Patient refused to go to the hospital and son agreed to not have him admitted for fear that he would die alone in a hospital. Patient receives primary care from a provider and social worker suggested that he contact his PCP regarding home hospice services. No further notes of what occurred after that conversation and his date of death is reported as 3/21/21. No autopsy results available. 37 days from date vaccine to date of death.
4/15/2021	1214135	KS	66	F	4/7/2021	4/8/2021	unknown, death at home, with no one in attendance. Pt with multiple medical conditions, when RN administered 2nd dose on 4/07/2021. They discussed how the first one went. Pt states, besides sore arm nothing. She did have acid reflux, (common for her) which she took regular medication which took care of it. But denied any other problems with first dose. Second dose given with no reaction during 15 min observation time. EMS was called to scene on 4/08/2021 at approx 1630 hrs, to find pt deceased, spine in bed. approx down time 2-3 hrs. Pt's primary Dr. contact as well as corner. With pt's medical history no further investigation was done.
4/15/2021	1214501	OH	88	F	1/23/2021	4/4/2021	DEATH
4/15/2021	1214640	RI	46	M	4/11/2021	4/12/2021	After receiving the J&J vaccine on Sunday afternoon, when my husband got up on Monday morning he passed out in the bathroom and was unresponsive. The EMTs arrived and were able to revive him in the ambulance. When they reached the hospital he was put on life support. After he coded again in the Emergency room they told me he was without oxygen for too long and was taken off the respirator. He passed away at 4:10 PM.
4/15/2021	1214544	OH	55	M	3/8/2021	4/11/2021	Patient died of a brain stem bleed on 4/11/21. It is unknown if the vaccine received on 3/8/21 is in any way related to his passing.

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4/15/2021	1213958	NC	69	M	4/12/2021	4/15/2021	PATIENT PRESENTED TO CLINIC FOR ANNUAL WELLNESS VISIT ON 4/12/2021 AND RECEIVED THE JANSSEN COVID-19 VACCINE FOLLOWING HIS VISIT. ON 4/14/2021 PATIENT CALLED EMS FOR C/O CHEST TIGHTNESS. DISCOMFORT HAD RESOLVED BY THE TIME EMS ARRIVED. PATIENT WAS TAKEN TO ER FOR FURTHER EVALUATION. PATIENT REMAINED FREE OF CHEST TIGHTNESS/DISCOMFORT THROUGHOUT THE VISIT AND CARDIAC WORK-UP AT THE ER WAS ESSENTIALLY NORMAL. PATIENT WAS DISCHARGED HOME WITH F/U INSTRUCTIONS. ON 4/15/21 RN RECEIVED A CALL FROM THE COUNTY MEDICAL EXAMINER STATING THAT PATIENT WAS FOUND DECEASED IN HIS DRIVEWAY THIS MORNING AT AROUND 09:41 AM. THERE WERE NO SIGNS OF FOUL PLAY AT THE SCENE. PATIENT'S RECENT PHYSICAL AND LAB WORK WITH HIS PROVIDER ON 4/12/2021 SHOWED NO FINDINGS OF CONCERN. PATIENT HAD NO CHRONIC ILLNESSES, WAS ACTIVE, AND OFFERED NO MEDICAL CONCERNS AT HIS VISIT ON 4/12/2021.
4/15/2021	1214516	CA	63	F	3/17/2021	3/22/2021	Client was monitored after being Vaccinated for 15 minutes and staff observed no symptoms. DHS CRT was made aware of the death two days prior to 2nd dose Vaccine Clinic.
4/15/2021	1214139	PA	72	M	4/15/2021	4/15/2021	Cardiac Event
4/15/2021	1214500	WA	42	F	4/2/2021	4/14/2021	Patient at 27 weeks of pregnancy, reported to midwife at regular visit on 4/14/21 that she was experiencing SOB but all blood work normal - assumed normal SOB with pregnancy. Night/morning of 4/15 started seizures, transported to ED. Diagnosed with massive pulmonary embolism. Emergency C-section performed by Dr. Pt. did not survive.
4/15/2021	1214482	KS	66	M	3/11/2021	3/1/2021	Not feeling well according to mother the night before he passed away. 11 days after vaccination.

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4/15/2021	1214416	IL	68	M	2/4/2021	2/15/2021	Patient passed away suddenly (heart failure) on Feb 15th, 11 days after receiving the 1st Pfizer shot. I know he had other health issues, but he had a good bill of health from his doctors prior to this. I thought this should be reported.
4/15/2021	1214325	IL	69	U	2/5/2021	4/7/2021	Severe anxiety, Kidney Failure, Hypoglycemia, ER visits, Overall decline, Hospice care, Expired
4/15/2021	1213315	NJ	62	F	3/1/2021	3/1/2021	Patient received Covid vaccine (Jansen) in early March. Patient was diagnosed 7 to 10 days later with Covid. Patient self quarantined for 14 days. One week prior to ED visit patient had exertional dyspnea and SOB. Came to hospital ED and admitted to floor. Twelve hours later patient coded and expired of PE
4/14/2021	1207999	MN	72	M	2/19/2021	4/8/2021	Patient was hospitalized x 3 and died within 60 days of receiving a COVID vaccine series
4/14/2021	1207869	LA	56	M	3/5/2021	3/19/2021	Presented to the ER on 3/19 at 23:57 with 2 days of worsening shortness of breath. HR 60, Pulse Ox: 85% on Room air. Placed on BiPAP. could not maintain oxygen, intubated. The patient rapidly decompensated and went into cardiac arrest with PEA. ACLS performed for 35 minutes without the ability to reverse. Patient expired at 0222 on 3/20/21.
4/14/2021	1207928	PR	72	F	1/4/2021	2/11/2021	Shortness of breath
4/14/2021	1207946	NC	73	F	4/3/2021	4/3/2021	Pt c/o abdominal pain that began 5 min after vaccine administration, per pt's son. Pt main complaint in the ED was abdominal pain. On exam pt's abdomen was tender diffusely. Within minutes of initial evaluation the pt lost consciousness. Minutes later the pt was apneic and pulseless. Resuscitative efforts were initiated per ACLS protocol. During resuscitative efforts the pt received several rounds of code-dosed epinephrine. In addition, the pt received 1 dose of IV Benadryl in addition to medications standard for ACLS protocol. Benadryl was administered specifically to treat the possibility of anaphylaxis.

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4/14/2021		1207773	IN	71	M	2/26/2021	3/15/2021	2nd maderna vaccine was given to my dad on 02/26/2021 and on 03/15/2021 my dad was visiting me all day and he acted fine and normal. At the end of our visit between 8 & 9 pm we went to the store where he started to gasp for breath. He had to keep stopping and said he couldn't breath. I had him sit several times because I didn't know how bad it was. By the time we reached the doors to leave after a short trip he almost fell over and he became confused and said he couldn't breath. I had another customer get my dad a wheel chair close by while I called 911. The ambulance came quickly but at the hospital my dad went into cardiac arrest and his heart stopped 2 or 3 times and it had to be restarted. When I was able to get to the hospital my dad was on a ventilator and sedated. They had put him on medicine to blast the blood clots they had found. They said he had 2 very large blood clots with one on each lung. Later his kidneys started failing him and they said he would need to go on dialysis as soon as the next day. Later that night they told me my dads heart was shutting down and he had developed pneumonia. My dad died that night and I had to watch him take his last breath. If you want further information please contact Medical center would be the ones to contact for all information and my dad was in the critical care unit.
4/14/2021		1207989	PA	74	F	4/12/2021	4/14/2021	The decedent was last seen alive at approximately 0130 when the decedent's next of kin (NOK) heard the decedent walking around the residence. The decedent complained of arm soreness and indigestion; the decedent received a second COVID-19 vaccination (Moderna) on 04/12/2021. The decedent went to the living room to sleep on the couch due to the health and soreness complaints. At approximately 0750, NOK entered the living room and found the decedent unconscious and not breathing.
4/14/2021		1207822	CO	58	M	4/6/2021	4/7/2021	No adverse symptoms from vaccination. Decedent died day after 2nd vaccination, death not related to vaccination
4/14/2021		1207994	CA	71	M	3/26/2021	3/28/2021	Blood Clot on back of leg
4/14/2021		1207863	MN	73	M	2/18/2021	3/28/2021	Patient death within 60 days of receiving the COVID vaccine series

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4/14/2021		1208082	MA	92	M	3/8/2021	3/23/2021	Pt had AFIB and was on ELIQUIS 2.5 mg BID. He began to bleed, a lot. We stopped DOAC, discussed possibility pt might die from blood clot without the DOAC. He had vaccine after stopping DOAC (stopped DOAC 2/24/21). On 3/8 he had the Janssen Vaccine. On 3/15 he awoke w weakness, inability to speak. Transferred to hospital where he was diagnosed w having major stroke, admitted to hospital. They decided NOT to use anticoagulant because he had too great a risk of bleeding.
4/14/2021		1208248	RI	90	M	2/4/2021	2/5/2021	Had a general over all weakness especially affected his swallowing.
4/14/2021		1208360		83	M	2/3/2021	2/12/2021	Patient was hospitalized X 5 and died within 60 days of receiving a COVID vaccine
4/14/2021		1208477	MO	84	M	3/19/2021	3/30/2021	Received Moderna vaccine on 2/29/21 and 3/19/2021. Health began declining 2 weeks later and died on 4/13/2021 (26 days post vaccination) with heart failure listed as cause of death.
4/14/2021		1208502	FL	63	M	3/22/2021	4/5/2021	Patient deceased 04/06/2021. Reported by family member.
4/14/2021		1208505	MO	66	M	1/29/2021	2/18/2021	Patient passed away due to metastatic cancer in esophagus and liver.
4/14/2021		1208628	VA	67	M	4/9/2021	4/13/2021	It was reported by the Sheriff's Dept. that patient was found expired on 4/13/21 - sitter reported that patient went to take a nap and the sitter went to check on him and found him unresponsive and called 911; patient was DOA on arrival
4/14/2021		1208583	NY	64	M	3/10/2021	3/17/2021	Chills, Fever, fatigue. Tested positive for COVID on 3/22 and died on 3/29
4/14/2021		1207687	PA	70	M	3/12/2021	3/13/2021	My husband became very sick the day after receiving the shot. He was freezing cold. No matter what he did he could not get warm. He experienced flu like symptoms for about 24 hours. This was on Saturday. On Tuesday he died. They said it was a heart attack. He was in excellent health. We had gone to the gym 3 days a week for years. He was doing Cardio on the bike and treadmill for over an hour each time. He never experienced shortness of breath and before the shot was 100 % healthy

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4/14/2021	1206330	IL	27	M	4/11/2021	4/12/2021	Death
4/14/2021	1208579	NY	79	F	1/31/2021	2/3/2021	Developed blood clot in heart -- > went into Atrial Fibrillation with no prior history of A Fib -- > Large clot was thrown from the heart into the brain splitting into two clots, one blocking brain stem and one blocking right hemisphere -- > Death on 2/10/21
4/14/2021	1207228		92	M	2/24/2021	4/7/2021	death
4/14/2021	1206323	OH	21	M	4/10/2021	4/11/2021	Pt received vaccine at 1130 on 4/10. Per report of others reported feeling fine at 2300 4/10. Went to bed. Awoke at approx 0100 4/11, reported not feeling well, vomited, returned to bed. Found by housemate at approx 2100 4/11 unresponsive. Declared deceased with rigor mortis by EMS. Pt in custody of the coroner for autopsy.
4/14/2021	1208484	WA	87	F	3/24/2021	3/24/2021	3hrs after the patient's vaccination, she fell to the floor and was unable to get up, noted to have R sided facial droop, inability to speak, R sided weakness. Found to have a large stroke with left sided M2 MCA clot noted on CT angiogram.
4/14/2021	1206428		56	M	4/6/2021	4/13/2021	Presented with 2-3 weeks of fatigue and acute on chronic leg swelling (h/o chronic venous disease, phlebitis) 13 April; treated for dehydration and prescribed ASA. Tachycardia on exam, resolved with resuscitation. Asymptomatic 4 hours later, and expired overnight in his sleep. Found unresponsive in the morning, time of death 09:57.
4/14/2021	1208670		84	F	3/5/2021	4/11/2021	death
4/14/2021	1207096		80	U	3/29/2021	4/3/2021	Death Acute blood loss anemia Pleural effusion GI bleed NSTEMI (non-ST elevated myocardial infarction)
4/14/2021	1207097	FL	74	F	4/2/2021	4/4/2021	According to hospital records, patient presented to the ER in full cardiac arrest with ongoing CPR in progress.
4/14/2021	1207106		69	M	3/11/2021	3/31/2021	CARDIAC ARREST DEATH
4/14/2021	1207139		76	F	3/25/2021	4/5/2021	Death Cardiac arrest Hyperkalemia NSTEMI (non-ST elevated myocardial infarction) (CMS/HCC) ESRD needing dialysis (CMS/HCC)

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4/14/2021		1207001	FL	88	M	3/11/2021	3/28/2021	Intracerebral hemorrhage
4/14/2021		1207214		86	F	4/2/2021	4/3/2021	Death day after vaccine
4/14/2021		1207600		65	M	3/25/2021	4/6/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/14/2021		1207237		90	M	3/11/2021	3/22/2021	Death Hypokalemia LBBB (left bundle branch block) Pneumonia Anemia Hypoxia Fever Multifocal pneumonia Pneumonia due to COVID-19 virus2.82 Sepsis
4/14/2021		1207254	CA	60	M	3/20/2021	4/8/2021	Deceased complained of abdominal pain and was taking aspirin for a headache. He died within less than a day of initial complaints.
4/14/2021		1207286		67	M	3/17/2021	3/29/2021	Death
4/14/2021		1207340	AL	70	F	3/12/2021	3/19/2021	Covid like symptoms within days of vaccine. Outcome: death.
4/14/2021		1207372	PR	90	F	1/13/2021		On 1/21/2021 Caregivers proceed to go on rounds taking vitals and found she was with low blood pressure. They call Hospice and they certify that she had passed away.
4/14/2021		1207377	OK	78	F	3/15/2021	3/15/2021	Patient had vaccine on 03/15/2021. Started complaining of extreme pain in RLE by that evening. Patient contacted health agency and portable x-rays came out to view RLE. No fractures were seen. Pain continued and was unmanageable by 03/20/2021 and patient was transported to the ER. Patient was found to have blood clot in RLE and admitted to ICU. Patient further declined while admitted having multiple system failure and passed away on 03/25/2021.
4/14/2021		1207395	PR	95	F	1/13/2021	1/24/2021	On 1/24/2021 the patient was discharged from the hospital due to swelling in the body, when they proceeded to infuse medications. She herself had passed away.
4/14/2021		1207401	FL	64	F	3/30/2021	4/10/2021	SUDDEN DEATH - PULMONARY EMBOLUS DUE TO DEEP VEIN THROMBOSIS RIGHT POPLITEAL VEIN

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4/14/2021		1207428	KS	89	F	4/6/2021	4/7/2021	Patient declared deceased the day after receiving second Moderna COVID vaccine. not her regular pharmacy to our knowledge. Have attempted to contact last known PCP with no response. Son notified pharmacy of patient passing away.
4/14/2021		1207198		87	F	3/11/2021	4/8/2021	Death Anemia GI bleed Lactate blood increased CKD (chronic kidney disease) Jefferson fracture
4/14/2021		1210441	TN	65	M	3/19/2021	3/19/2021	I spoke to patient by phone on Saturday morning around 9:20am. He was concerned about the fatigue, nausea, headache, chills, and muscle aches he had the night before. He felt better when I spoke to him. He wanted to know when those side effects would go away finally. Since I had the Moderna vaccine I said 24 to 36 hours. But I didn't know about the J&J vaccine. We disconnect the call at 9:40am Saturday morning. After the call at some point he fixed lunch or dinner and stopped eating before finishing his meal. He had left the food on the table and in the pans he fixed it in. Very unusual for him. The patient then went to his room where he was found Monday 3/22/21 around noon in his bed laying on his chest (he hated to lie on his chest) by the police and the HR officer from his work. The HR officer had called my other brother around 11:15am on 3/22 /21 to ask if we had heard from the patient because he had not reported to work or phoned in. He has passed sometime between noon on Saturday till Sunday evening alone at his residence. He had towels and a trash can beside his bed when he was found. The coroner call it death by natural causes and would not do an autopsy when even asked by his PCP.
4/14/2021		1209647	WA	75	F	2/8/2021	2/11/2021	Acute brain hemorrhage
4/14/2021		1209724	PA	74	M	4/9/2021	4/12/2021	Hospice patient received Janssen vaccine on Friday and passed away peacefully on Monday. We don't think the death is related to the vaccine but reporting it since it happened less than a week after receiving vaccine

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4/14/2021		1209804	PA	77	M	4/9/2021	4/10/2021	Timeline of events: o No concerns in the past month. o Usual state of health on Friday 4/9/2021 o Received Pfizer vaccine at event on 4/9/2021 o Fatigue, poor PO intake and myalgia on Saturday, 4/10/2021; Received Tylenol at 1 pm o Texted Primary Community Nurse (PCN) (not on call), on Saturday, to share above. PCN followed up Sunday morning and reassured them. o Last seen alive Sunday night, not well from vaccine but does not seem like family was concerned enough to page on call team o Monday morning- found dead in rigor mortis o Cause of death: deemed sudden cardiac death. Etiology unclear. o Unexpected death.
4/14/2021		1209825		54	F	2/17/2021	3/12/2021	Hospitalized 03-13-2021, Diagnosed with Thrombotic Thrombocytopenic Purpura, Died 03-16-2021
4/14/2021		1209873	TN	55	F	3/15/2021	3/31/2021	The day after receiving the first dose of the Pfizer vaccine, she developed a headache behind her right eye that never went away. Then on Wednesday morning, March 31st (two weeks after receiving the first dose), she was found in bed by my mother, unable to walk or talk, her face was drooping, she was very sweaty, and had defecated on herself. My mother called the ambulance. She was transported to Hospital where it was determined she had suffered a massive hemorrhagic stroke. She was immediately transported by ambulance to another Hospital. She spent one day in ICU and then was put on palliative care. She died around 12/N on Friday, April 2nd, two days after the stroke.
4/14/2021		1209903	NJ	19	F	3/6/2021	3/13/2021	I DON'T KNOW THE EXACT EVENTS FOR THE CASE, BUT WAS ASKED TO FILL IN THE INFORMATION THE BEST I COULD WITH THE INFORMATION I HAD ON HAND. THIS YOUNG LADY, RECEIVED A COVID-19 VACCINE ON 3/6/2021 AND EXPIRED ON MARCH 13, 2021. THIS IS MOST OF THE INFORMATION THAT I HAVE. YOU WOULD NEED TO CONTACT THE MEDICAL EXAMINER'S OFFICE, THAT WILL BE ABLE TO PROVIDE YOU WITH MOST DETAIL FOR THIS CASE.

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4/14/2021	1209906	NJ	75	M	2/16/2021	3/4/2021	On March 4 patient experienced vomiting. Early morning March 5 he fell and landed on his hip after being disoriented and experienced aches, weakness, and nausea without vomiting throughout the day. On March 6 he experienced excruciating pain in his left hip and went to the local emergency room following guidance from his primary care physician. He was diagnosed with fluid near his hip joint at the hospital and was discharged the same day. The next day, March 7 he was still in pain but able to walk with assistance. On March 8 he got an x-ray from an orthopedic physician and severe arthritis was found. March 10 the severe pain persisted, but he was able to walk with a walker. On March 12 he received a cortisone shot and required emergency medical assistance to get into a personal vehicle with a family member who drove to the appointment. The next few days, the pain persisted, became worse, and spread throughout his body. On March 16 he was transported by emergency medical services to the local emergency room for treatment and was diagnosed with sepsis and pneumonia. On March 18 he was still being treated when he experienced cardiac arrest while being intubated. He was resuscitated and was on a ventilator being treated for a few more days but ultimately succumbed to sepsis on March 30.
4/14/2021	1210133	MO	71	F	4/9/2021	4/10/2021	Patient had her Johnson and Johnson Covid 19 vaccine on Friday April 9, 2021. Prior to the vaccine patient displayed no noticeable signs of deteriorating health. Over the next two days, friends of the patient attempted to contact her with no success. Finally after several hours of no contact, the grandchildren of the patients friend went to her apartment and found the patient lying on the couch unresponsive. When the patient was found, her leg was swollen. She was cold and not breathing. She passed away after receiving the Johnson and Johnson vaccine.
4/14/2021	1209498	NY	49	M	3/24/2021	4/12/2021	Pt received the vaccine on 3/24/21. On 4/12/21 pt died of cardiac arrest

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4/14/2021	1210317	OH	58	M	3/17/2021	3/22/2021	We both got our shot at the same time on March 17, 2021. Then on March 22, 2021 at 9:20 PM my husband suffered cardiac arrest and a seizure. His heart was revived however, due to lack of oxygen to his brain he suffered brain damage and never regained consciousness and passed on 4/3/21 with acute respiratory failure.
4/14/2021	1210581	CO	69	M	3/24/2021	3/30/2021	Patient's daughter in law called to report the adverse event and will be submitting a VAERS as well. Pt rcvd first dose of vaccine 03/03 and 16 days later on 03/19 he was hospitalized for respiratory unrest, cause unknown. It was not suspected to be caused by the vaccine at that time. Doctors encouraged him to rcv the second dose and pharmacy staff was informed pt had been given the go ahead to do so. Pt marked that he was not currently ill on his informed consent form and that he had not had a previous reaction to the vaccine. 5 days after rcving his second dose (03/30) he arrested again resulting in hospitalization later death on 4/4.
4/14/2021	1210630	OH	59	M	3/4/2021	3/6/2021	Mother called health department today, 4/14/21, to report reactions son experienced after receiving vaccine 3/4/21. She stated that on 3/6/21 he started having headaches, weakness and leg cramps. He went to the hospital two times with complaints. On 3/15/21 he was unable to walk/drive because headaches were severe. On 3/30/21 he passed out, squad was called. He was not responsive and was put on a vent at the hospital. A "scan" showed blood clots in brain and heart. This individual passed away on 4/4/21.
4/14/2021	1211052	IL	74	M	3/13/2021	3/28/2021	My father received his shot on March 13, 2021. He drove to move home and on March 28th started having his right arm go numb but did not tell us. He asked to go the ER March 29th at 6:45am saying his chest hurt and was having a hard time breathing, this has happened before since having Covid in September. I called 911 after he became dizzy and could not walk. While at the ER suffered a massive stroke that paralyzed him from his nose down over a course of 3 days. His brain stem was affected and he lost the ability to swallow. After being on a ventilator for 72 hours he was removed from it and died less then 30 mins later from drowning in his own saliva on April 1, 2021.

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4/14/2021	1211110	SC	68	F	3/13/2021	3/27/2021	Death
4/14/2021	1211145	NJ	81	F	3/18/2021	4/14/2021	Deceased unexpectedly. From day of second dose 3/18/21, patient reported feeling tired (no fever, no shortness of breath) but was able to walk 3 flights of stairs on 4/11/21 and felt slightly better. Went to church that Sunday 4/11. Was not seen after that, then found deceased at home 4/14/21 with blood in mouth, no other signs such as lacerations or incontinence or other vomitus.
4/14/2021	1212227		83	M	1/13/2021	2/11/2021	death Narrative: Patient received COVID vaccine #1 on 1/13/2021. On 1/19/2021, notes from primary care indicate advancing dementia and a urinalysis suggestive of a UTI, he was ordered a course of cefdinir and PCP at that time suggested long term care. On 2/1/2021, he was admitted to a facility for acute kidney failure and was also noted to have frequent falls at home, no scanned records from that hospitalization are available. On 2/7/2021, he discharged from that facility with home hospice. On 2/11/2021 at 0140, Patient passed away at home. No autopsy results available.
4/14/2021	1212418		84	M	1/4/2021	2/4/2021	death Narrative: Patient received his COVID #1 vaccine on 1/4/2021. He is noted to be a dialysis patient and on 1/21/2021 was given a RX for treatment of a UTI. On 1/24/2021, he was admitted to a facility with a syncopal episode. He remained there until 2/2/2021 when he discharged to home. On 2/4/2021, notes indicate that he passed away in his sleep that night. No autopsy reports available. 31 days from time of vaccine #1 and date of death, does not appear that he received vaccine #2.

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4/14/2021		1208709	WV	84	M	3/1/2021	3/30/2021	The information was presented by his granddaughter. He was scheduled to come in for his second vaccination with his granddaughter on 4/14/21, however, he passed away on 4/13/21. His granddaughter stated he experienced a severe nose bleed just under a week post vaccination (1st dose/Pfizer). The nose bleed lasted a few hours and had to be controlled by the Hospital. The incident reoccurred a week later and again, the bleeding had to be controlled by nasal clamp and lasted for a few hours. The patient began having pain in his stomach and feet, and stayed pale and nauseous. On 4/13/21 the patient was found in his bed saturated in blood and had soiled himself. His family called EMS and the patient went to Hospital. The patient coded and was not revived. The granddaughter stated that he had an enlarge prostate that was discovered during one of his hospital visits in the past 3 weeks.
4/14/2021		1208419	CA	48	M	3/13/2021	4/12/2021	Patient described throwing up, pale in skin, sweating prior to passing away.
4/14/2021		1210267	WI	93	M	2/2/2021	2/3/2021	Dad became very sleepy the day after. He quickly declined and died on Feb. 7 th. I feel the vaccine may have had something to do with his death.
4/14/2021		1208905	FL	83	M	3/26/2021	3/1/2021	Patient felt fatigue, malaise, SOB and chest pain 2-4 days after vaccine
4/14/2021		1208718		69	F	3/9/2021	4/5/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/14/2021		1208724		74	M	2/23/2021	4/1/2021	death
4/14/2021		1210673	MO	71	M	2/12/2021	4/2/2021	patient experienced a massive brain stem stroke on the morning of Friday, April 2, 2021. He was found minimally responsive on the floor at home and rushed to Medical Center which has a comprehensive stroke center. Imaging and testing determined there was no chance of recovery that would restore meaningful quality of life. The family removed life support on Saturday, April 3, 2021. Of note ,Patients sister, also, similarly suffered mild stroke shortly after receiving her 2nd Pfizer COVID-19 vaccine. Her recovery is ongoing and her family has been encourage to also report to VAERS.

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4/14/2021	1209462	TX	74	M	2/1/2021	2/1/2021	NA
4/14/2021	1208744		81	M	4/2/2021	4/9/2021	Death
4/14/2021	1208762		93	F	3/13/2021	4/8/2021	Death
4/14/2021	1208807		82	F	2/26/2021	3/8/2021	Death Anasarca Hyperammonemia Altered mental status Pulmonary edema Hypermagnesemia ARF (acute renal failure) Anemia
4/14/2021	1208945	TX	67	F	3/31/2021	4/7/2021	The patient received the vaccine on 3/31/2021. On 4/7/2021, patient developed weakness that continued until 4/14/2021. Patient also developed shortness of breath on 4/14/2021. The patient presented to the ER for weakness and shortness of breath. Patient had labwork, EKG, and an Xray. Troponin, BNP, and D-Dimer were elevated. Sodium was low. Chest xray showed congestive heart failure. Pt required intubation and then coded. Cardiac life saving procedures were started but the patient succumbed to death. Patient death pronounced per MD.
4/14/2021	1209081		81	M	2/18/2021	2/27/2021	Cardiac Arrest Death Sepsis due to methicillin susceptible Staphylococcus aureus
4/14/2021	1209096		61	M	2/19/2021	4/5/2021	Death
4/14/2021	1209252	WI	76	F	3/11/2021	3/11/2021	On 4/13 patient's daughter in law called public health department to report that patient was found by EMS on 3/12/21. They believe patient had passed away over night. No autopsy was done. Family member reported that EMS believed the cause to be heart attack or pulmonary embolism.

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4/14/2021		1209422	WI	62	F	3/26/2021	3/26/2021	Per the patient's husband, on 03/26/2021, the day after vaccination, the decedent complained of nausea with vomiting, and had difficulty driving. On 03/27/2021, her nausea continued and she complained of shortness of breath while walking. On 03/28/2021, she was short of breath before vomiting a small amount. She then became unresponsive. Death was pronounced a short time later. Per her treating physician who signed the death certificate, the cause of death is felt to be probable myocardial infarction due to electrolyte abnormalities due to complications of her diabetes mellitus.
4/14/2021		1208779		82	F	3/5/2021	4/2/2021	Death
4/14/2021		1209447	MO	90	F	2/15/2021	2/16/2021	Sudden death No reported symptoms 24 hours after vaccine
4/14/2021		1209119		78	M	2/18/2021	4/7/2021	Death Dehydration Community acquired pneumonia Closed head injury, initial encounter Fall at home, initial encounter Acute hypoxemic respiratory failure
4/14/2021		1209441	MD	67	F	1/20/2021	1/31/2021	My mother and I received the Moderna vaccine on January 20th. About two weeks later on January 31st, she complained about her leg. It was swollen. Later on that day, she collapsed, was rushed to the hospital. Died on February 4th due to anoxic brain injury due to DVT that caused a massive pulmonary embolism.
4/14/2021		1209341	IL	78	M	2/5/2021	4/13/2021	Received Vaccine 1/15/21 and 2/5/21. Transitioned to Hospice care. Expired 4/13/2021.
4/14/2021		1209415	SC	61	F	3/30/2021	3/30/2021	Patient experience flu like symptoms and body aches the same evening after receiving vaccine. On 4/1/21 the patient experienced nausea, high blood pressure, and a headache. Around 7:00 pm that night the patient threw up and became unresponsive. The patient was then transported to the hospital by ambulance. A CT scan showed a brain bleed and the patient was intubated and transferred to another hospital.
4/14/2021		1209172		100	F	1/20/2021	4/10/2021	Death
4/14/2021		1209158		93	F	1/20/2021	4/2/2021	Death Sepsis Acute Kidney injury

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4/14/2021	1209139		81	F	2/17/2021	3/19/2021	Death Shortness of breath Sepsis
4/13/2021	1201993		74	M	2/19/2021	3/23/2021	DEATH Narrative: Patient passed away after Covid Vaccine. 2/8/21: brought to the ER for evaluation for leg weakness and a recent fall associated. He was in a facility- per patient he fell when standing from the bed, he though he could do it and did not ask for help. He has been with hip and pelvic pain since then. The CT/XR shows evidence of lytic lesions, an IR bone biopsy was done and came positive for metastatic bladder carcinoma. 02/17/21: transferred to the facility for PT and pain management, originally for short stay rehab then changed to hospice care. 02/19/2021: received covid vaccine 03/05/21: discharged from facility on home hospice 03/23/21: pt passed away at home Patient with prior covid infection; tested positive last on 9/25/2020. Vaccine did not likely contribute to patient's death, as he was on hospice due to malignant cancer. No evidence of reaction immediately after vaccination or before date of death.
4/13/2021	1201889	LA	82	F	4/9/2021	4/12/2021	I am an investigator with the coroner's office. We have a death that occurred on 4/12/2021 that we ruled a natural death due to atherosclerotic cardiovascular disease. The family is concerned that the decedent was doing "fine" until she took the J&J COVID-19 vaccine on April 9, 2021. We DO NOT KNOW if the J&J vaccine caused this death, but are reporting it due to the close proximity of the vaccination to the death itself.
4/13/2021	1201994		93	M		3/22/2021	DEATH Narrative: Patient passed away within 30 days of Covid Vaccine dose #1. No evidence of ADR immediately following vaccine or between vaccine and date of death. No evidence of illness or hospitalization before or after vaccine up to date of death. No evidence of illness or hospitalization before or after vaccine up to date of death. No evidence of a previous positive covid infection. No evidence of pre-disposing factors to preclude use of vaccine. Unlikely that vaccine contributed to patient's death, but cause of death was likely advanced age +/- potential comorbidities. No death note or autopsy documented in record.

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4/13/2021	1202019	MA	67	M	4/12/2021	4/12/2021	This patient was under hospice care at home with Nursing Service and Hospice. He received the J&J vaccination at noon by local public health nurse on Mon 4/12/21. The patient's wife, reported to hospice team that he had been sleepy during the day and had received a dose of Ativan earlier that morning (PRN medication at 0750). The primary hospice nurse reported wife noted he became more lethargic throughout the day after vaccination with his condition worsening at 1720; at that time his blood sugar levels were noted to be low at "47" but patient was alert enough to drink orange juice, eat ice cream. The patient continued to deteriorate so MD was consulted and he was transported to the ED where he later expired at 1930.
4/13/2021	1201981	MA	68	F	3/24/2021	3/30/2021	7 days after the COVID vaccine, patient went into resp. arrest and died in the ER
4/13/2021	1201835	PA	59	F	3/12/2021	3/19/2021	Low grade fever, aches & chills on 3/13/21 & 3/14/21. Felt better 3/15/21 through 3/18/21. Side effects (fever, aches, chills) returned on 3/19/21 & 3/20/21. Suffered stroke on 3/21/21 at 3:30 AM due to blood clots. Passed away on 3/22/21.
4/13/2021	1201682	TX	56	M	3/12/2021	3/31/2021	PATIENT HAD DIZZINESS, WENT TO DR, THEN NEXT DAY ER AND ENDED UP DYING 4-2-2021
4/13/2021	1201543	NC	39	F	3/3/2021	3/12/2021	Death
4/13/2021	1202257	UT	42	F	3/5/2021	3/19/2021	Brother called pharmacy on 04.13.2021 at approximately 10am and informed pharmacist that his sister had passed away due to a pulmonary embolism about 2 weeks after receiving her first dose of the Moderna COVID vaccination at our pharmacy. He mentioned that healthcare provider was looking at possible gene mutation in family that may have contributed.
4/13/2021	1202649	WA	74	F	3/1/2021	3/31/2021	Blood clots then death

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4/13/2021		1201528	IL	88	M	1/12/2021	1/13/2021	My Father had been in his usual state of health when he received his first Pfizer Covid-19 shot on 1/12/2021 and his second dose on 2/2/2021. He complained of being tired and chills on 1/13/2021 and again on 1/20/2021. He was diagnosed with a UTI and placed on antibiotics on 1/27/2021. After the second covid-19 shot on 2/2/2021 my father had a change in his condition on 2/4/2021. He became very lethargic, more confused and unable to speak and was send to the Hospital. He spent from 2/4/2021 to 2/12/2021 in the hospital being treated for a UTI and also was said to have had a Transient Ischemic Attack. He went to a rehab facility for Physical Therapy from 2/12/2021 to 2/19/2021 after which he returned to the Assisted Living Facility. He had another episode of lethargy/unresponsiveness on 2/26/2021 and was once again sent to the hospital where they did not show any new findings. He spent a few days in the hospital before returning to his facility where he continued to have periodic episodes of increased lethargy/confusion and decreased eating. He was placed on Hospice and passed away on March 29th.
4/13/2021		1201475	NY	88	F	1/26/2021	1/27/2021	WE RECEIVED A TELEPHONE CALL AT 4:45 PM ON 1/27/21 THAT WAS NON RESPONSIVE AND A FOLLOWING CALL AT 5:00 PM THAT SHE HAD PASSED.
4/13/2021		1201691	OH	90	F	1/20/2021	1/24/2021	developed fluid in lungs difficultly breathing.
4/13/2021		1202320	MD	83	F	3/8/2021	3/9/2021	Acute stroke
4/13/2021		1202366	AL	50	F	4/9/2021	4/10/2021	pt recieved vaccine at 1135 on 4/9, pt reported tongue swelling around 1130 the next day (4/10, 24 hrs after), presented to ED via EMS 1518, was diagnosed with angioedema likley due to ramipril, was intubated by 1624. pt had difficult intubation, was transferred to ICU, in critical condition on a ventilator, days later, after multiple cardiac arrests and multiple rounds of ACLS were performed, the pt was pronounced dead at 0127 on 4/12
4/13/2021		1202386		77	M	2/17/2021	4/10/2021	Multiple comorbidities - Cardiogenic/septic shock, Acute Respiratory failure, AKD stage 3

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4/13/2021	1202450		75	M		3/4/2021	UNRESPONSIVE, CARDIAC ARREST Narrative: Death following Covid Vaccine dose # 1 According to nursing note 3/4/21: "pt was found unresponsive in bathroom this AM, no foul play suspected" No evidence of ADR immediately following vaccine or up until date of death. No recent hospitalizations before, at time of or following vaccination up to time of death. No illnesses recently around vaccination or time of death. No pre-disposing factors to death. Unlikely that vaccine contributed to patient's death, but was likely a result of advanced age (74 y/o) in combination with comorbidities.
4/13/2021	1202456	AZ	75	F	3/9/2021	3/17/2021	Death. My mother passed away 3/18/2021 from pulmonary arrest.
4/13/2021	1202463	MN	95	F	1/28/2021	2/10/2021	Patient was hospitalized x 2 within 60 days of receiving a COVID vaccine series
4/13/2021	1202478	AZ	61	F	3/9/2021	3/28/2021	This is a 61 year old female, with history of hypertension, who presents to the ED via EMS for evaluation of cardiac arrest prior to arrival. Patient's husband came from another [sic] room and found patient take a big gasp then suddenly became unresponsive. EMS gave patient a total of 4 rounds of Epi, 1 Narcan, and 2 shocks en route. EMS reports with glucose level of 92. Unknown if patient is on any anticoagulation. Patient presents in asystole. Epi and bicarb given. Compressions performed. Lungs equal with bagging. Bedside US performed which did not reveal any meaningful cardiac activity. Code called. Discussed with family, they state she had been having some cardiac issues and her daughter died of cardiac problems in her 30s.
4/13/2021	1202482	TX	48	F	4/6/2021	4/12/2021	blood clots
4/13/2021	1202616	MN	83	F	2/12/2021	4/11/2021	Patient death within 60 days of receiving the COVID vaccine series
4/13/2021	1202683		73	F	3/29/2021	4/10/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine
4/13/2021	1202719	AL	53	F	4/11/2021	4/12/2021	Death of patient within 24hrs of vaccine
4/13/2021	1201361	VA	70	F	3/6/2021	3/30/2021	Patient passed away between 3/30/21 and 4/1/21 at home.

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4/13/2021	1200541		78	F	2/25/2021	3/9/2021	Death
4/13/2021	1202561		76	M	2/18/2021	4/11/2021	CVA with residual hemiparesis - C-Diff, diarrhea, weakness. AKI
4/13/2021	1200807	MA	54	M	4/9/2021	4/12/2021	Died within five days of receiving
4/13/2021	1202725		97	F	2/14/2021	3/31/2021	Advanced age, Hospice
4/13/2021	1205392	ID	63	F	2/16/2021	2/16/2021	blood clots in left leg and both lungs diagnosed on 2/22, died 2/24
4/13/2021	1199642	PA	92	M	3/15/2021	4/6/2021	Patient was not present for 2nd dose clinic today. Manager of facility reported that patient died in his sleep on 4/6/21
4/13/2021	1200514	MO	61	M	4/4/2021	4/5/2021	Death on 4-5-21 the day after the shot. Bloody nose during that day
4/13/2021	1200519		68	F	3/26/2021	3/30/2021	Death
4/13/2021	1200564	MI	65	M	3/25/2021	3/1/2021	Unknown
4/13/2021	1200573	TX	56	F	3/12/2021	3/15/2021	She had a slight fever after administering vaccine. On Mar15 till 10:30PM she is doing good, working on household chores. All of a sudden she complained about a pain behind ear that crept to her Head (Unbearable pain). With in a minute she became unconscious and we called 911, they took her to Medical Center and moved her to another Medical Center Neurosurgeon is available. As per doctors, cause of death as per Death Certificate are as follows: Cerebral Herniation Malignant Cerebral Edema Anoxic Brain Injury Aneurysmal Subarachnoid Hemorrhage
4/13/2021	1200591		91	F	3/10/2021	3/13/2021	Death SHORTNESS OF BREATH Hyponatremia Atrial fibrillation (CMS/HCC) Generalized weakness SIADH (syndrome of inappropriate ADH production) (CMS/HCC) Pleural effusion on right Syndrome of inappropriate secretion of antidiuretic hormone Sick sinus syndrome
4/13/2021	1200619		74	F	3/29/2021	4/2/2021	Death Sepsis abdominal pain
4/13/2021	1200658		93	U	2/10/2021	3/1/2021	Bell's palsy Altered Mental status Death

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4/13/2021	1200688		90	M		1/29/2021	Death
4/13/2021	1200569		73	F	3/4/2021	3/9/2021	Death Abdominal pain Abnormal CT scan Partial gastric outlet obstruction Disorder of common bile duct Hyperbilirubinemia Colon cancer (CMS/HCC) Obstructive jaundice
4/13/2021	1200805		90	F	2/20/2021	4/1/2021	FEVER VOMITING ISOLATION-INFECTIOUS DISEASE Death
4/13/2021	1201283	FL	89	M	3/29/2021	4/12/2021	Had a fatal heart attack
4/13/2021	1200851		68	M	2/6/2021	3/10/2021	Acute hypoxemic respiratory failure (CMS/HCC) Chest pain sepsis Death
4/13/2021	1200921	FL	83	M	3/9/2021	3/10/2021	Chills, tiredness. DEATH.
4/13/2021	1200923	KY	73	M	3/18/2021	4/10/2021	Patient died of a heart attack
4/13/2021	1200939	VA	46	F	3/19/2021	4/6/2021	Massive PE, patient died. No history of DVT, we did a COVID test here and it was negative. She had no PMH, we suspect the vaccine made her hypercoagulable. Had pleuritic CP, tachycardia, tachypnea.
4/13/2021	1200959		33	M	4/5/2021	4/5/2021	death
4/13/2021	1201114	GA	35	F	4/2/2021	4/10/2021	Due date 4/18/2021. Pt presented in labor on 4/10/21. Her labor was uncomplicated and progressing appropriately. She had sudden onset of coughing following by loss of consciousness. Code blue was called. Emergency bedside C/S was performed. Despite resuscitative efforts of 1 hour and 15 minutes, the patient expired.
4/13/2021	1201130	OR	68	M	3/10/2021	3/24/2021	Death on 03/25/2021 ruled as cardiac arrest.
4/13/2021	1201182	NY	73	M	2/19/2021	4/8/2021	Sudden death - found by paramedics
4/13/2021	1201226	PR	90	F	2/10/2021	2/13/2021	She was taken to the hospital for respiratory distress, she was turning purple. She dies arriving at the hospital.
4/13/2021	1201247		73	F	2/27/2021	3/9/2021	Paralysis (CMS/HCC) death
4/13/2021	1201277		79	M	2/16/2021	4/12/2021	Death

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4/13/2021		1200724		73	F	2/27/2021	4/9/2021	Death
4/13/2021		1205305	FL	78	F	3/10/2021	3/11/2021	3-11 didn't feel well, passed away later that day
4/13/2021		1204266	CA	94	F	4/8/2021	4/9/2021	Patient expired day after receiving second dose of Pfizer COVID-19 vaccine
4/13/2021		1204272	MO	72	F	3/20/2021	4/12/2021	Per EMS patient's husband reports she was using the push mower in the front yard and suddenly collapsed. EMS brought the patient in with active CPR in progress and the patient was pronounced deceased in the Emergency Department.
4/13/2021		1204479	CO	67	F	3/8/2021	3/26/2021	Initially 2 to 5 days just fatigue. Evening of March 26th unusual fatigue and lower back to middle back discomfort low pain level.
4/13/2021		1204502	WI	78	M	3/3/2021	3/30/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/13/2021		1204616	ND	74	F	2/16/2021	2/18/2021	Two days after receiving vaccine patient and family reports patient developed nausea and headache. symptoms seemed to worsen over time and not improve. was evaluated on 3/3/2021 where patient reported weakness, body aches, slight ear discomfort, slight headache. Seen again on 3/8/2021 by other provider reports symptoms of fatigue, dizziness, weakness, diarrhea, nausea. Admitted on 3/11/2021 for COPD exacerbation, treated and sputum cultures grew pseudomonas readmitted on 3/18/2021 due to recurrence of symptoms, diagnosed with Covid pneumonia, increasing oxygen requirements. complication of subcutaneous emphysema with small bilateral pneumothorax from continuous noninvasive ventilation and eventually with worsening hypoxia on 100% FiO2 was intubated and chest tube placed. 4/4/2021 removal of invasive care, comfort care. patient passed away inpatient Prior to covid vaccine patient did have several co morbidities and then subsequently covid that resulted in her death, family is adamant that her decline in health started after her covid vaccine and requested adverse reaction report.
4/13/2021		1204680	NJ	90	M	3/26/2021	3/30/2021	Sudden Death approximately 75 hours after second dose of Moderna Vaccine

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4/13/2021	1204726	NY	64	M	3/7/2021	4/6/2021	Patient vaccinated on 3/7/21, on 4/2 presented pain in left leg and some redness, on 4/3 some dizziness, lightheadedness, difficulty with vision in right eye, some slurred speech; on 4/5 his health agravated and EMS was called and taken to hospital; spouse informed that patient had a blood clot in stem of brain; on 4/6 patient died. No autopsy performed
4/13/2021	1204876	MI	66	M	3/8/2021	3/8/2021	Death
4/13/2021	1205071	OH	85	U	2/11/2021	2/18/2021	On February 18, 2021 between hours 18:20-18:40 and a week after taking the second shot, patient lost balance (fainting) at home, fell, bruised a rib and fractured skull, causing subdural hematoma (bleeding outside of the brain). Bleeding stopped and several CT scans were performed. Under medical supervision, an anticoagulant medication was stopped to allow for healing. On February 20, 2021, moved from ICU to regular hospital room and on February 23 moved to another hospital for intense rehabilitation. Within days a thrombus developed causing a minor Cerebrovascular Accident, which was immediately identified by a medical doctor and nursing staff. On March 2, 2021 at 10:30 am moved to a Medical Center for further treatment. An endovascular thrombectomy for the removal of a thrombus was performed by a doctor. After recovery in the Neurosciences Critical Care ICU, under amazing care by the doctors, further thrombi developed on patient's lungs and around the bowel. Patient expired at 8:01 on March 4, 2021 due to Ischemic Complications of Thrombi/Thromboemoli.
4/13/2021	1205121	NJ	73	F	3/10/2021	3/10/2021	twelve hours after getting the shot my wife woke up with an upset stomach; her blood sugar was also slightly elevated; within ~the next two hours she became disoriented and confused; I called 911 and within a couple of minutes of the first 911 call she stopped breathing and could not be revived.
4/13/2021	1205124	IN	61	F	3/30/2021	4/1/2021	Witnessed cardiac arrest with death as the outcome
4/13/2021	1204227	MN	54	M	2/24/2021	4/6/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series

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4/13/2021	1206219	NM	79	M	3/4/2021	3/6/2021	Patient was at this hospital for brain scans to determine why a sudden exacerbation of Alzheimer's symptoms were occurring.
4/13/2021	1205249	OK	63	M	3/24/2021	3/26/2021	Died from cardiac arrest; This is a spontaneous report from a contactable consumer. A 63-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, Lot number was not reported), via an unspecified route of administration, administered in left arm on 24Mar2021 as single dose for COVID-19 immunization. Medical history included heart disease, kidney issues, and physical disability from an unknown date. Prior to vaccination, the patient was not diagnosed with COVID-19. Since the vaccination, the patient has not been tested for COVID-19. Concomitant medication included atorvastatin; spironolactone; lisinopril; and ubidecarenone, vitamin e NOS (COQ10 COMPLEX) taken for an unspecified indication. The patient previously received the first dose of BNT162B2 on 03Mar2021 11:00 AM, on Left arm, for COVID-19 immunization. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient was reported to have died from cardiac arrest on 26Mar2021. The reporter did not know if it was related to vaccine. The patient died on 26Mar2021. It was not reported if an autopsy was performed.; Reported Cause(s) of Death: It appears he died from cardiac arrest.
4/13/2021	1205282	OH	72	F	3/26/2021	4/6/2021	Patient had a stroke 11 days later(on 4/6/21) and expired
4/13/2021	1205421	NC	61	M	4/8/2021	4/10/2021	On April 8, 2021 patient received his second dose of Moderna COVID-19 vaccine at pharmacy at 1:08pm. Patient waited the appropriate 15 minutes, and then left pharmacy. He reported no adverse reactions to our staff during that time, and did not call afterward to report any adverse reactions. At approximately 4:30pm on April 10, 2021, I received notification that patient was found DOA at his residence. No other information is available at this time.

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4/13/2021		1205423	CO	44	M	4/9/2021	4/10/2021	Patient's physician reported this adverse event by phone to Medical Center administration on 4/13/2021. Per the physician, the patient received his 2nd Pfizer COVID19 vaccination dose on Friday 4/9/2021 at the drive through vaccination clinic. On Saturday 4/10/2021 the patient told to his wife that he felt ill, continuing through Sunday. On Sunday, 4/11/2021, at his home, the patient told his wife that he felt ill and went to sleep. The patients wife found him not breathing, called 911 and started CPR. The patient was pronounced deceased at his home and was not transported to hospital.
4/13/2021		1205518	NJ	46	M	4/9/2021	4/10/2021	Resident was inoculated on 04/09. According to family members, he began to feel unwell that evening, cold sweats, high fever, dehydration. According to family members, he refused to get medical attention. After not hearing from him for a few days, family members called for a welfare check on 04/12 at which time he was found deceased.
4/13/2021		1205632	CA	67	F	3/16/2021	3/16/2021	My MOTHER had a health condition, diabetes and heart problems, she was at home with palliative care, due to her condition, she was fine in the last month she was able to walk, shower, eat alone, she felt happy to be able to recover, she got the vaccine because the doctor advised her, the same day she got fever, and began to feel fatigued, 3 days later my mother died, she had heart attack from shortness of breath.
4/13/2021		1205684	NM	58	F	3/24/2021	4/3/2021	Blood Clot blocked oxygen to the brain. Suffered a severe stroke Was hospitalized Suffered brain swelling Lost brain function Died.
4/13/2021		1205714	VA	86	F	4/8/2021	4/11/2021	She was found unresponsive by her husband on 4/11/2021 and pronounced dead at the scene. She had been to the emergency room for recurrent syncope several weeks prior to any vaccinations. No cause was determined.

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4/13/2021		1205863	KY	73	M	1/9/2021	2/5/2021	Died from Pulmonary Embolism. No leg pain, no leg swelling to indicate DVT in leg. Also was thrombocytopenic at the time of emergency/ER visit/treatment. He suddenly complained of very bad chest pain, could hardly speak to tell symptoms. Immediate resuscitation was started by family member and 911 was called. Ambulance detected tech, tried to electroconvert, but was not successful. Chest compression and bagging was done until patient got the hospital. There full resuscitation effort. Unsuccessful. Troponin normal, D-dimer sky high.
4/13/2021		1205982	IN	71	F	2/26/2021	3/5/2021	On 1-27-21 my mother received her first dose of the Moderna COVID-19 vaccine (031L2A). The next day she felt something in the back of her left knee. The following day (2 days) after the injection she saw her primary care physician for the discomfort in the back of her knee. She was treated for what was believed to be a soft tissue injury. She received her second dose of the Moderna COVID-19 (14M20A) vaccine on Friday 2-26-21. The next day the back of her knee started to bother her again. She saw her doctor on Monday 3-1-21 and had an x-ray. On Tuesday the doctor's office called and said her x-ray was clear. Friday morning, 3-5-21 my father heard a loud noise (thud) and found my mother unresponsive on the bathroom floor at approximately 8:30am. He called 911. She was transported to the hospital via ambulance. The emergency room physicians worked on her for over an hour and were unable to get her back. Her time of death was 10:12am. The primary cause of death listed on her death certificate is pulmonary embolism.

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4/13/2021	1206085	OR	86	F	2/18/2021	2/19/2021	She got sick, pain in the arm and neck the day after the vaccine. I called her doctors office on the 19th of Feb and I did not get a call back. She was sick to her stomach, really tired and lost her appetite. On the 22nd I called her doctor again... no response, on the 23 I called again. On the 24th finally someone spoke to me.. they stated they had called my mom and spoke with her. They are suppose to call me, my mom could not remember by the time she would hang up. They said to let her rest and give her electrolytes and Vit. B6. On the 26th when I called the doctor and said she is lethargic they said to take her to the ER. She flat lined at the hospital and her body went into shock. She ended up having Kidney, Heart and Liver Failure. She was still driving and doing all of her cooking, banking, shopping, showering, walking every day on Feb 18th. She died on March 5th.

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4/13/2021	1202967		74	M	3/20/2020	4/8/2021	Death Narrative: Patient had Pfizer COVID vaccine dose #1 on 3/20/21. He called his provider on 3/30 to report known exposure to COVID that occurred on 3/27 and 3/28. On 4/1 he tested positive for COVID swabbed at the facility and sent to the main facility for processing. He was notified of positive result on 4/1 at 4pm. He was advised to quarantine and to call facility call center/triage should he develop any fever, shortness of breath, and other Covid-related symptoms. Provider received a phone call from PD on 4/8 notifying of patient unattended death. According to EMS report neighbors were aware of patients COVID positive status. No one had seen or heard from the patient in 3 days so they contacted PD for wellness check. Entry was forced into apartment and patient was found deceased, sitting on the couch. Not breathing ashen color. Pt has ringer and no Pulse. PMH: Quit tobacco 5-15 yrs ago Hyperlipidemia Hyperglycemia Obesity Allergic rhinitis, stable Hx AAA and Right ICA aneurysm, S/P Open repair in 2013 Patient had no prior history of COVID before 4/1 diagnosis. He was not having any symptoms between 4/1 when he tested positive and he did not call to report any symptoms between 4/1 diagnosis and death. There was no communication after 4/1 positive covid test. Patient was scheduled for a phone call with RN on 4/8 the date he was found deceased. Cause of death is not mentioned, but suspected to be due to COVID infection. There were no reported side effects to COVID Vaccine administration.

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4/13/2021	1205260	CA		F		3/22/2021	died; Dementia; This is a spontaneous report from a contactable consumer. This consumer reported similar event for two patients. This is the first of two reports. This is a spontaneous report from a contactable consumer. This consumer reported similar event for two patients. This is the second of two reports. A 91-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date as single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient had no known allergies. The patient had no other vaccines in four weeks. The patient was not pregnant ("AS REPORTED"). It was reported that the patient at the board and care developed dementia like side effects on 22Mar2021 that didn't exist prior. It was also reported that the patient died on an unspecified date. The events required emergency room/department or urgent care and reported as life-threatening illness (immediate risk of death from the event). The patient had no COVID prior the vaccination and was not tested for COVID post vaccination. Therapeutic measures were taken as a result of the events which included hospice. The outcome of the event dementia was not recovered. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021383789 Same reporter/drug/event, different patient.; Reported Cause(s) of Death: died
4/13/2021	1203159		69	F	2/11/2021	3/26/2021	Metastatic Lung cancer

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4/13/2021	1205264	CT		U			person didn't get the second shot, got sick and died; person didn't get the second shot, got sick and died; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), first dose via an unspecified route of administration on an unspecified date (batch/lot number and expiration date was not reported) as single dose for COVID-19 immunisation. Medical history and concomitant medications were not reported. The consumer stated that they had a case where a person didn't get the second shot, got sick and died (pending confirmation). The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: person didn't got the second shot got sick and died
4/13/2021	1202969		95	M	4/6/2021	4/11/2021	death Narrative: Patient with consistent decline over the last year; March 2021- increased confusion related to dementia, falls, hospitalizations wt loss. Enrolled in home hospice on 3/26 family's goal was to keep patient home and comfortable. Patient received J&J vaccine in the home through agency on 4/6/2021, Patient had a fall on 4/7/2021, Patient with rib pain after the fall no other injury noted. Patient passed away on home hospice on 4/11/2021.
4/13/2021	1204162	IA	72	F	3/1/2021	3/8/2021	Pt developed respiratory illness requiring hospitalization on 3-8-21. She expired on 3-31-21 while still hospitalized.
4/13/2021	1203198	AZ	58	F	4/6/2021	4/6/2021	Second vaccine received on 4/6/21. Pulmonary Embolism on 4/11/21. Death on 4/13/21.
4/13/2021	1203240	ND	66	M	2/23/2021	2/24/2021	My husband had fever of 102.6 the morning after he received the vaccine. He continued to run high fever. He had gi symptoms with diarrhea. He was up all Saturday night with generalized body aching and diarrhea. On Sunday night he coded in the bathroom at home. CPR was started when EMS arrived he was in full cardiac arrest. He was coded for 1 hour without any return of heart function. I found my husband on the bathroom floor on that Sunday night about 1140pm performed CPR and activated 911.

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4/13/2021		1203337	KS	66	M	4/12/2021	4/13/2021	Brought to the ER as a code blue, 50 minutes down. CBC, CMP, and HIV screen completed. Deceased despite attempts of revival. Wife reports patient reported not feeling well, c/o feeling short of breath, started having foaming at the mouth, loss consciousness. He had pink sputum on arrival.
4/13/2021		1203406	TX	83	M	4/7/2021	4/9/2021	Patient's spouse called on 4-13-21 to cancel second dose appointment due to her husbands death on 4-9-21. Spouse states unsure of cause awaiting autopsy results. He received the vaccine on Wednesday 4-7-21 and his wife said he was fine that night and worked in the yard the following day in the morning and early afternoon. Thursday night/Friday morning she noticed he was thrashing in his sleep and making "weird sounds".
4/13/2021		1203475		83	F	2/17/2021	4/6/2021	Advanced Age, Likely Sudden Acute MI
4/13/2021		1203510	CO	36	M	4/9/2021	4/9/2021	Unknown on any adverse events or symptoms
4/13/2021		1203534		89	F	2/9/2021	4/5/2021	NA Hospice Care
4/13/2021		1203542	SC	77	M	2/19/2021	3/14/2021	Unknown if pt had s/s at time of vaccination on 1/29/2021 and 2/19/2021. From 3/1/2021-3/6/2021, pt hospitalized w/ covid, resp insufficiency, acute on chronic diastolic HF, dyspnea, ele. D-dimer, acute pulm edema and acute on chronic renal insufficiency. Dcd to home. Six hrs later, readmitted w/ worsening multifocal airspace opacities, enlarged cardiac silhouette, sob, cough. No PE on CXR. Recd O2, cefepime, remdesivir, vanco, Lasix, heparin, rivaroxaban, dexamethasone, tocilizumab. On 3/8/2021, pt had onset R weakness, CT w/ distal R MZ occlusion, Intubated for decline. Not TPA candidate. Per neuro, CVA r/t either a fib hx or hypercoagulability r/t covid. Pt died.
4/13/2021		1203603	GA	78	F	4/3/2021	4/3/2021	Diarrhea, fever, stomach pain for 7 days. She died on the seventh day.
4/13/2021		1203631	KS	58	M	3/18/2021	3/18/2021	Flu like symptoms from the time received, patient passed away 03/11/2021
4/13/2021		1204112	LA	76	M	4/6/2021	4/8/2021	Patient suffered a left sided nontraumatic intracerebral hemorrhage

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4/13/2021	1202968		88	M	2/9/2021	2/12/2021	death Narrative: I was told that the patient expired 3 days after his 2nd dose of Moderna vaccine.
4/13/2021	1204133	TX	89	F	3/18/2021	3/20/2021	came in with chest pain ,coded and died. Family believes it was because of COVID vaccine
4/13/2021	1204069		93	F	1/30/2021	2/7/2021	Death Acute kidney injury COVID-19 virus infection COVID-19
4/13/2021	1204016	ID	23	M	4/9/2021	4/13/2021	HE DIED SUDDENLY !!!!! JUST COLLAPSED !!!!
4/13/2021	1203976		90	F	3/4/2021	4/9/2021	Patient death within 60 days of receiving the COVID vaccine series
4/13/2021	1203939		87	M	3/17/2021	3/30/2021	NA Septic shock Aspiration pneumonia Acute encephalopathy Pancytopenia Seizure
4/13/2021	1203799	CA	75	F	4/2/2021	4/3/2021	Patient developed chills and fatigue Saturday and Sunday (April 3rd and April 4th) . Patient developed diarrhea and lack of appetite Monday, April 5th. Patient was reported to be bedridden Wednesday, April 7th. Patients husband stated hat patients eyes were halfway closed, experiencing shallow breathing, and had a soft pulse. Husband call 911 while instructed to do chest compressions until EMTs arrived on site. First responder were reported to perform resuscitation efforts on the patient for 35 minutes until transporting the patient to the hospital.
4/13/2021	1203732	GA	60	M	3/15/2021	3/19/2021	Patient had history of COPD, MS. Treated for pneumonia in February. Recently discharged from the hospital 2/24/2021 for pneumonia. Seen in the office on 3/1/2021 as a follow up. Given Covid vaccine on 3/15/2021. Patient was reportedly feeling well the day of vaccine. Patient collapsed on 3/19/2021 and died.
4/13/2021	1203711	FL	91	F	3/17/2021	4/1/2021	patient did not show up for dose 2 - we called her and family informed us she had entered hospice and passed away since we last saw her for the covid vaccine

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4/13/2021	1203703		94	F	3/15/2021	3/15/2021	Patient's family called us on 03/18/2021 to report vomiting for 3 days starting after her vaccination. They took her to hospital where the family reports she was diagnosed with bowel obstruction. She declined surgery because of her age and underlying comorbid conditions including breast cancer and diabetes. She passed away on 03/22/2021.
4/13/2021	1203902	VA	77	F	3/13/2021	4/7/2021	Blood Clot which led to Pulmonary Embolism, Pneumonia, and death.
4/13/2021	1203679		88	F	3/24/2021	3/31/2021	Pericardial effusion
4/12/2021	1198032	WY	69	M	1/27/2021	1/28/2021	Patient has had L leg blood clot and multiple mental comorbidity-Anemia, hypertension, heart disease, hypokalemia, liver enzyme off per MD, poor nutrition, tremors, hypothyroidism, COPD, small vessel disease of the brain

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4/12/2021	1197555		70	M	2/16/2021	3/24/2021	death Narrative: 70 yo male received COVID19 vaccine on 2/16/2021 (first dose) without complications. Patient was admitted to the facility on 3/12/2021 and transferred out to a hospital on 3/15/2021. Patient died on 3/24/2021 due to acute respiratory failure at a medical center. This report is being written because patient received Pfizer covid19 vaccine, Facility requires we report to VAERS if death occurs within 42 days of vaccination. Prior to his hospital admission, his previous one was 5/11/2020-5/14/2020. Please see below for hospital course at the Facility: 70 yo male with PMHx of COPD, CHF rEF 20%, CAD s/p MI and CABG in 1999, HLD, HTN, DM2, GERD, Anxiety and Depression who presented with increased shortness of breath to facility. Transferred on 3/13 to the facility. Noted increased SOB without CP, palpitations, cough, orthopnea or PND. No history of home O2 use but required 2-3L O2 during this hospital stay. Was noted on admit to Facility to have troponin elevation with unchanged EKG. Was started on NSTEMI protocol with heparin ggt, ASA, BB, and statin. Initially received one dose ceftriaxone/azithro for possible PNA. On admission, primary team held home BB. On arrival to Facility, troponin at 3.998 trended to 4.442 and then trended down. underwent CTA to evaluate for PE that was negative. CXR and CT showed pulmonary edema consistent with HF exacerbation and a proBNP 8613. Patient was given 40mg IV lasix x2. RRT was called twice, once for BP 80/50 treated with 500ml IVF, and second for CP that resolved with NTG and tramadol. Cardiology was consulted with goal to cath patient, however some concern for medication adherence going forward so they will reevaluate. Patient began to have tachycardia with rates in the 150s sustained and hypotension. EKG showed likely sinus tachycardia with wide QRS similar to prior EKGs. Patient has ICD in place that was interrogated and showed good function. IV metoprolol 5mg given x3 with rated decrease to upper 120s. Patient remained asymptomatic, awake, and alert. Per discussion with wife after transfer, patient BP has been in the 50s systolic at home for the last month. Cardiac cath was performed showing 99% stenosis of LCX. Did not tolerate procedure with nausea, vomiting, and altered mental status. RRT was called after cath procedure. He is nauseous, diaphoretic. He complained of chest pressure. STAT EKG obtained. Noted ST

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depressions in the septal leads significant from before. Cardiology concerned pt was having an inferior MI. STEMI call was activated and hospital cath lab was called and report given to the cardiologist on call. Pt was then transported to the Facility and he passed away on 3/24/2021.

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4/12/2021	1197611	WA		F	2/5/2021	3/1/2021	Massive heart attack; Death; vomiting; Stroke; This spontaneous case was reported by a consumer and describes the occurrence of MYOCARDIAL INFARCTION (Massive heart attack), CEREBROVASCULAR ACCIDENT (Stroke) and DEATH (Death) in a 73-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 011m20a and 013a21a) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. The patient's past medical history included No adverse event. Concomitant products included LOSARTAN POTASSIUM (COZAAR) for an unknown indication. On 05-Feb-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 05-Mar-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. On 11-Mar-2021, the patient experienced DEATH (Death) (seriousness criterion death) and VOMITING (vomiting). In March 2021, the patient experienced MYOCARDIAL INFARCTION (Massive heart attack) (seriousness criteria hospitalization and life threatening) and CEREBROVASCULAR ACCIDENT (Stroke) (seriousness criterion medically significant). On 11-Mar-2021, MYOCARDIAL INFARCTION (Massive heart attack), CEREBROVASCULAR ACCIDENT (Stroke) and VOMITING (vomiting) had resolved. The patient died on 11-Mar-2021. The cause of death was not reported. It is unknown if an autopsy was performed. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): On 05-Mar-2021, Echocardiogram: unknown (Inconclusive) unknown. For mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular), the reporter did not provide any causality assessments. No concomitant medication information also included inhalers, non specified and eye drops non specified. No treatment information was reported. Based on the current available information and temporal association between the use of the product and the start dates of the events, a causal relationship cannot be excluded.; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start dates of the events, a causal relationship cannot be excluded.; Reported Cause(s) of Death: unknown cause of death

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4/12/2021	1197691	KS	88	M	3/10/2021	3/27/2021	The weeks following vaccination, the patient felt lethargic, dizzy, unstable on his feet. Mental cognitive ability was unchanged, and he seemed to still be sharp. Up until the day of death, the patient was still active, able to drive, speak, make jokes, eat, and do everything normally. The morning of death, he had a bad fall, but couldn't recall what happened. It's assumed that a low blood pressure event, syncope, partial aneurysm, something of that nature causing temporary loss of consciousness occurred. We attended a funeral that afternoon, ate lunch, and dropped him off at his home. Sometime during that evening, he fell and died. The cause is unknown and still "undetermined" on the death certificate. (Heart attack or brain aneurysm is what I'm guessing)
4/12/2021	1197766	IL	71	F	3/28/2021	4/2/2021	Patient was vaccinated at Pharmacy with 2nd dose Moderna 03/28/2021, patient called dialysis clinic that she was coughing up blood and she is going to Hospital in the afternoon. Pt's daughter called the clinic informed staff that pt passed away 4/3/2021 due to internal bleeding.
4/12/2021	1197795	MI	81	M	3/24/2021	4/6/2021	Patient expired at some point after infection; not in the immediate time period of injection
4/12/2021	1197923	CA	71	M	3/19/2021	3/19/2021	He was found down in cardiac arrest- EMS called CPR done and taken to Emergency room, unsuccessful CPR, patient died
4/12/2021	1198102	WA	89	F	2/26/2021	3/8/2021	Nausea ,shortness of breath during the day . Heart stopped 7:45 pm. Death declared at 12:45 am March 09 2021.
4/12/2021	1198028	MI	75	M	4/12/2021	4/12/2021	None stated.
4/12/2021	1197251	IN	77	F	3/3/2021	3/7/2021	She had trouble breathing within days of the second vaccine. She went to the hospital 9 days after the vaccine. Her breathing continued to decline where she had to be placed on a ventilator. She stayed on that for almost 3 weeks. The doctors had no hope of her recovery and we chose to end life support exactly one month after her second shot.

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4/12/2021		1198107			F	2/10/1968	4/12/2021	53 y.o. female with a PMHx of asthma, CHF, CKD (not on HD), DM, HTN, hypothyroidism, methadone dependence for back pain, chronic bilateral foot ulcers presents with c/o one day of fever and admitted for sepsis of unknown origin on 3/9. Patient tested negative for SARSCOV2 on admission on 3/9. She was deemed a candidate for the vaccine and it was administered on 3/10 (Janssen Lot 1805031). On 3/19, she tested positive for SARSCOV2. She developed worsening respiratory failure and required oxygen supplementation with gradual escalation until she was intubated on 3/29. She received 5 days of remdesivir and steroid therapy. She developed DIC for which she received supportive care (vitamin K, transfusions, etc) and an HLH-type picture for which the steroids treatment was prolonged. She was not a candidate for tocilizumab given the elevated LFTs > 5x the upper limit of normal. During the ICU course patient was started on hemodialysis. Patient gradually started improving around 4/5 with planning for spontaneous breathing trials in attempts to extubate after weaning of sedatives. On 4/8, during a dialysis session patient became hypotensive and bradycardic. After this episode, patient's mental status worsened and developed worsening metabolic acidosis and worsening shock refractory to vasopressors. Family decided for DNR and transition to comfort care. Patient expired on 4/12.
4/12/2021		1196401	NY	66	F	3/19/2021	3/19/2021	My mother became very ill-- labored breathing, chills, slight fever, body aches, throwing up and diarrhea throughout the weekend. By Sunday (48 hours later), she was having black outs and ended up passing away on Monday, March 22, less than 72 hours later. She was fine without symptoms prior to the shot.

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4/12/2021	1197984	WY	89	F	2/18/2021	2/19/2021	This was the 2nd Moderna Shot on 2-18-2021. She received the first shot on 1-22-2021. Patient verbally reported to me that about 4 hours after the shot, she began experiencing severe shocks all over her face and into her left neck and chest area. This quickly worsened to include her left arm. That all resolved after a nap. But when she woke up, and went to the mirror, she noted that her left face was slow and drooping. She went to the ER. It was noted that she was having a severe problem with swallowing. She also was noting severe pain in left external ear canal. She had obvious severe breakout in the left ear canal - and the immediate area. She was sent home - and came to my office the next day. By that time, the symptoms had become much much worse. She was unable to swallow. The outbreak in the left ear was much more pronounced. And her entire left face and left tongue were paralyzed. She was diagnosed with the Ramsay-Hunt Syndrome - she was unable to talk or swallow. She was readmitted back into the hospital.
4/12/2021	1197095		90	M	2/23/2021	4/8/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
4/12/2021	1197086	WA	76	F	4/7/2021	4/8/2021	The individual complained of severe stomach pain - called 9-1-1 was unable to be revived.
4/12/2021	1196968	IL	58	F	3/31/2021	4/4/2021	Patient found unresponsive at home 04/04/21 at 11pm per child. Sent to hospital via 911. Deceased 4/6/2021.
4/12/2021	1196941	PA	89	M	3/31/2021	4/1/2021	My father awoke the day after vaccine with a fever of 100 and his blood oxygen level at 82, he was shaking, weak. We called 911 and he was taken to hospital, he was given oxygen in er and then transferred to a room. On Friday he suffered a heart attack and was put on life support . On Tuesday, April 6th we discontinuing all life saving measures and my father died.
4/12/2021	1196846		71	F	3/16/2021	4/2/2021	Patient within 60 days of receiving a COVID vaccine death
4/12/2021	1196478	PR	75	M	3/2/2021	3/16/2021	MASSIVE HEART INFARCTION
4/12/2021	1198157		33	F	2/27/2021	4/7/2021	Hospice patient death within 60 days of receiving the COVID vaccine series

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4/12/2021	1196346	PR	87	M	3/18/2021	4/12/2021	Unknown
4/12/2021	1196099	PR	64	F	4/7/2021	4/7/2021	DEATH OF PATIENT REPORTED ON 04/07/2021 AT 11:25PM
4/12/2021	1195850	MN	84	M	3/1/2021	3/7/2021	Death by clot
4/12/2021	1195645	NY	80	M	4/8/2021	4/9/2021	COMPLETE WEAKNESS, FULL BODY ACHES, CHILLS. PATIENT UNABLE TO GET OUT OF BED.
4/12/2021	1199594	GA	47	F	4/7/2021	4/8/2021	There were no noted adverse signs or symptoms at the time of vaccination. Fiance of patient called Public Health on 4/12/21 to report the patient died in her sleep overnight on 4/7 or 4/8. Autopsy not performed, body embalmed prior to Public Health's knowledge of client death. Pfizer BioNTech COVID-19 Vaccine EUA
4/12/2021	1196666	ID	47	M	3/14/2021	3/15/2021	Pt. Expired
4/12/2021	1198967	CA	38	F	3/31/2021	4/7/2021	Cardiac arrest, death
4/12/2021	1199575	CA	48	M	4/7/2021	4/9/2021	Death
4/12/2021	1199455	WI	17	F	4/2/2021	4/10/2021	Patient reported difficulty breathing and chest pain; suffered cardiac arrest and death
4/12/2021	1199446	OR	60	F	3/6/2021	3/18/2021	admitted to the hospital with recurrent hypoxemic and hypercarbic respiratory failure. discharged home. passed away at home after discharge.
4/12/2021	1199422	OH	98	F	1/28/2021	2/25/2021	Patient passed away from blood clot, did not feel well after 2nd shot
4/12/2021	1199415	OR	84	F	2/20/2021	4/1/2021	she was found unresponsive by family and taken to the ER on 4/1 where she was found to have a massive subdural hematoma. she was placed on comfort measures and passed away at the hospital. she had had a fall out of bed in the week before her ER admission.
4/12/2021	1199402	OR	85	F	2/6/2021	2/25/2021	She was found deceased after likely sudden cardiac death

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4/12/2021	1199382	OR	92	M	1/23/2021	1/30/2021	1/30/2021- he was found to be confused by family and taken to the ER where he was found to have bilateral pneumonia, symptoms of decompensated heart failure. he did not improve with interventions and ultimately was placed on comfort care and passed away in the hospital 2/2/2021
4/12/2021	1199349	CA	95	M	3/3/2021	3/4/2021	102 fever, chills, loss of appetite,extreme body weakness, loss of taste, vomiting
4/12/2021	1199543	PA	91	F	3/12/2021	3/17/2021	Facility manager informed us that patient had a seizure on 3/17/21, which was 2 days after the vaccine was given (3/15/21) which then lead to a stroke. Patient passed died on 3/17/21.
4/12/2021	1199143	CA	59	F	3/27/2021	4/3/2021	Headache and vomiting starting one week later (4/3/2021); seizure due to hemorrhagic stroke 04/5/2021; continued bleeds 04/06/2021, 04/07/2021; life support removed 04/08/2021.
4/12/2021	1198162	MO	45	F	3/13/2021	3/20/2021	My sister received the Janssen vaccine on March 13, 2021. One week later, March 20, 2021, she started complaining of severe headaches, dizziness and vomiting. This continued so she visited the ER on Wednesday, March 24, 2021, where she suffered a cerebral venous sinus thrombosis. She was pronounced brain dead on March 27, 2021, which is also the same day she was pronounced dead.
4/12/2021	1198939	NY	71	F	4/6/2021	4/6/2021	Per Medical Examiner, fourteen hours after receiving vaccine presenting symptoms were fatigue and muscle aches, went to Hospital Emergency Room and was released. Six hours later family stated symptoms had worsened, fever, shortness of breath and fatigue, admitted to Medical Center, diagnosed with sepsis and died within 48 hours of vaccination, deceased 4/7/2021, cause of death neutropenic sepsis with multi-lobar pneumonia, autopsy scheduled 4/13/2021.

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4/12/2021	1198227	AL	76	M	4/5/2021	4/7/2021	SON REPORTED THAT PATIENT WOKE UP 4/7/21 WITH FLU LIKE SYMPTOMS AND STAYED IN BED ALL DAY. PT DID NOT DRINK ANYTHING OR TAKE INSULIN ON 4/7/21. WHEN DAUGHTER ARRIVED AT PTS HOME THAT EVENING, PT WAS INCOHERENT. SHE CALLED 911 AND PT WAS TRANSPORTED TO THE HOSPITAL WHERE HE PASSED AWAY ON 4/9/21.
4/12/2021	1198196	WI	89	F	3/9/2021	3/10/2021	On 3/10/2021 around 2 pm reported more fatigue, low-grade fever, and weak; treated w/ Tylenol; 3/13/2021 refused medications; 3/16/2021 became constipated; 3/20/2021 gait unsteady and reported feeling as though she'd fall; more fatigued; 3/20/2021 refused medications and slept excessively; 3/20/21 vomited in bed; 3/22/2021 restless and exit seeking; 3/25/2021 packed belongings and exhibited exit seeking; 3/26/2021 transported to hospital 5:15 am due to falling while attempting to pick up something off of the floor; 3/29/2021 hospital reported she had a brain bleed and had chosen hospice care at her daughter's home; resident passed away on 3/30/2021.
4/12/2021	1199323	AZ	83	M	4/9/2021	4/10/2021	Patient's Wife reported that patient did not experience any side effects from the vaccine. She reported they did their daily chores after receiving the vaccine and patient did not complain about having any health issues on that day even before going to bed. She reported that patient did not wake up from his sleep the next morning.

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4/12/2021	1198211	WI	34	M	2/10/2021	2/10/2021	The patient received his 2nd dose of Moderna (LOT#, site, time unavailable) at an outside clinic the morning of 2/10/21 and presented to the ED with coughing and hypoxia (spO2 occasionally dropping into 70's) at 8 PM that day. He had quadriplegic spinal paralysis as a result of a remote MVA and has been hospitalized and critically ill in the past due to recurrent UTI's and pneumonia with associated sepsis. CT negative for pulmonary embolism and showed bilateral infiltrates. Clinical presentation consistent with bilateral pneumonia and started on Rocephin/azithromycin. He was initially stable in the hospital on 1-2 LPM O2. The following evening he became febrile and acutely developed asystole without any pre-existing arrhythmia. Resuscitation was attempted for 45 minutes but unsuccessful. Overall, I suspect his death was related to bacterial pneumonia and resulting acute respiratory failure, complicated by his quadriplegia and autonomic dysreflexia but reported this event as it did occur within 2 days of receiving his 2nd Moderna vaccination.
4/12/2021	1198798	NC	62	F	4/9/2021	4/10/2021	Began feeling unwell, had urinary urgency, and was itching shortly after 2nd dose of Pfizer COVID-19, then found obtunded due to pulmonary embolus resulting in death within 24 hours of receiving 2nd dose
4/12/2021	1198387	OK	61	F	4/9/2021	4/10/2021	Found dead in her home on Saturday morning
4/12/2021	1198400	CA	94	M	2/13/2021	3/4/2021	Sudden Death
4/12/2021	1198405	CA	65	F	3/15/2021	4/1/2021	Pt with Advanced PD underwent surgery on 3/1/21 and 3/8/21 to explant a misplaced DBS device and re-implant with a new DBS device. She struggled to recover following the surgeries and did not respond to her medications or the new device. She received her COVID vaccine on 3/15/21. No significant change following the vaccine but no improvement as expected as device settings and medications were titrated. We received a call from her husband that she died during the night of 4/1/21. She had seen her PCP on 3/31/21 without any concerns on vitals etc.

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4/12/2021	1198540	CA	21	M	4/1/2021	4/11/2021	Unknown if the vaccine has any correlation to event. Patient was found unresponsive and not breathing on 4/11/21 @ approximately 3:45 PM outside on the grounds of the campus. A rented scoter was next to him. There was no sign of trauma. 9-1-1 was called and CPR initiated by passerby (there were no witnesses). He remained unresponsive and was intubated when the paramedics arrived. He was transported to hospital where he was pronounced dead.
4/12/2021	1198617	NH	88	F	2/23/2021	2/23/2021	Adverse Event: Death Treatment: Rest & Cold Pack On Arm At Injection Site (Not Effective) Symptoms: Arm Pain At Injection Site, Diarrhea, Fatigue, Dizziness, Low Appetite, Light Headedness, Fever & Chills
4/12/2021	1198737	NY	74	M	3/28/2021	4/1/2021	Patient passed away on 4/1/21. 4 days after getting his second moderna vaccine. He was is good health
4/12/2021	1198782	TX	84	F	4/1/2021	4/2/2021	As described to me by her son: 04-01-2021 received vaccine , no issues, waited the 15 min and said she felt fine. Left with no issues. had been to see her MD that morning for routine visit and everything was fine. 04-02-2021: No issues - felt fine. Went shopping and out to eat. Was a bit tired that evening. Son left her home at 6pm and all was good. 04-03-2021: son text her in the morning and no answer. Thought she might be in the shower and text again and no answer. He called her and no answer, so he went over and found her non-responsive laying on her back on her bed with the same clothes she left her with the prior evening. sheriff's office pronounced her dead on 04-03-2021 with what appeared to have been a heart attack.

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4/12/2021	1198199	KY	62	M	4/1/2021	4/6/2021	62-year-old male with number of medical problems that include history of hepatitis-C, history of cirrhosis, history of alcohol abuse, cocaine abuse, history of diabetes hypertension who has initially presented to EMS with increasing shortness of breath. Patient suffered cardiac arrest during his transportation to the emergency room. A CPR was initiated and was given 3 rounds of epinephrine. Most of the history is taken from the ER physician chart review. ACUTE RESPIRATORY FAILURE SECONDARY TO HYPOXEMIA, COVID-19 , cardiac arrest, possible anoxic brain damage : Patient is 62-year-old male with complicated history with history of hepatitis-C, cirrhosis, alcohol use, cocaine abuse diabetes who presented after having cardiac arrest and possible anoxic brain damage. Patient was intubated after the arrest. Patient stayed in the hospital for number of days. Patient was found to have COVID-19 positive. Patient was found to have diffuse bilateral infiltrate. Patient was started on broad-spectrum antibiotics including cefepime Flagyl and Decadron. Due to patient's cardiac arrest patient was started on hypothermia protocol. Patient was rewarming after that. There was no purposeful movement or neurological recovery. After long discussion with the family, patient has been made comfort care. Patient was extubated. Patient expired promptly after that. Family is notified.

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4/11/2021		1194127			U			Died; Based on the current case data, this case has been classified as invalid. This spontaneous case was reported by a consumer and describes the occurrence of DEATH (Died) in a patient of an unknown age and gender who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The patient's past medical history included No adverse event (No reported medical history). On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. Death occurred on an unknown date The cause of death was not reported. It is unknown if an autopsy was performed. Concomitant product use was not provided by the reporter. No treatment information was provided. Very limited information regarding the event of death has been provided at this time. Further information has been requested.; Sender's Comments: Very limited information regarding the event of death has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
4/11/2021		1195054	PA	72	F	3/6/2021	3/15/2021	Received 1st Pfizer vaccine on 3/06/2021 since receiving shot she slept up to 12 hours a day. passed away 9 days after receiving vaccination. She had no pre existing conditions.
4/11/2021		1192930	TX	83	F	2/25/2021	3/1/2021	Patient developed generalized weakness with peripheral neuropathy four days after getting second injection. Patient had a right MCA distribution infarct on 3/24/21. Last injection was on 2/25/21. Patient died on 4/7/21 from consequences of infarct.
4/11/2021		1192660	MS	72	M	3/5/2021	3/7/2021	My father received the vaccine on Friday 3/5/21. He noted that he wasn't feeling well following the vaccine. On 3/7/21, he passed away from a heart attack.
4/11/2021		1192987	FL	69	M	2/15/2021	2/19/2021	Death
4/11/2021		1194290	CA	72	F	3/12/2021	3/17/2021	my mother collapsed in the kitchen she was rushed to hospital via ambulance she passed away, doctor said her heart was having a hard time he said there was a blood clot by lung

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4/11/2021		1194600	VA	70	F	4/8/2021	4/8/2021	Death She was found Saturday Apr 10th deceased at her home.
4/11/2021		1194540	CA	64	M	2/4/2021	2/8/2021	on 2/8 developed cough on 2/13 to Hospital Emergency Room, diagnosed viral pneumonia on 2/15 back to ER, admitted, diagnosed with pulmonary embolism on 2/20 to ICU, intubated and put on ventilator on 3/3 died from pneumonia due to COVID-19 per death certificate
4/11/2021		1194264	MD	51	M	4/8/2021	4/9/2021	Patient found deceased. Unwitnessed death.
4/11/2021		1193089	OH	43	F	4/8/2021	4/10/2021	UNSURE IF RELATED TO VACCINE OR NOT, PATIENT EXPIRED 48HOURS FOLLOWING COVID VACCINE ADMINISTRATION
4/10/2021		1189199	CA	81	M	3/30/2021	4/6/2021	Stomach cramps, vomiting (coffee ground emesis), diarrhea that started on 04/06/2021 and lasted for 2 days.
4/10/2021		1188497	AZ	74	F	2/6/2021	2/8/2021	After two days: severe nose bleed. After eight days: vomited blood; followed by endoscopy to fix stomach bleed. After 17 days days, lung hemorrhage.
4/10/2021		1189015	ME	44	M	4/9/2021	4/9/2021	Patient was given the vaccine without incident at or near 0924a. He previously was diagnosed, through PCR test to have COVID-19 back in December 2019. Outside of supportive therapy at home, he was not treated and was not hospitalized and he recovered within a few weeks. At or near 930-10p, on April 9th, approximately 12 hours after the vaccine was given, while out at a restaurant with family, the patient experienced a medical event, (what appears to be an acute coronary event) and died.
4/10/2021		1189843	PA	88	F	3/13/2021	3/15/2021	Fell three times in home on May 15th. Was taken to Emergency Room by Ambulance. In hospital for two days and then released. Ordered Home Physical Therapy and Walker. Cleaned the wounds from the fall. Difficulty breathing and swallowing. Released and told to schedule echocardiogram with Primary Care to follow up on heart's pumping function. Still had difficulty breathing when home and walking. Started diarrhea on Monday 22 had appointment on the 24th with doctor, but died at home before she could make appointment.

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4/10/2021	1190541	MA	76	F	2/5/2021	2/7/2021	RECEIVED VACCINE ON 2/5/21 AND WAS FOUND DEAD MORNING OF 2/7/21. SHE HAD NO SIDE EFFECTS OTHER THAN SLIGHTLY SORE ARM UP TO THAT POINT. ED MD FELT SHE HAD SIGNIFICANT CARDIAC HISTORY AND LIKELY HAD MI. MEDICAL EXAMINER DID NOT ORDER AN AUTOPSY AND SHE WAS CREMATED. I FELT THAT I SHOULD JUST REPORT IT SINCE IT WAS SO CLOSE TO RECIVING THE VACCINE.
4/10/2021	1191410	KS	84	F	2/19/2021	2/21/2021	3 days after the covid-19 vaccine, she had a seizure and was taken to the hospital. She was diagnosed with sepsis and died 02/22/2021.
4/10/2021	1191920	AL	79	M	3/28/2021	3/28/2021	Sudden Death; The first and second dose of vaccine was administered on 28Mar2021 12:00 PM.; The first and second dose of vaccine was administered on 28Mar2021 12:00 PM.; This is a spontaneous report from a contactable consumer. A 79-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; lot: EN6199) and second dose (lot: ER8730); both via an unspecified route of administration into the right arm on 28Mar2021 12:00 for COVID-19 immunization. Medical history included coronary artery disease (CAD), hypertension, parkinson's disease, abdominal aortic aneurysm, cerebral aneurysm and arthritis. Concomitant medications included paracetamol (TYLENOL) taken for arthritis and a pill for his hypertension. It was reported that the first and second dose of vaccine was administered on 28Mar2021 12:00 PM. The patient's sudden death on 30Mar2021 15:30 was also reported. An autopsy was not performed. The patient was not diagnosed with COVID-19 prior to vaccination. Further information has been requested.; Reported Cause(s) of Death: Sudden Death

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4/10/2021		1191979	CA	69	F	3/6/2021	3/6/2021	Started with intense headaches right after the 2nd dose of the Moderna vaccine on 03/06/2021. Had the headache for over two weeks, and eventually went to the hospital with loss of speech and movement on her left side of her body. They at first said it was strokes, then after the CT scan results came back they found multiple abscess in her brain. She does not have a history of strokes or brain abscess. Speech and motor functions never returned, and one abscess was so large that it caused a brain shift (the two hemispheres separated) they performed brain surgery and it was not successful. She passed away on 3/31/2021 at 431 am.
4/10/2021		1192117			U			Brain bleed; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender (physician) received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date (at an unspecified age) at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The consumer reported that a perfectly healthy physician who died after receiving the vaccine actually dying from a brain bleed. The outcome of the event was fatal. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Brain bleed

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4/10/2021	1192044			F			died; This is a spontaneous report from a contactable consumer. A 30-year-old female patient received her first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number and expiry date were not reported), via an unspecified route of administration on an unspecified date as a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. It was reported that the patient who was completely healthy died on an unspecified date. Reporter stated that she had "great concerns about the Pfizer COVID 19 vaccine and actually all three of the vaccines on the market. She had been so distraught over the last couple of weeks since she found out that they are wanting to start experimentations on babies and that the babies can not handle this. She wanted to ask someone how does this fit in with the Nuremberg code since the babies have no awareness of what is going on since they are 6 months or less? She stated experiments should be based on animal experimentation but by the way all the companies skip animal testing. 15 years ago all the animals tested for the coronavirus vaccine died. The 30 year old mother that died bothered her completely and she never even met that person. The reporter stated people should have survived and that people do not need vaccine junk science and that it is making them into some operating system. She stated the vaccine is not helping and this was created just to create more fear." It was not reported if an autopsy was performed. Information about lot/batch number has been requested. ; Reported Cause(s) of Death: Died

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4/10/2021	1192062	WA		U			death; This is a spontaneous report received from a contactable consumer. This consumer reported similar events for two patients. This the second of two reports. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number not provided) via an unspecified route of administration, on unspecified date at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient experienced death on an unspecified date. It was unknown if autopsy was performed. Information on lot/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021371687 same reporter/event, different patient; Reported Cause(s) of Death: death
4/10/2021	1192078	WA		M			Passed away; This is a spontaneous report from a contactable consumer received via a Pfizer-sponsored program, Pfizer RXPathways. A male patient of an unspecified age received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on an unspecified date as single dose for COVID-19 immunisation. Medical history included stage 4 cancer. The patient's concomitant medications were not reported. The patient passed away on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Passed away

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4/10/2021	1192099	TN	59	M	3/17/2021	3/18/2021	Reported cause(s) of patient death: Heart failure; chills; fever; This is a spontaneous report from a contactable consumer (patient's spouse). A 59-year-old male patient received his first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EN6205) at the age of 59-years-old, via an unspecified route of administration in left arm on 17Mar2021 at 11:00 at single dose for COVID-19 immunization. Medical history included congestive heart failure, diabetes, and high blood pressure. He has no allergies to medications, food, or other products. Prior to vaccination, the patient was not diagnosed with COVID-19. Concomitant medications included olmesartan medoxomil, furosemide, repaglinide, metformin, amlodipine, atorvastatin, carvedilol, hydrochlorothiazide, and metoprolol. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The facility where the most recent COVID-19 vaccine was administered was reported as other. The patient experienced chills, fever, and heart failure on 18Mar2021. The events resulted in emergency room/department or urgent care, doctor or other healthcare professional office/clinic visit, and hospitalization for 8 days from Mar2021 to Mar2021. He eventually passed away on 31Mar2021. Treatment received for the events was reported as unknown. The patient underwent lab test and procedure which included nasal swab for COVID which was negative on 20Mar2021. The outcome of the events chills and fever were unknown. The patient died on 31Mar2021. The cause of death was heart failure. An autopsy was not performed. No follow-up attempts are possible. No further information is expected.; Reported Cause(s) of Death: Heart failure

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4/10/2021	1192116			M	3/20/2021	3/28/2021	Had his first vaccination of the Pfizer and 8 days later he passed away; This is a spontaneous report from a contactable consumer. A male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 20Mar2021 at single dose for COVID-19 immunisation. Medical history and concomitant medications were unknown. It was reported that the patient had his first vaccination on 20Mar2021 and 8 days later (on 28Mar2021) the patient passed away. It was unknown if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: Had his first vaccination of the Pfizer and 8 days later he passed away
4/10/2021	1188519	SC	67	M	3/29/2021	3/29/2021	On 3/29/21 at 11:00pm my dad began having chills and uncontrollable shaking. My mother contacted Pfizer who instructed us to alternate Tylenol and Motrin. Tylenol given and Motrin given 4 hours later as instructed by Pfizer. On 3/30/21 around 11:10am my dad was found unresponsive, not breathing and did not have a pulse. My mother immediately called 911 and my aunt began CPR. When EMS arrived he was found to be in cardiac arrest and after 25 min of efforts by EMS my father passed away less than 24 hours after receiving his 2nd covid vaccine.
4/10/2021	1192036	CA	73	F	3/4/2021	3/11/2021	Death; This is a spontaneous report from a contactable consumer received from the Pfizer-sponsored program, COVAX US Support. A 73-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), dose 2 intramuscular on 04Mar2021 11:30 (At the age of 73 years) (Batch/Lot number was not reported) as a single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient previously received dose 1 of BNT162B2 via intramuscular on an unspecified date for COVID-19 immunization and experienced pain in her arm, bloating and pain. The patient died on 11Mar2021. AE required visit to emergency room, physician office and intensive care unit. The patient was admitted to the ICU for 1 day. It was reported that the patient received treatment for the event. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Death

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4/10/2021	1192426	AZ	77	F	3/22/2021	3/22/2021	Owner emailed the following message on 03/23/2021, "Patient was feeling not good after the vaccinations and we call 911. She refused to go to hospital . Today she did do good and we call 911 and they took her because her oxygen dropped down . As of now she passed away~~
4/9/2021	1186275	OR	70	M	4/1/2021	4/2/2021	Died of Heart Attack unexpectedly day following vaccine
4/9/2021	1186348	VA	38	F	3/17/2021	3/24/2021	Copied from MD discharge note - Patient is a 38 y.o. female with PMH significant for asthma and lupus not on any treatment admitted on 3/27/2021 with progressive shortness of breath and cough for months, found to have hypoxia, bilateral multifocal infiltrate without pulmonary embolism on CTA, leukocytosis, elevated troponin, elevated BNP, normal EF on echocardiogram. COVID-19 tests were negative 4 times in the last 1 week. Blood cultures were negative. Urine and strep antigens are negative. HIV-1 also negative. Rheum consulted for hx of lupus. They did not feel this was lupus pneumonitis. Negative anti-dsDNA/SSA/SSB and RF. Pts resp status continued to decline. She was intubated on 4/3 and transferred to the ICU. Bronch washings were also neg for COVID. Despite neg cultures pt was given multiple rounds of abx including vanc, merrem, azithromycin, cefepime, without benefit. IV steroids added for possible reactive pneumonitis. Pt with shock, likely multifactorial including septic and cardiogenic. Multiple pressors maximized and BP remained low. Nephro following for worsening renal function. CRRT initiated to attempt to correct electrolyte and acidosis. Pt did not tolerate CRRT after several adjustments by nephro, pts electrolytes continued to drift from normal. Hgb dropped and CRRT held. Pt went into cardiac arrest at 1329 on 4/8/21. After several rounds of epinephrine and optimized ACLS, no pulse was recovered and ROSC was not achieved. Family notified of death at 1344 on 4/8/21
4/9/2021	1186039	CA	84	M	2/26/2021	2/27/2021	On 2/27/2021 at 12:46 pm, the patient developed chest pain. Not helped by nitroglycerin x 2. He was transported to the hospital where he died.

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4/9/2021	1186943	MO	55	M	4/2/2021	4/2/2021	55-year-old male with no diagnosed past medical history presents emergency department after cardiac arrest. Per patient's daughter, patient was feeling at baseline today. He got his COVID vaccine at 5 PM this evening. He was running some errands and called his daughter at 8:40 PM. He told his daughter he was not feeling well. She reports he sounded out of breath and sounded as if he was slurring his words. Daughter told him to pull over and she called 911. She met him on the side of the road and he was gasping for air. She arrived at the same time as EMS. Upon arrival of EMS patient was in ventricular fibrillation. He was defibrillated 3 times. He also had one episode of ventricular tachycardia. He was given 300 mg of amiodarone and 3 rounds of epinephrine with had return of spontaneous circulation. King airway was placed and patient was brought to the emergency department.
4/9/2021	1184784	MN	79	M	2/5/2021	2/5/2021	Approximately 3 hours after vaccine administration, patient experienced the following: Nausea, Vomiting, Abdominal pain, and the following day: Bloody Bowel Movements. Patient went to the emergency department the day after vaccine administration. Patient was made NPO, started on IVF and Zosyn. Patient was seen by GI who agreed with supportive management of ischemic colitis. Around 1730 on 2/6, patient unresponsive and rapid response was called. Patient responded to Narcan. On 2/8/2021, 0358, patient was seen as not breathing and code blue was called. Interventions were unsuccessful and patient was pronounced dead at 0439am.
4/9/2021	1186982	CA	82	F	2/18/2021	2/20/2021	Three days after receiving dose 1 of the Moderna COVID 19 vaccine, I was contacted by the deceased daughter who indicated she could not get her mother out of bed. She was subsequently placed in Hospice Care due to global decline, never experienced any significant improvement, and expired 30 days later. Vaccine related adverse effect global debilitation after receiving vaccine.
4/9/2021	1186471	PA	45	M	4/7/2021	4/9/2021	Complaints of diarrhea, sweating, weakness suffered sudden cardiac arrest. CPR, AED, Lucas device applied ACLS protocol initiated by EMS. Efforts terminated. Patient pronounced deceased at 1003am.

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4/9/2021		1185996	PA	68	M	3/27/2021	3/29/2021	My father complained of chest pains and then died two days after receiving the vaccine.
4/9/2021		1185285	FL	65	F	3/11/2021	3/1/2021	Pt received vaccine on march 11, 2021 went into E.R at Hospital and admitted 3/16/2021 Positive COVID-19 Pneumonia
4/9/2021		1185219	CT	69	F	3/30/2021	4/8/2021	Patient was vaccinated on 3/30/2021. Found DOA on 4/8/2021. Last time anyone spoke with the patient was on 4/3/2021.
4/9/2021		1185061	NE	73	F	4/7/2021	4/8/2021	On 04/08/2021 pt. was found passed away in her bath tub. Pt. received her 2nd dose of the Covid vaccine on 04/07/2021 at 2:00 p.m. Family choice not to have an autopsy performed and death certificate was completed with cause of death "sudden cardiac arrest". Note on 2/20/21 Pt. was transferred to Hospital with dx. of acute pancreatitis with elevated lipase and wbc.

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4/9/2021		1183985	NY		M	9/18/2020	9/19/2020	Fluid in his bottom right lobe of his lung where the cancer is; Inflammation in the bottom of his lung; in lower right lobe of lung; Blood pressure isn't stable; going up and down; Blood pressure issues; Exhausted; fatigue; Trying to control his blood pressure and his pulse issues, pulse incomplete; Muscle weakness was severely progressing; Bad reaction to the Covid vaccine; Blood clot on his lung; Raspy voice; the patient had been sick; Moderate headaches; Passed away; This is a spontaneous report from a contactable consumer (patient) based on the information received by Pfizer from Pharmaceuticals (Manufacturer control number 2020CAT00505). A 74-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unspecified date at single dose for COVID-19 immunisation. Co-suspect drug included amifampridine phosphate (FIRDAPSE) orally, from 18Sep2020 to an unspecified date at 10 mg thrice daily, from 02Oct2020 to an unspecified date at 20 mg thrice daily, for Lambert-Eaton myasthenic syndrome. Medical history included Lambert-Eaton myasthenic syndrome (he could not walk without FIRDAPSE), migraine ever since he was a kid, small cell lung cancer (in liver and lymph nodes; brain metastases), metastases to liver, metastases to lymph nodes, radiotherapy of his head and lung for his cancer, gait disturbance from an unknown date and unknown if ongoing, muscular weakness from an unknown date and unknown if ongoing. Concomitant medications included pantoprazole, acetylsalicylic acid (ASPIRIN (E.C.)), furosemide. The patient experienced blood clot on his lung in Jan2021 with outcome of unknown, fluid in his bottom right lobe of his lung where the cancer was on an unspecified date with outcome of not recovered, inflammation in the bottom of his lung; in lower right lobe of lung on an unspecified date with outcome of not recovered, raspy voice in 2021 with outcome of recovered, blood pressure not stable; going up and down; blood pressure issues on an unspecified date with outcome of not recovered, exhausted; fatigue on an unspecified date with outcome of not recovered, sick in 2021 with outcome of unknown, trying to control his blood pressure and his pulse issues, pulse incomplete on an unspecified date with outcome of unknown, moderate headaches from 19Sep2020 with outcome of recovered, muscle weakness severely progressing on an

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unspecified date with outcome of unknown, 10 mg 3 times a day wasn't enough (therapeutic product effect incomplete), on an unspecified date with outcome of unknown, he'd switch and do a couple doses of 15 mg and it was better but not enough (intentional product use issue) on an unspecified date with outcome of unknown, after he received the COVID vaccine, he experienced a bad reaction (unspecified) on an unspecified date with outcome of unknown. The events were reported as serious as involved hospitalization. The patient passed away on an unspecified date in Feb2021. It was not reported if an autopsy was performed. The clinical course of the events included the following information. On 21Sep2020, a spontaneous report was received from a consumer, via a company representative, regarding a 74-year-old male who was being treated with FIRDAPSE 10 MG (amifampridine). On 22Sep2020, additional information was received from a consumer. On 02Oct2020, additional information was received from a consumer and chemotherapy was added as a co-suspect. On 01Feb2021, additional information was received from a consumer via a company representative. On 09Feb2021, additional information was received from a consumer, and this case was determined to be the master case for cases 2021CAT00039 and 2021CAT00052 (both invalid, duplicate cases) and the information was merged into this case (2020CAT00505). This case was re-assessed as serious/unexpected, and COVID vaccine was added as co-suspect. On 18Feb2021, additional information was received from a consumer via a company representative. On 19Feb2021, additional information was received from a patient ambassador via a company representative. Medical history included LEMS (Lambert-Eaton myasthenic syndrome) and migraines. Concomitant products included: an unknown statin, pantoprazole, and acetylsalicylic acid (ASPIRIN) 81 mg. On 18Sep2020, the patient started treatment with FIRDAPSE 10 mg at 10 mg, 3x/day orally for LEMS. On 19Sep2020 and 20Sep2020, after starting the product, the patient experienced moderate headaches. On 21Sep2020, the patient did not experience a headache. On 22Sep2020, the patient experienced a headache that was "4/10." He had taken acetaminophen; aspirin; caffeine (EXCEDRIN) and ibuprofen as treatment and it "helped." The patient

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had not spoken to his HCP (health care provider) about the event but was going to call his HCP and ask to increase his dose of FIRDAPSE. The product was working and he was walking better, but he had heard people taking up to 80 mg a day. As of 22Sep2020, product use was ongoing and headaches were improved. On 02Oct2020, it was learned that his medical history included being prone to headaches (also reported as migraines ever since he was a kid) and "chemo" for small cell lung cancer stage 4 which was in his liver and lymph nodes. Concomitant products included furosemide. It was noted that the patient had been on the product for 4 to 5 days when he experienced his moderate headaches. He had the headaches for just a couple days, but he wasn't sure if it was due to the FIRDAPSE or it was the chemo. He took "a couple" of ibuprofen and he was "alright." On an unspecified date, the patient was in contact with his HCP and he was told to "keep an eye on it" (presumed headaches) and see if it got worse. They agreed that it could have been the chemo or a "fluke" thing. He also spoke to his HCP about his FIRDAPSE dose of 10 mg, 3x/day not being enough. He would switch and do a couple doses of 15 mg and it was better, but not enough. His HCP thought he should be taking 20 mg 3x/day, so he was working with the patient's insurance and pharmacy to get it changed. As of 02Oct2020, FIRDAPSE and chemo treatment were ongoing and moderate headaches were resolved (reported as he'd been good for a few days). On 01Feb2021 and 09Feb2021, it was learned that on 02Oct2020, the patient's FIRDAPSE dose increased to 20 mg, 3x/day. On an unspecified date, the patient received the COVID vaccine at an unreported dose, route, and frequency of administration for an unreported indication. After the patient received the COVID vaccine, he experienced a bad reaction (unspecified). Since 27Jan2021 (reported as since Wednesday, relative to 01Feb2021), the patient had been sick. On 31Jan2021, the patient went to the emergency room, and they thought he had a blood clot on his lung. Subsequently, he was admitted to the hospital. Initially, when the patient was in the hospital, they took all his medications away, including his FIRDAPSE, as the pharmacy was managing his medication. The patient wife was able to get the doctors to let the patient keep his FIRDAPSE in his room with

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him before he missed any doses because he could not walk without his FIRDAPSE. On an unspecified date in 2021, the patient had radiation of his head and lung for his cancer (previously reported medical history), and "they" (presumed his medical provider) said he could have a raspy voice and headache, which he did experience but then resolved. While in the hospital, the patient's blood pressure was not stable. It went "up and down, up and down." He had fluid in the bottom right lobe of his lung, where the cancer was, and they could not "tap it" due to the blood pressure issues. They were trying to get the fluid out every other way they could. The doctors said he had inflammation in the bottom of his lung. He was given a "good dose" of prednisone, but he was just exhausted. They were trying to control his blood pressure and his pulse. When they got one of them "up," the other went "down." The doctors said that the patient's LEMS had nothing to do with why he was in the hospital. His wife expressed her gratitude for the FIRDAPSE and how it had helped him. As of 09Feb2021, treatment with FIRDAPSE was ongoing. The patient was still in the hospital and not doing well, also reported that he was still the same, he had not improved but he had not worsened. The blood clot on his lung, blood pressure fluctuation and pulse issues, fluid in the bottom right lobe of his lung, inflammation in the bottom of his lung, and exhaustion were not resolved. The status of the bad reaction to the COVID vaccine was not reported. No additional information was provided. On 18Feb2021 and 19Feb2021, it was learned that the patient's medical history included: muscle weakness and lung cancer with brain metastases. On unspecified dates, after starting FIRDAPSE, the patient's muscle weakness began severely progressing, and he experienced fatigue. The weakness was worsening significantly, even after being on the medication (presumed FIRDAPSE). On 14Feb2021 or 15Feb2021, the patient was discharged from the hospital. On 18Feb2021, the patient took his last dose of FIRDAPSE. On 18Feb2021 or 19Feb2021 (reported as last night, relative to 19Feb2021; yet also reported as either 18Feb2021 or 19Feb2021), the patient passed away. The cause of death was unknown. A 74-year-old male, with a history of migraines and chemotherapy for metastatic small cell lung cancer, was taking an unknown statin, furosemide, pantoprazole, and

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								Aspirin. He added FIRDAPSE for LEMS on 18Sep2020 and experienced headaches for a couple days, but he wasn't sure if it was due to the FIRDAPSE or chemo. After COVID vaccine, he experienced a bad reaction (unspecified). Since 27Jan2021, he was hospitalized with a blood clot on his lung. He had brain and lung radiation for cancer. While in the hospital, he had fluid and inflammation in the bottom right lobe of his lung, where the cancer was, which could not be drained due to labile blood pressure. His muscle weakness began progressing and he experienced fatigue. In Feb2021, he was discharged on FIRDAPSE. A few days post-discharge, he died. Based on the information provided, the events were assessed as unrelated. Information on the batch/lot number has been requested.; Reported Cause(s) of Death: Passed away
4/9/2021		1187052	TX	82	F	4/1/2021	4/5/2021	Patient is an 82-year-old female who came to the emergency department today complaining of shortness of breath. Patient also reports that she has cough, low oxygen and recently received her second Covid shot and when EMS picked her up she was 83% oxygen saturation on room air. Patient has what sounds like pooling secretions in her throat and patient had suctioning done by respiratory which caused her to bleed blood noted in teeth and around mouth. Patient reports that her throat has been hurting her and that is why she has been unable to eat. Patient's daughter is at bedside and is historian for majority of the assessment. Patient's daughter reports she has not been eating or drinking for the last 2 days. Labs in ER showed WBC 11.61, lactate level 3.3, creatinine 2.0, procalcitonin 5.33, magnesium 1.5, BNP 2100, glucose 474. Chest x-ray showed no acute findings.

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4/9/2021	1184531	WV	61	F	3/12/2021	3/14/2021	Weakness Confusion Falling down Vision impairment Legs really weak All of the above symptoms started on March 14, 2021 On March 18,2021 she was not out of bed except for just a few minutes. On March 19, 2021 she was on the floor laying beside of the bed and my father noticed blood looking stuff on her shirt and bed covers. She was really confused and lethargic. She was really weak and could not stand. She was extremely fatigued. At around 10:30 she fell again on the floor and my father and sister in law was able to get her back up and put her in a chair and she went to sleep. At 12:55 my father noticed she was not breathing and called 911. When they did CPR blood was coming from her mouth and nose. When the ambulance arrived they immediately took her to the hospital where she was pronounced dead at around 3:30 pm.
4/9/2021	1185193	MI	71	F	3/1/2021	3/1/2021	within 2 weeks of receiving the covid vaccine patient became weak, stopped eating, more lethargic and became bedbound and was started on hospice. She died on 3/31/2021
4/9/2021	1197395		87	M	3/4/2021	3/30/2021	Death Narrative: Patient received his first dose of the Moderna COVID-19 vaccination on 3/4/2021. He presented to facility 03/05/2021 for shortness of breath. He was originally treated for COPD exacerbation and COVID-19 was ruled out by negative testing. He was then found to have blood cultures positive for E. Faecalis. He was treated with broad spectrum antibiotics. His lack of improvement in respiratory status was the cause of discharge to hospice after which he died on 3/30/2021.
4/9/2021	1187758	NJ	89	M	4/9/2021	4/9/2021	PATIENT WAS GIVEN JANSSEN COVID 19 VACCINE AT AROUND 12PM WHEN PATIENT WAS ACCOMPANIED BY HIS SON. HE WAS OBSERVED FOR 15 MINUTES AFTER THE VACCINATION AND LEFT PHARMACY WITHOUT ANY PROBLEM. PATIENT'S DAUGHTER CALLED AROUND 6PM AND REPORTED HER FATHER JUST DIED. SHE REPORTED HER FATHER ALL OF SUDDEN WAS SHAKING AND DIED RIGHT AFTER.

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4/9/2021	1183806	UT	92	F	3/22/2021	3/22/2021	Went down hill after receiving the 2nd shot and stopped breathing; Went down hill after receiving the 2nd shot and stopped breathing; This spontaneous case was reported by a consumer and describes the occurrence of RESPIRATORY ARREST (Went down hill after receiving the 2nd shot and stopped breathing) in a 92-year-old female patient who received mRNA-1273 (Moderna COVID-19 Vaccine) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. No Medical History information was reported. On 22-Mar-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On an unknown date, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 22-Mar-2021, the patient experienced GENERAL PHYSICAL HEALTH DETERIORATION (Went down hill after receiving the 2nd shot and stopped breathing). On 24-Mar-2021, the patient experienced RESPIRATORY ARREST (Went down hill after receiving the 2nd shot and stopped breathing) (seriousness criteria death and medically significant). On 24-Mar-2021, GENERAL PHYSICAL HEALTH DETERIORATION (Went down hill after receiving the 2nd shot and stopped breathing) outcome was unknown. The patient died on 24-Mar-2021. The reported cause of death was stopped breathing. It is unknown if an autopsy was performed. Reporter wasn't sure if patient received Pfizer or Moderna vaccine. The patient was in hospice care and reporter thought the patient received the vaccination from a local pharmacy. Concomitant medications and treatment medications were not provided.; Reported Cause(s) of Death: Stopped breathing

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4/9/2021	1197556		76	M	2/14/2021	3/20/2021	cardiac arrest Narrative: Patient received dose 2 series of Moderna COVID-19 vaccine. First dose was received on 1/17/21 and second dose received 2/14/21. After both doses patient was observed for 15 minutes and did not have any adverse reaction per administering RN. No data in database or database as to any other adverse events occurring 15 minutes post-vaccination. On 3/20/21, EMS was called to patient's home who was discovered on the floor with an unknown breathing status and pulse. AED was attached to the patient. A very weak pulse was found and patient had agonal respirations. Cardiac monitor was attached to patient with a HR of 32. 1mg of atropine was administered and patient's rhythm changed to PEA with no respirations or pulse. Per patient's wife and son, he was a DNR, therefore all resuscitation attempts were stopped (patient was never admitted to the hospital). Patient was never known to be previously positive to COVID. PMH that may have predisposed patient to this adverse event leading to death include h/o DVT on chronic anticoagulation, COPD, and abdominal aortic aneurysm. There is insufficient information to determine the exact cause of death or what led to the cardiac arrest given that the time from last vaccination to the adverse event was almost a month apart.
4/9/2021	1197398		75	M	2/19/2021	4/3/2021	Death Narrative: Patient with h/o metastatic lung CA-he was already on hospice at time of 1st and second COVID-19 vaccines.
4/9/2021	1197396		75	M	3/11/2021	4/3/2021	Death Narrative: Patient received the first dose of Moderna COVID-19 vaccination on 3/11/2021. He had not received any vaccines within 4 weeks prior and did not have any contraindications to the vaccine listed in his chart. He did not have a positive COVID-19 test within the facility system. Cause of death: Patient was transported to facility on 4/3/21 after complaining of shortness of breath. It was noted that he had some GI bleeding and was hypertensive. The documentation from facility indicates that death was of natural causes.
4/9/2021	1197557		81	M	1/28/2021	3/25/2021	Death Narrative: already reported VAER for hospitalization on 3/3; the patient subsequently died once transferred to SNF

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4/9/2021		1197394		70	M	3/20/2021	3/22/2021	Death Narrative: Death on 03/22/2021. Patient was a 69 year-old male with history of lung cancer treated with radiation. Recently presented with a right suprahilar lesion Stage III for which he received radiation therapy in 2/2021. He developed a strong cough after radiation treatment and passed from a massive hemoptysis per physician note. He received the 1st dose of vaccine on 03/20/2021 2 days before his death. There is no indication that the event was the result of the vaccine.
4/9/2021		1197393		91	M	3/4/2021	3/18/2021	Died Narrative: Pt has a diagnosis of: Parkinson's Disease, severe AS, heart failure Symptoms include: dysphagia, aphagia, excessive secretions. Agency patient has been referred to: Hospice Code Status:DNR/DNI 90M with PMH notable for Afib, chronic aspiration, and dysarthria, severe aortic stenosis who presents 3/5 with 2 weeks of generalized weakness and in ED noted to be in AFib w/ RVR to 130s, CT findings suggestive of volume overload with exam supporting this at time of admission, and also noting nonspecific generalized weakness. DC Home 3/9 Hospice
4/9/2021		1188345	WA	86	M	3/12/2021	3/28/2021	Patient's wife came into our clinic today for her second Moderna dose and reported to us that her husband (the patient) had died on March 28, 2021 of a NON-COVID cause. She did not specify how he died. She gave us his vaccine card in case we needed to do anything with it. This RN is reporting as the client died roughly two weeks after administration of the 1st dose and it was reported directly to the facility, although the death is not COVID related according to the patient's wife.
4/9/2021		1188311	PA	98	M	2/20/2021	2/20/2021	Major Complex Seizure with post-ictal period of 2 hours, occurring 3 hours after receiving injection. 16 days later on March 6, 2021 was unable to void, sustained breathing difficulty with peripheral edema. Received diuretic from Nurse,. Indwelling Catheter was inserted. On day 17, after receiving Corvid Vaccine, DECEASED on March 7, 2021 at home. Sustained Complex Seizure 6 hours prior. Death Certificate ruling Cause of Death as Cardiac Arrhythmias.

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4/9/2021	1188278	VA	75	M	3/6/2021	3/8/2021	Patient collapsed & died 48 hrs. after receiving vaccine. He was shopping at local CVS store & collapsed without warning. Two nurses on scene at Clinic performed CPR immediately & applied AED. EMS arrived within 5 min. There was never a heart rhythm & after 35 min. of CPR was DOA at hospital ER. He had gone to the gym earlier at 7am & was having a normal day. He had not mentioned any complaints of not feeling well.
4/9/2021	1188262	DC	83	M	3/2/2021	3/9/2021	Patient was stable with ongoing care prior to incident. On 3/2/2021 patient had Covid vaccine number 2. On 3/9/2021, patient started to have dark brown emesis and was transferred to the hospital. On 3/12/2021, patient returned to nursing facility with hematemesis and melena due to GI bleed. Patient was started on comfort care. Had ongoing esophageal cancer with radiation therapy prior to incident. Patient expired on 4/8/2021. Of note, patient was covid positive on 12/14/2020 without any signs of infections. He had covid #1 vaccine on 2/2/2021 and #2 on 3/2/2021. Of note, his wounds worsened after covid vaccines per nursing notes.
4/9/2021	1188126	DC	89	M	3/2/2021	4/7/2021	Patient was on hospice for general debility for about 2 years. Patient was eating 100% and propelling self in wheel chair while living in nursing home. Received Covid vaccine #1 on 2/2/21 and #2 on 3/2/21. No other significant events occurred until starting 4/7/21 when patient started vomiting food. Then on 4/8/21 patient vomited large amount of coffee ground emesis. Then on 4/9/21 patient expired.
4/9/2021	1188040	OR	78	F	3/10/2021	4/2/2021	nontraumatic subcortical hemorrhage of left cerebral hemisphere resulting in death
4/9/2021	1187918	NH	15	F		4/5/2021	I do not know the exact date of the first or second Moderna Vaccine. I am the PICU attending who cared for the patient after her cardiac arrest which we believe was about 3-4 days after her second Moderna Vaccine
4/9/2021	1197397		73	M	4/4/2021	4/4/2021	Death Narrative:
4/8/2021	1180245	IL	73	M	3/10/2021	3/26/2021	Death within 30 days of vaccination
4/8/2021	1180587	TX	71	F	2/24/2021	3/8/2021	Acute Hemorrhagic CVA resulting in eventual death.

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4/8/2021	1180533	MI	63	M	3/11/2021	3/25/2021	wife of the patient called came in for her COVID-19 vaccine appointment on 4/8/2021 and explained that her husband passed away in his sleep suddenly after a wonderful evening on 3/25/2021. She expressed that physician said it was not COVID related. Wife did not want to discuss the death of her husband at this time so the information is limited for this report.
4/8/2021	1180530	GA	84	F	4/1/2021	4/2/2021	Death due to massive basal ganglia hemorrhage
4/8/2021	1180374	IL	81	F	2/3/2021	4/4/2021	Death within 60 days of vaccination. Unwitnessed cardiac arrest, CPR attempted and unsuccessful.
4/8/2021	1180291	IL	86	F	2/3/2021	3/26/2021	Hospitalization x 2 within 30 days of vaccination; Death within 60 days of vaccination
4/8/2021	1180189	IL	82	M	2/23/2021	3/28/2021	Hospitalization within 30 days of vaccination. Death within 60 days of vaccination
4/8/2021	1180145	IL	74	F	3/4/2021	3/26/2021	Low Magnesium levels 2/24 Mag 1.5, 3/4 received 4gm Mag Sulfate, 3/8 Mag 1.6 (obtained from Hospital. Death within 30 days of vaccination
4/8/2021	1180107	IL	70	F	2/24/2021	3/24/2021	Death within 30 days of vaccination
4/8/2021	1180051	KY	70	F	1/7/2021	3/31/2021	Was hospitalized (unsure dates on hospitalization); has no known pre-existing conditions; symptom onset was 3/3/2021 with fever, chills, rigors, myalgia, rhinorrhea/congestion, sore throat, cough (wet productive), nausea/vomiting, headache, loss of smell and taste, and fatigue. Was a household contact to a known COVID-19 case.
4/8/2021	1180036	KY	90	F	1/21/2021	2/12/2021	Patient tested positive for COVID on 12/30/2020. She did not experience COVID symptoms; however, at that time her dementia and weakness progressed. She passed away on 02/12/2021 at the nursing home facility.
4/8/2021	1179974	KY	73	M	3/18/2021	3/29/2021	pt was diagnosed with covid on 3-29-21 , hospitalized for pneumonia and respiratory failure and expired on 4-6-21 at Hospital

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4/8/2021		1179434	NM	70	F	3/1/2021	3/30/2021	She felt. Ad the evening of her 2nd vaccine. The morning after she felt worse. Nauseous, pale, achy. She said she had not ever felt that bad. I read possible side effects. It said flu like symptoms, so we thought it would pass. Then around 4 she called for me & when I got there she had an event that caused her to be unable to speak & her eyes widened & pupils were dilated. I called 911. They got here quick. She had at least three of those stiffening wide eyed events. The emt said they thought it was her blood sugar. When checked it was 350 even though she had taken her insulin that day. They said she had a massive heart attack on the way to the hospital.
4/8/2021		1180640	KY	66	M	4/3/2021	4/4/2021	4/4/21 woke up more tired than usual. Progressed from there, prominent fatigue for the next couple days, slept on the couch on and off for a couple days which was unusual for him. Mild SOA and weakness 4/7/21. Died in his sleep into the morning of 4/8/21.
4/8/2021		1179444	RI	50	F	4/6/2021	4/6/2021	Systemic: Unknown, patient found deceased at home evening after receiving vaccine.-Severe, Additional Details: called pharmacy inquiring about vaccine for patient. She received her COVID vaccine on 4/6/21 and later that evening was found at home deceased. Called to gather information on the patient/vaccine. Caregiver stated that the patient did not have a PCP, therefore they do not have much medical history on her. There were no notes on adverse reaction during post-vaccine observation. It is unknown at this time if vaccine played any role.
4/8/2021		1182258	TX	85	F	3/12/2021	4/1/2021	UNKNOWN - SAW ON SOCIAL MEDIA THAT PATIENT PASSED AWAY ON 4/1/2021
4/8/2021		1180565	MO	69	F	4/1/2021	4/7/2021	04/07/2021 cold hands, alternating hot and cold sweats, arm stiffness, shaking, aphasic and blank stare. Date of death 04/07/2021.

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4/8/2021	1180688	PA	74	F	4/6/2021	4/6/2021	Patient was vaccinated on 4/6/21 at 9:05 am. Report received that patient was in the car on the way home from the vaccination and had chest pain and shortness of breath. Patient called their primary care doctor who requested reporting to the nearest emergency room immediately. Patient became unresponsive in the car. Patient arrived in cardiac arrest (arrival time noted to be 4/6/21 at 10:54 am, CPR began. Patient was intubated in the ER, and received epinephrine, amiodarone, and was defibrillated several times per ACLS protocol. Patient did not have return of spontaneous circulation and was subsequently pronounced. Per report, it was noted that patient was short of breath prior to receiving vaccination earlier in the day.
4/8/2021	1183418	CT	65	F	3/4/2021	4/2/2021	Vaccine breakthrough hospitalization - SOB with O2 sat 50% when EMS arrived. On non-rebreather satting 70%. Chills, fever, cough, and chest pain. BP 152/79, HR 93, RR 20, SpO2 91%. Had been scheduled to receive COVID mAb day of admission, but clinical course worsened. Admitted to Medical ICU for acute respiratory failure with hypoxia and ARDS secondary to COVID-19. Placed on BIPAP and Rx with Remdesivir, dexamethasone, & tocilizumab. Treated for presumed pulmonary embolism with full-dose anticoagulation. Pt expressed wishes to remain DNR/DNI, ultimately she elected to transition to comfort measures only given worsening hypoxia.
4/8/2021	1182611	IL	88	M	3/26/2021	4/2/2021	My father became weak and non-responsive in week following vaccine. Could not communicate and passed 11 days after receiving vaccine.
4/8/2021	1182101	MN	92	M	1/15/2021	4/5/2021	Completed Moderna series on 02/12/2021. Diagnosed with COVID-19 on 04/06/2021 and expired from COVID-19 pneumonia on 04/06/2021
4/8/2021	1182018	PA	73	F	3/31/2021	4/8/2021	Death from cardiac arrest

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4/8/2021		1181925	DE	57	M	3/15/2021	3/20/2021	Patient started complaining of extreme back pain and trouble walking within days after receiving the vaccine. His pain got increasingly worse. On the 23rd he had to be taken into the hospital in an ambulance. He said he felt as if his lower body was separated from his torso, and visible was having trouble walking. They prescribed him Valium, preformed an x-ray, and sent him home. On the 27th he was taken back to the hospital due to leg weakness, tingling in his hands and feet, and extreme pain. He was diagnosed with Guillain-Barre Syndrome. He passed away April 6, 2021 after spending 11 days in the hospital, and 6 days on a ventilator.
4/8/2021		1180840	AR	68	F	4/2/2021	4/2/2021	3.5 hours after receiving the vaccine, the patient was killed in a head-on collision. The patient was driving when her vehicle crossed the centerline and struck a second vehicle head on. It is unknown if the COVID19 vaccine contributed to the collision and death.
4/8/2021		1180896		83	M	3/11/2021	3/17/2021	Narrative: Patient received second dose of Moderna COVID vaccine on 3/11. per caregiver, was diagnosed with a stroke at hospital ~ 3/17/21. He was transitioned to hospice and expired last week.
4/8/2021		1180895		41	F	3/14/2021	4/3/2021	death Narrative: Pt with hx substance use disorder (on suboxone), depression, PTSD, SI and grief following her son's suicide. Pt received COVID vaccine 3/14/21. Clinic notified of pt's death on 4/6, for which it HAS NOT BEEN VERIFIED but reported death date of 4/3. Pt was scheduled for MH f/u appt 4/5, but no-showed it. Unclear report or cause of death, however, suspected via suicide or drug overdose given risk factors and worsening of mental illnesses. Was pt previously covid positive? No Are there any predisposing factors (i.e. PMH, HPI, allergy history etc) for patient experiencing adverse drug event? No Any occurrence of an ADR at time of administration or during time of observation? No Did patient recover from event? N/A - pt died but does not appear related to vaccine Was there an ADR between observation period and date of death? No Was patient hospitalized prior to vaccination? No Was patient hospitalized between vaccination and date of death? No Was patient hospitalized prior to death No What are the possible cause of death? Suicide, illicit drug overdose

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4/8/2021	1180894		92	M	3/11/2021	3/12/2021	respiratory arrest, cardiac arrest Narrative: Patient died 1 day after receiving 2nd dose of COVID vaccine in his bed at home. Paramedics arrived but were not able to resuscitate.
4/8/2021	1180886	CA	58	F	12/22/2020	12/27/2020	Patient contracted COVID during an outbreak. Patient went to the ED on 2/28 and was sent home. Patient returned to the ED on 1/2 and was admitted. Patient expired on 1/3
4/8/2021	1181914	PA	71	M	4/8/2021	4/8/2021	Patient entered Drug store to get his second Moderna COVID shot on 4/8/2021 at approx. 12:30pm. (First dose was 3/11/2021) He filled out his Pre-Vaccination Checklist for COVID-19 Vaccines and signed the consent. His form was reviewed and he was given his vaccine in his left deltoid. He then was given his CDC card and waited at least 15 minutes and then exited the building. At 1p.m he was in an accident on the main highway. He was conscious after the accident, but later did pass away. This information came from a Police Officer as no one at the pharmacy witnessed the accident.
4/8/2021	1182765			F			died approximately one week after receiving the Pfizer vaccine; This is a spontaneous report from a non-contactable consumer. A 94-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number and expiration date not reported), via an unspecified route of administration on an unspecified date as single dose for COVID-19 immunization. Medical history included cardiovascular disease and other conditions (could not name). The patient's concomitant medications were not reported. The patient was ill but was able to walk around on own and found pretty weak for age. It was reported that the patient died approximately one week after receiving the vaccine on an unspecified date. It was unknown if an autopsy was performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: died approximately one week after receiving the Pfizer vaccine

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4/8/2021		1180818	WI	69	M	3/19/2021	3/22/2021	Recipient of vaccine is a family member (father) of employee of Hospital. Recipient was vaccinated with Dose 2 Pfizer Covid vaccine on 3/19/2021 and observed on-site for 15 minutes after vaccination with no apparent concerns. On 3/23/2021, his daughter (our employee) notified clinic that on 3/22/2021, recipient had died. 4/7/2021 his daughter (our employee) states the medical examiner indicated his autopsy showed evidence of cardiac arrest.
4/7/2021		1174338	VA	40	M	3/25/2021	3/26/2021	Patient died 12-15hrs after vaccination.; This is a spontaneous report from a contactable Consumer. A 40-year-old male patient received bnt162b2 (BNT162B2), dose 1 via an unspecified route of administration, administered in Arm Right on 25Mar2021 12:45 (Batch/Lot Number: ER8727) at the age of 40-year-old as single dose for covid-19 immunisation. Medical history reported as none. Concomitant medication included buprenorphine hydrochloride, naloxone hydrochloride (SUBOXONE) taken for an unspecified indication, start and stop date were not reported. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient died 12-15 hours after vaccination. The patient died on 26Mar2021. An autopsy was not performed. No treatment received for the event. Prior to vaccination, the patient was not diagnosed with COVID-19 and since the vaccination, the patient was not been tested for COVID-19.; Reported Cause(s) of Death: Patient died 12-15hrs after vaccination.
4/7/2021		1176215	KY	75	M	3/4/2021	4/6/2021	Patient was admitted to the hospital on 03/27/2021. He was symptomatic and died at the hospital on 04/06/2021.
4/7/2021		1176234	MN	95	F	2/15/2021	4/1/2021	Patient death within 60 days of receiving the COVID vaccine series
4/7/2021		1176274	DC	46	F	3/25/2021	4/5/2021	Patient became SOB 911 called patient arrested in ambulance and died
4/7/2021		1176278	WI	96	F	2/11/2021	4/2/2021	Patient within 60 days of receiving a COVID vaccine death
4/7/2021		1176896	MT	64	M	2/4/2021	3/4/2021	Patient died of an apparent Cardiac Arrest.

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4/7/2021	1176121	WI	83	F	2/12/2021	3/31/2021	Patient death within 60 days of receiving a COVID vaccine
4/7/2021	1174358			F			Pfizer vaccination killed patient; This is a spontaneous report from a Pfizer-sponsored program, Corporate (Pfizer) Social Media Platforms. A contactable consumer reported for mother (patient) that a female patient of unspecified age received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot/batch number and expiration date not provided), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The reporter reported that Pfizer vaccination killed reporter's mom (patient) on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Pfizer vaccination killed patient
4/7/2021	1176806	FL	98	M	3/19/2021	3/26/2021	OBJECTIVE: Patient found deceased on March 26, 2021, less than one week post vaccination with Pfizer-BioNTech COVID19 vaccine dose #1. Found by daughter who is also RN and caregiver. Patient found with black tongue protruding slightly from open mouth. Three days post vaccine date and for three days patient found mouth-breathing heavily. When patient's attention was called to his breathing he immediately resumed normal breathing. Also three days post vaccine date and for three days patient had loosened waist belt and offered complaint of feeling full. Also, Patient was more talkative during the week following vaccination. SUBJECTIVE: Perhaps related to anxiety. OBJECTIVE: Patient had eaten only one avocado per day for his remaining two days of life. Patient had history of stoicism and was known to downplay or deny deviations in physical well-being.

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4/7/2021		1177058	MT	27	F	4/1/2021	4/2/2021	Family reports that patient had her 2nd dose of COVID-19 vaccine on 4/1, approximately 3 weeks after her first dose. Patient had one week history of "allergy type" symptoms. Evening of 4/1 developed "GI symptoms and diarrhea". Morning of 4/2 her "neighbor came by to check on her and she stated that she was not feeling very well last night but thought she just needed some Gatorade of something...He stated that as he gave her the alka-Seltzer he told her that there was aspirin in it which apparently she has an allergy to. He stated that her response was I should be fine I do not think I'm that allergic to aspirin...5 to 10 minutes later she started to have some issues...Patient stated to her neighbor that she was having a hard time breathing and thought she needed to go to the hospital, and that maybe she was more allergic to the aspirin than she had thought...Over the 15 miles between her house and the hospital patient condition deteriorated to the point where they arrived at the hospital she is in full cardiac arrest...given ACLS protocol including epinephrine and was intubated." "They achieved ROSC after approximately 10 minutes." Patient was then flown, MT emergency department to Hospital. Patient was cared for in the ICU. Patient herniated her brain the night of 4/5-4/6. "After meeting the clinical and imaging criteria at 1605 on 4/6/2021 she was declared brain dead. Medical team suggests that patient had Samter's Triad/Triad Asthma with history of asthma, nasal polyps and allergy to aspirin. Anaphylaxis secondary to ingestion of aspirin via Alka-Seltzer.
4/7/2021		1176064	WI	82	M	2/26/2021	3/30/2021	Patient death within 60 days of receiving a COVID vaccine

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4/7/2021	1176010	NY	36	M	3/10/2021	3/18/2021	He got his vaccine, and mother had talked to his girlfriend said that he felt fine other than a sore arm. He called his mother and told her that he was sick to his stomach with cramps and that he was throwing up blood. The girlfriend found him on the floor on the 21st dead on the floor in his hotel room at 8:00 AM. The girlfriend said she had spoken with him around 10:00 PM and that he said he was going to sleep on the floor in the bathroom as he was throwing up and the floor was cool. She subsequently found out that he was throwing up blood, and autopsy report showed that his stomach was full of blood and further testing is being done to see what has caused the bleeding.
4/7/2021	1176003	MN	65	M	3/11/2021	3/25/2021	Patient death within 60 days of receiving a COVID vaccine
4/7/2021	1175952	MN	45	M	2/4/2021	3/25/2021	Patient death within 60 days of receiving the COVID vaccine series
4/7/2021	1175722	IL	67	F	3/19/2021	3/19/2021	Family member reported patient deceased. Was found on 3/21/21. She had told a friend she wasn't feeling well on the night of 3/19/21.
4/7/2021	1175492	KY	87	F	3/9/2021	3/21/2021	Janssen vaccine given on 3/9/2021; Admitted to the hospital on 3/16/2021 for COVID-19 infection, pneumonia, new onset a-fib, and COPD exacerbation.
4/7/2021	1175146	MD	93	F	3/16/2021	3/17/2021	Patient became weak within 24 hours and declined daily until she died on 4/5/21. Family wanted no intervention except comfort care given patient's wishes.
4/7/2021	1176131	IA	58	M	3/27/2021	3/31/2021	Patient died.
4/7/2021	1175454	KY	81	F	12/22/2020	2/12/2021	Died on 2/12/2021; diagnosed as a COVID-19 related death; 1st vaccine dose on 12/22/2020, 2nd vaccine dose on 1/14/2021. Hospitalized for acute respiratory failure with hypoxia and pneumonia due to COVID-19 infection.
4/7/2021	1178537	MA	58	M	3/1/2021	3/10/2021	Pt was found deceased at home on 3/10/21. He had had a cough prior to, recent hospitalization for pneumonia/acute on chronic resp. failure.

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4/7/2021	1177076	KS	51	F	3/30/2021	4/3/2021	On Saturday, April 3rd, patient told her son she was tired and was going to take a nap. Her son tried to wake her the next morning since she had not come out of her room from the day before. He was unable to wake her.
4/7/2021	1176120	AK	67	M	3/19/2021	3/24/2021	Patient died of expected causes 5 days post-vaccine. Patient was known to have advanced colon cancer. Patient's COD was metastatic cecal cancer, admitted to hospital on 3/22/21 for palliative treatment, PEG tube placement for decompression, and pain control.
4/7/2021	1178909	CA	75	M	4/2/2021	4/3/2021	He complained Fever and after that shortness of breath, and when I tried to see a Doctor he suddenly collapse and died
4/7/2021	1178571	MA	58	M	3/12/2021	4/2/2021	Pt was found deceased at home, 4/2/2021.
4/7/2021	1178531	CO	49	M	4/4/2021	4/4/2021	Death within 12 hours
4/7/2021	1178308	WA		U			two deaths in her state from vaccine; This is a spontaneous report received from a contactable consumer. This consumer reported similar events for two patients. This the first of two reports. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number not provided), on unspecified date at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. Reporter was concerned because there had been two deaths in her state from vaccine and thought Pfizer might be curious in how their product was being handled. The patient died on unspecified date. It was unknown if autopsy was performed. The outcome of the event was fatal. Information on lot/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021371688 same reporter/event, different patient; Reported Cause(s) of Death: two deaths in her state from vaccine

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4/7/2021	1178307	WA		F	2/27/2021	2/28/2021	She died 23 hours later on 28Feb/Her cause of death on her death certificate was stated to be cardiac arrest; This is a spontaneous report from a contactable consumer (patient's husband). A female patient of an unspecified age received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE, Solution for injection, lot number and expiry date were not reported), via an unspecified route of administration on 27Feb2021 at a single dose for COVID-19 immunisation. Medical history included heart disease from an unknown date and unknown if ongoing. The patient's concomitant medications were not reported. Patient died 23 hours later on 28Feb2021 after first dose on 27Feb2021. She did not show any adverse symptoms after being vaccinated. The questionnaire before the vaccination asked "if you have a chronic health condition such as heart disease". It was stated that she has heart disease; still the vaccination was given. Her cause of death on her death certificate was stated to be cardiac arrest. The patient died on 28Feb2021. It was unknown if an autopsy was performed. Information about Batch/Lot number has been requested.; Reported Cause(s) of Death: She died 23 hours later on 28Feb/Her cause of death on her death certificate was stated to be cardiac arrest

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4/7/2021	1178304	IL	70	F	3/6/2021	3/6/2021	died/cancer; collapsed on the floor; eyes rolled back; stopped breathing for a very short.; This is a spontaneous report from a contactable consumer. A 70-years-old non-pregnant female patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE, Solution for injection, Lot Number: en6100, expiry date not reported), via an unspecified route of administration, administered in right arm Right on 06Mar2021 11:00 at a single dose for covid-19 immunization.Medical history included stage 4 esophagus cancer and mushroom allergies (known allergies to mushrooms). The patient had no covid prior vaccination; not diagnosed with COVID-19. The patient had other medications (unspecified) that the patient received within 2 weeks of vaccination. The most COVID-19 vaccine was administered in hospital. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine. The patient previously received first dose of bnt162b2 (lot number: el9267) for covid-19 immunisation in the right arm on 13Feb2021. The patient was not tested for covid post vaccination. Since the vaccination, the patient has not been tested for COVID-19. On the afternoon of 06Mar2021 (16:00), patient collapsed on the floor, eyes rolled back, stopped breathing for a very short. The patient was revived and carried to bed. She died at 4 am on the 13Mar2021. She told the reporter she did not want to go to the hospital and she said she wanted to die at home. The reporter stated that the cause of death was cancer since an unknown date. The events were reported as serious resulting in death. No treatment received for the adverse events reported. The patient died on 13Mar2021. The causes of death were cancer, collapsed on the floor, eyes rolled back, and stopped breathing for a very short. An autopsy was not performed.; Reported Cause(s) of Death: collapsed on the floor; eyes rolled back; stopped breathing for a very short; died/cancer

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4/7/2021	1178296	NC		M			cardiac arrest; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as SINGLE DOSE for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient experienced cardiac arrest 20 hours after receiving BNT162B2 on an unspecified date. The patient passed away due to cardiac arrest. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: cardiac arrest
4/7/2021	1177548	CA	33	F	4/3/2021	4/3/2021	On the evening of 4/3/2021 the patient was at home, prone in bed, gasped suddenly and became unresponsive. EMS was called and unable to resuscitate. She expired.
4/7/2021	1178887	MD	44	U	4/6/2021	4/7/2021	Death
4/7/2021	1178158	WA	63	M	4/2/2021	4/3/2021	Pt came to the ER via ambulance with SOB, difficulty breathing, confusion and combativeness which had gotten worse over the day 4/3/21. He had a rash all over his body.. After the respiratory treatments failed, pt was intubated and transferred to a higher level of care and expired on 4/4/21
4/7/2021	1177248	AL	86	F	4/2/2021	4/4/2021	Family reports general malaise post treatment, followed by fever and chills 4/3/2021, and cardiac arrest 4/4/2021.

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4/7/2021		1177384	CA	70	F	2/12/2021	2/12/2021	4:30pm slight nausea; arm pain; mild headache 5:00 pm headache more severe; up the back of head, described as unusual pain; thought a migraine was coming on. 5-7:00pm headache continues to worsen; chills; research on line side effects of Pfizer vaccine and they coincide with symptoms; 7:05 gets up to urinate (no assistance needed); screams out in pain 3 times while on toilet; starts to vomit; right side of face (eye and cheek and mouth droop like a stroke; left hand starts to curl. Loses consciousness immediately thereafter. 911 call; paramedics on the way; airway was swept and clear; gurgled breathing. Rushed to Hospital and assessed as having massive brain bleed. Pronounced dead at 10:22pm. Acute Hemorrhagic Stroke on Death Certificate.
4/7/2021		1177173	KY	59	M	4/5/2021	4/5/2021	Husband and wife came in 4/5 and received their COVID vaccines at 11am. They waited the 15 minutes to check for reactions and were asymptomatic when time was up. The pharmacy did a courtesy call around 3:15 pm on 4/7 to check in with them and see how they were feeling. The wife stated that her husband had passed away the night of 4/5. Wife stated that they were getting ready to go to bed and husband felt hot and shaky so he laid in front of a fan. Wife eventually had to do CPR and stated that she thinks that he passed away during the time while they were waiting for EMS, which took about 45 minutes. Patient was pronounced dead night of 4/5. Wife stated that patient has a history of heart problems including hypertension and multiple stents place and that she does not think the vaccine had to do with her husband's death.
4/7/2021		1177616	WI	72	M	2/11/2021	4/4/2021	Patient death within 60 days of receiving the COVID vaccine series
4/7/2021		1177800	TX	80	M	2/25/2021	2/25/2021	Rapid onset in fever and myalgia. Dyspnea and hypoxia developed over days, and eventually patient was hospitalized with bilateral pneumonia consistent with COVID-19, however patient had multiple negative tests for SARS-CoV-2, both antigen and PCR. Patient eventually diagnosed with interstitial lung disease prior to expiring on 4/7/2021.
4/7/2021		1178071	TX	53	M	2/24/2021	2/24/2021	Patient found expired at home about 12 hours after administration of vaccine

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4/7/2021	1178144	OR		U			<p>DIED FROM THE INTERACTION OF THE TWO PRODUCTS RISPERDAL AND COVID VACCINE; This spontaneous report received from a consumer who had heard that two people who took Risperdal and got a COVID vaccine died from the interaction of the two products. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. The patient received risperidone (form of admin, route of admin, and batch number were not reported) dose, frequency, and therapy dates were not reported for an unspecified indication. No concomitant medications were reported. On an unspecified date, consumer heard that a few people who took Risperdal and got a COVID vaccine died from the interaction of the two products. The action taken with covid-19 vaccine ad26.cov2.s, and risperidone was not applicable. This report was serious (Death).; Sender's Comments: A report received from a consumer who had heard that "a few people who took Risperdal and got a COVID vaccine died from the interaction of the two products." The patients past medical history, concomitant medications were not reported. COVID-19 vaccine ad26.cov2.s date and dose administered were not reported. Risperidone dose, frequency, therapy dates and indication were not reported. There is insufficient information provided in this case to make a meaningful medical assessment.</p>

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4/7/2021	1178152			M			HEART ATTACK; This spontaneous report received from a consumer via a company concerned a 40 year old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow up to request batch/lot number. No concomitant medications were reported. About 7 days after receiving the vaccine, the patient went to hospital regarding shortness of breath. On an unspecified date, the patient experienced heart attack and was hospitalized (date unspecified) and was later sent to intensive care unit (ICU). On an unspecified date, the patient died from heart attack. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death, and Hospitalization Caused / Prolonged).; Sender's Comments: 20210403505 - Covid-19 vaccine ad26.cov2.s -Heart attack. This event is considered unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: HEART ATTACK
4/6/2021	1172620	NM	80	M	3/4/2021	3/15/2021	My father, who at 80 was walking 2 miles a day and had just had a check up within the month consisting of an MRI, cardiac monitor and lab work which gave him essentially a clean bill of health felt fatigued after his second Moderna shot. 11 days after his second dose he took an afternoon nap and was found dead by my mother and myself. We are devastated. The time frame so close to his second moderna shot can not be ignored. We want no one to suffer a loss such as this if the vaccine was a catalyst. Full autopsy is ongoing, no know cause with initial results.
4/6/2021	1171391	MI	60	M	3/17/2021	3/24/2021	Death on 3/24/21 reported to vaccination clinic by family member. No additional details given.

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4/6/2021	1171887	VA	66	M	3/30/2021	3/30/2021	Notified by pt's family member that pt stated at the dinner table he was not feeling well and went to lay down. Pt then later called out for his family member stating he was bleeding from his dialysis access in his leg. Pt's family member called EMS, pt was transported to the hospital. Pt member stated the pt passed away that evening "because of all the blood he lost from his access." Pt's nephrologist and NP were notified. Pt's death per nephrologist was felt to be due to blood loss from his graft and not related to the vaccine.
4/6/2021	1171601	NC	44	M	3/19/2021	3/20/2021	Loss of appetite, malaise, nausea, falls, mental fog, death.
4/6/2021	1171449	WV	67	F	4/3/2021	4/3/2021	Pt received #2 moderna vaccine. Pt had no problems with #1 other than fatigue for 1 day. Went to store and passed out in the parking lot after passing out and hit her head on the pavement. Pt was transported to hospital. Pt was transferred to different hospital. Pt died at Hospital ER. 3 weeks ago pt diagnosed with heart murmur. Echo showed aortic valve function at 65%. Dr states he will just watch pt. no meds given. Pt family stated pt has a heart attack while at store.
4/6/2021	1172610	VA	88	M	2/11/2021	2/13/2021	Fever of 102 degrees Fahrenheit discovered by me when I went to awaken my husband on Saturday February 13, 2021. Two days later I discovered that he had died when I went to keep him a dose of liquid Tylenol at 4 am on February 15, 2021.
4/6/2021	1171278	NC	81	M	3/30/2021	3/30/2021	No adverse events reported while client observed after vaccination. Received voice message on 4/6 from daughter that client had died several hours after receiving vaccine. Also reported he had underlying health issues so unsure of cause. I made telephone call to daughter on 4/6. Daughter was wanting report made and plans to do so with additional health information included. I informed daughter I would be making a report also.

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4/6/2021		1171204	IN	61	M	3/24/2021	3/26/2021	Patient fell while on the job on Friday March 26th, slurred talking. Later slumped over in the car while driving and had to be taken to the Emergency room where he later passed away. Cause of death on the death certificate per the coroner is Pulmonary Embolus. Patient was just seen by his family physician in January and was in good health no medications taken other than eye drops.
4/6/2021		1171191	KS	43	M	3/31/2021	4/2/2021	Patient was found dead in his apartment. I'm not clear on details, but he was having some issues the week prior to being vaccinated. He was in acute distress when his attendant care worker came to give him his medications the day before.
4/6/2021		1170822		46	M	3/4/2021	3/18/2021	Patient was found deceased on arrival in his living quarters after not showing up for work. This was approximately 14 days after his second pfizer vaccination. We have no reports of previous signs or symptoms in the days preceding his death. Patient had not visited the clinic since receiving his second shot in the series
4/6/2021		1172648	CA	47	M	3/16/2021	3/23/2021	Cardiopulmonary arrest, D-Dimer 55,000, TNKase administered, ACLS, needle thoracostomy, persistent PEA arrest, decompensated into asystole , pronounced
4/6/2021		1172767	TN	52	M	3/29/2021	3/31/2021	Patient presented 4/3 stating received Pfizer COVID-19 vaccine on Monday and began having symptoms about Wednesday. Developed fever by Thursday and cough/nausea/vomiting by Friday. Cough ongoing and feels like he should have production but is not able to sputum out. The pain in chest is described as not being able to fully expand his lungs when he tries to inhale. Patient presented 4/6-DOA
4/6/2021		1171118	VA	73	M	4/2/2021	4/3/2021	Patient received his first dose of Pfizer vaccine at around 10:15am on Friday April 2, 2021. His family reports he waited 15 minutes after vaccination and then proceeded home and reported no other issues. Patient collapsed at his home on Saturday April 3, 2021 around 11am. Family did CPR and called 911. Upon arrival of EMS they determined he was deceased and did not do anything further.
4/6/2021		1174109	VA	87	F	3/19/2021	3/20/2021	Death

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4/6/2021	1172708	CO	64	M	3/30/2021	4/3/2021	No acute symptoms after vaccine except a mildly sore arm. Patient died 4 days later
4/6/2021	1172711	NC	90	M	3/27/2021	3/29/2021	@nd dose Pfizer on March 27 without immediate problems. Had sudden collapse on March 29, found to have large intracerebral hemorrhage; at local hospital after discussion placed on comfort measures only; died 04/02/2021
4/6/2021	1176374	HI	58	M	2/24/2021	3/4/2021	sore arm, lethargy, chronic fatigue, fever, fluid on lungs, lack of oxygen, death Husband received first dose of MODERNA vaccine on 1/30/21. Mild side effects. Received second dose on 2/24/21. For the first week after the second dose, the side effects seemed normal. By the second week he was gasping for air. Rused to ER via ambulance on 3/9/21. High heart rate, poor oxygen. Received numerous blood transfusions over 3-days (typical treatment for his blood disorder), yet body would not retain the transfused products. Died on 3/12/21 at 4:35 am from cardia arrest caused by respiratory failure.
4/6/2021	1176372		92	M	3/10/2021	3/31/2021	Narrative: Per law enforcement report, patient's death appears to be natural causes. Wife found 91 yo patient on the floor having seizures. Patient was treated for seizure disorder and had recent Primary Care visit with updated labs. Seizure medication lab monitoring was monitored with no concerns.
4/6/2021	1173977	VA	85	M	3/30/2021	3/31/2021	after receiving his initial dose the next day he seemed to have suffered a TIA that took almost a week for him to recovery from. He was confused, no appetite, weak, and generally not himself. Prior to receiving his second dose he was alert, eating, no complaints of any discomfort or issues. The next day following his second dose he passed away from what we think was a massive heart attack. As a family we feel his weakened state contributed to this and not the fault of the vaccine but felt it important to notify you in case individuals such as patient should be monitored in a different way or use a different vaccine.

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4/6/2021	1173826	TX	92	F	3/9/2021	3/20/2021	Pt received the vaccine on 3/9/2021 reports to ED on 3/19/2021 s/p fall while transferring from wheelchair no fractures on x-ray, sent home at 2246. started to c/o chest pain and shortness of breath. Went into cardiac arrest at home approximately 4 hours after leaving ER. Pt was pronounced DOA 3/20/201 @ 0343
4/6/2021	1173788		73	M	4/1/2021	4/2/2021	had second vaccine on 4/1/21, expired 4/2/21
4/6/2021	1173602	NY	73	M	2/23/2021	3/1/2021	Passed away on the sleep; A spontaneous report was received from a pharmacist concerning a 73-years-old male patient who received Moderna's COVID-19 vaccine and passed way on the sleep/death. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. The patient received their first of two planned doses of mRNA-1273 (lot number: 024M20A) on 23 Jan 2021. On 23 Mar 2021, patient received second of two planned doses of mRNA-1273 (lot number: 047A21A) intramuscularly for COVID-19 prophylaxis. On an unknown date in Mar 2021, the patient passed away on the sleep. The patient received both scheduled doses of mRNA-1273 prior to the event therefore, action taken with the drug in response to the event was not applicable. The patient died on the sleep on an unspecified date in Mar 2021. The cause of death was unknown. Plans for an autopsy were unknown.; Reporter's Comments: This case concerns a 73-years-old, male patient, who died. The cause of death was unknown. Plans for an autopsy were unknown. Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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4/6/2021	1173591	OH		M			Died; A spontaneous report was received from a consumer concerning a male patient of an unknown age who received Moderna's COVID-19 vaccine (mRNA-1273) and died. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unknown date, prior to onset of the event, the patient received their dose of mRNA-1273 (lot/batch number: unknown) for prophylaxis of COVID-19 infection. On an unknown date, the patient died. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on an unspecified date. The cause of death was unknown. Plans for an autopsy were unknown.; Reporter's Comments: Very limited information regarding the event has been provided at this time and is insufficient for causality assessment. The cause of death was unknown. Plans for an autopsy were unknown. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
4/6/2021	1172981	RI	83	M	2/16/2021	2/25/2021	Pt developed dyspnea and decompensated due to underlying metastatic adenocarcinoma of lung and large pericardial effusion which caused cardiac tamponade ultimately causing him to succumb.
4/6/2021	1172840	MO	82	F	4/2/2021	4/3/2021	She received vaccination at 1430 hrs on April 2. Died in her sleep that night...sometime between 2200 hrs April 2 and 0600 hrs April 3.
4/6/2021	1173746	NC	61	M	3/20/2021	3/26/2021	Received first dose 2/27/21 and received second dose 3/20/21 and died 3/26/21.
4/6/2021	1176373		63	M	3/9/2021	3/26/2021	Death Narrative: Patient with gastric cancer received COVID-19 vaccine, first dose on 2/8/2021 and second dose on 3/9/2021. Chart note indicates that patient passed away on 3/26/2021 while on home hospice. Patient has never tested positive for COVID. Patient had metastatic cancer and was referred to hospice on 3/5/2021, note from provider indicates patient likely had only weeks to live. Patient had no documented reaction from COVID vaccine administration. Patient had no hospitalization around time of COVID vaccination. The patients most likely cause of death was the metastatic cancer, with date of death closely aligning with cancer providers' estimations of remaining life span on 3/5.

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4/6/2021	1171546	IA	67	F	2/15/2021	3/5/2021	The patient had and a known SARS-CoV-2 vaccine sometime in February 2021. she then started having a mild diarrhea and some nasal congestion early in March 2021 and she had abrupt passing away on 3/5/2021. Autopsy was not performed.
4/5/2021	1168641	FL	26	M	2/25/2021	2/26/2021	Death.

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4/5/2021		1168291	IL	71	M	3/30/2021	4/5/2021	3/22/21 Admission HPI: 71 y.o. male with a history of poorly controlled diabetes mellitus and COPD. He presented to my office today acutely with a several day history of increasing shortness of breath. He has increased his prednisone at home recently and been increasing the frequency of his DuoNebs. Despite this, he states that his oxygen saturations have been staying in the low 80s. He has a hard time walking due to the shortness of breath. He states previous to about a week ago he was doing very well. He denies any fever. He denies any known exposure to coronavirus (COVID-19). In the office today his oxygen saturations were 88% on 4 L. Because of his failure of outpatient therapy, he will be admitted to the hospital for further evaluation and treatment. This patient has a history of severe respiratory decompensation that happens very quickly. Therefore, it is medically urgent we get him into the hospital. 3/25/21 Admission HPI 71 y.o. male with a known history of severe COPD and type 2 diabetes mellitus. He came to my office with a several day history of increasing shortness of breath. He had increased his oral steroids and breathing treatments at home and despite this was still having oxygen saturations in the low to mid 80s on 2-4 L of supplemental oxygen. In my office he was extremely diminished and had basically failed outpatient therapy. Therefore he was admitted to inpatient status for acute treatment of a severe COPD exacerbation requiring IV antibiotics and IV steroids. He was admitted and treated with IV treatments. He did recover nicely. However, he was found to be extremely physically deconditioned. Because of this he was thought to be an excellent candidate for swing bed and is being transitioned to swing bed. 4/5/21 ER Practitioner Note: Upon arrival to ED trauma room I found patient to be in cardiac arrest, CPR in progress. History is that EMS was called to the scene for a patient with chest pain. Shortly after arrival at his home patient developed a cardiac arrest. They followed standard ACLS protocol and the patient was intubated. Blood sugar normal. As CPR was given, medications were administered consisting of epinephrine and 1 mg in 2 different doses along with 1 amp of bicarb. IV access via an IO. Patient was then transported to the emergency department. Upon arrival, CPR was continued and oxygen supplied via endotracheal tube with good tube placement verified

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						by auscultation and good sat readings. Monitor was placed and patient demonstrated initially a sinus rhythm but there was no pulse. Therefore, diagnosis was PEA and no reversible causes were identified. ACLS protocol was followed with epinephrine 1 mg IV every 5 min. He received a total that including EMS, 5 mg of epinephrine and 1 amp of bicarb. Monitor at this point revealed the rhythm changed to an agonal rhythm. When CPR was given, there was good results from the CPR. However, CPR discontinued and there is no pulse and patient had an agonal rhythm for several minutes, pupils were fixed but not dilated year. Lungs demonstrating clear bilateral breath sounds when he was bagged via the endotracheal tube. No external signs of any trauma noted. The patient's sister is here and she is a registered nurse. We had discussed management at this point with her and all were in agreement that the code be terminated. At 1015, patient was pronounced deceased.. ACLS protocol was followed. See nursing record for medication and vital sign details. Code outcome: Deceased CC time 20 minutes.
4/5/2021	1168352	CO	63	M	3/26/2021	3/26/2021 Started feeling ill a few hours after vaccination. Became increasingly ill over the next few days with nausea and vomiting, severe diarrhea, leg cramps that progressed to where he was not able to ambulate, flushed, confused.
4/5/2021	1168503	MN	86	F	2/10/2021	3/17/2021 reports death due to age and dementia
4/5/2021	1168598	WV	61	F	4/4/2021	4/5/2021 Patient passed away the morning after receiving her second COVID vaccine.
4/5/2021	1168691	MN	73	F	2/19/2021	3/24/2021 Patient death within 60 days of receiving the COVID vaccine series
4/5/2021	1168645	MN	70	F	3/10/2021	3/24/2021 Patient death within 60 days of receiving the COVID vaccine series
4/5/2021	1168254	IA	83	F	3/25/2021	4/1/2021 Patient was given vaccine on 03/25/21. On 04/01/21 patient found in yard and brought to ER, then transferred via air to ER. Patient had concussion due to fall, pneumothorax, and PEA episode. Chest tube placed in the ER, Comfort cares then administered per family request with patient passing that day.

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4/5/2021	1167407	CO	66	M	4/3/2021	4/3/2021	Patient was involved in a single plane crash on the evening after receiving second vaccine dose
4/5/2021	1168622	WI	86	F	4/1/2021	4/1/2021	Pt started late in the day w/ CP and SOB, was transported to Hospital by EMS . Pt passed away once at the facility. Time of Death was: 2011 on 4/1/21; pt was discharged from ER on 4/2/21
4/5/2021	1168240	MO	50	M	3/18/2021	3/23/2021	Patient deceased 3/23/21 due to suicide.
4/5/2021	1168221	IL	78	F	1/27/2021	3/17/2021	ER HPI: 78 y.o. female who presents with respiratory distress. Patient is transported to the emergency room via emergency medical services from local long-term care facility. Patient is unable to give any history due to acuity and severity of current condition. On arrival to the emergency room patient is in obvious distress she is hypertensive with a blood pressure of 74/51 she is tachycardic with a rate of about 140 she is tachypneic with a rate of the 29th at 30 her oxygen saturation on a non-rebreather are 82% and her temperature is 102.9°. FINAL IMPRESSION ICD-10-CM ICD-9-CM 1. Septic shock (HCC) A41.9 038.9 R65.21 785.52 995.92 2. Aspiration pneumonia of right lower lobe due to gastric secretions (HCC) J69.0 507.0 3. Acute hypoxemic respiratory failure (HCC) J96.01 518.81
4/5/2021	1168198		82	M	2/19/2021	3/25/2021	Patient was hospitalized x 3 and died within 60 days of receiving a COVID vaccine series

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4/5/2021	1168142	IL	72	F	3/8/2021	3/17/2021	ER 3/17 HPI: 72 y.o. female who presents with generalized weakness and not feeling well. Patient states that she had her 1st dose of COVID-19 vaccine about a week ago and since then has not felt well. She denies fever or chills, she denies any arthralgias or myalgias, she has had some nausea and vomiting but none in the last couple of days. There has been no diarrhea. There have been no urinary symptoms. 3/22/21 Inpt Admission hpi 72 y.o. female who presents with shortness of breath and hemoptysis. Patient has known history of COPD and also has a history of squamous cell carcinoma of the lung that is in remission. Patient reports she has noticed increasing shortness of breath for the past several weeks. She states she got worse around the noon time today. Patient reports she began having some hemoptysis today. Patient denies any chest pain or palpitations. Patient denies any fevers or chills. Patient denies any sinus congestion or nasal drainage. Patient denies any headaches, myalgias, or loss of sense of taste and smell. Patient does report a 4 day history of intermittent diarrhea. She denies any nausea or vomiting. Patient has had COVID-19 vaccination. Of note, patient's family reports she has lost 10 lb in the past 30 days. 3/30/21 Deceased
4/5/2021	1167965	IN	75	F	3/4/2021	3/8/2021	Patient called PCP office 3/5 w/ c/o N/V/D, weakness and lightheaded when she stood up. Was advised to hold blood pressure medication. On 3/8, was feeling much worse and called 911. Upon arrival (8:55), patient A&O x 4 with poor oxygen saturation (O2: 88%). Given nebulized albuterol/ipratropium. BG: 247mg/dl. Patient has episode of dry heaving after which she vagaled down with HR in the 40s. Recovered on her own. Once the nebulizer treatment ended, she was placed on nasal O2 at 3 liters/minutes. Given 4mg ondansetron. Lost consciousness and respirations became agonal. Pt was bagged via BVM and noted to be in PEA. CPR initiated, including intubation. Given 1mg epinephrine. NSR obtained after two rounds of CPR. Pt arrested again shortly after arrival to ED. ACLS initiated once more. Patient expired at 10:40 am.
4/5/2021	1167930	MN	90	M	2/12/2021	3/25/2021	Patient death within 60 days of receiving the COVID vaccine series

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4/5/2021		1167886	MI	79	F	3/10/2021	3/24/2021	<p>Patient vaccinated against COVID-19; received COVID-19 Janssen vaccine on 3/10/2021. Patient developed symptoms last week of March. Called Provider with symptoms and then presented to the hospital (admitted on 4/1/2021). Tested for COVID and found to be positive. 4/1/2021. Patient declined, admitted to ICU on 4/3/2021. Patient died on 4/4/2021. Chief Complaint: HPI: Patient is a 79 y.o. yr. old female who presents today for COUGH (has had cough for a little over a week) and FEVER (on and off for about a week)Patient was seen due to feeling ill for over week. Patient states that she was trying to fight it on her own but symptoms have been progressing. Patient has felt feverish no known fevers. Has had a persistent now worsening cough. Patient is feeling very tired and weak due to being sick for over week. Patient does live alone. Patient is coughing which is productive with sputum. Patient is eating and drinking well. No N/V/d. No loss of taste or smell. No recent ill exposure.; Has had covid vaccine. Patient did get the Johnson and Johnson vaccine over a month ago. Patient is feeling very fatigue; Having feverish/chills. Patient is taking OTC nightquil which is no longer helping. Patient does see oncologist for her CLL. DISCHARGE DIAGNOSIS: 1. Deceased 2. COVID-19 with hypoxia 3. Asthma 4. Anemia DETAILS OF HOSPITAL STAY: PRESENTING PROBLEM: COVID-19 HOSPITAL COURSE: Patient is a 79 year old female who was admitted on 04/01/2021 for COVID-19 pneumonia with complications of hypoxia. Patient's symptoms of cough and shortness of breath have been present for approximately 2 weeks. It was noted that 1 month ago she did receive the Johnson & Johnson vaccine. Upon admission patient was treated with azithromycin, Rocephin to cover for secondary bacterial infection. She was not a candidate for remdesivir due to the length of her symptoms. She was started on Decadron, as well as gentle fluids due to tachycardia for approximately 12 hours. During the night of 4/2-4/3 patient progressively declined requiring more oxygen she was transferred to the intensive care unit. Patient was a do not resuscitate continued decline and after exacerbating all treatment options patient was switched to comfort care earlier this evening. Pronounced dead at 6:45 a.m.</p>

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4/5/2021	1167363	CA	76	M	1/15/2021	1/15/2021	On December 30th my father tested positive for COVID. He was reported asymptomatic by the care facility staff. He was given vaccine on Jan 14th and began feeling ill that evening. The morning of the Jan 15th the nursing facility had my father admitted to emergency and then to ICU. He stayed in the hospital for 10-14 days and then was released on hospice at the senior care facility. He passed away on Jan 31st. I'm not sure if the sudden change in my father's health was due or made worse due to the COVID vaccine as the hospital was treating several symptoms, but the timing seems suspicious. I have also not been able to get an explanation for why he was given a vaccine if he tested positive. I do not know which vaccine was given, but needed to select one to submit the form.

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4/5/2021		1168978	IL	74	M	1/28/2021	2/23/2021	<p>hypertrophic cardiomyopathy; he just suddenly fell; lost his sense of taste; excruciating pains all over his body; General body aches like he got ran over by a truck/excruciating pains all over his body; Headache; Chills; Fever; Nausea; Pain; Based on the current available information which includes a strong temporal association between the use of the product and onset of the events, and excluding other etiologies, causal relationship cannot be excluded..This spontaneous case was reported by a consumer and describes the occurrence of hypertrophic cardiomyopathy in a 74-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 030M20A and 007M20A) for COVID-19 vaccination. The patient's past medical history included Angiogram (Was told they had an excellent heart and no surgery was needed) Concomitant products included acetylsalicylic (E.C.) for an unknown indication. On 28-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 23-Feb-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) dosage was changed to 1 dosage form. On 23-Feb-2021, the patient experienced pain, headache, chills, fever and nausea. On 24-Feb-2021, the patient experienced lost his sense of taste, excruciating pains all over his body and myalgia (general body aches like he got ran over by a truck/excruciating pains all over his body). On 06-Mar-2021, the patient experienced hypertrophic cardiomyopathy (seriousness criterion death) and he just suddenly fell.. An autopsy was performed. Consumer reported on behalf of spouse. Ambulance was called and patient was pronounced dead. Awaiting toxicology report. Most recent FOLLOW-UP information incorporated above includes: On 26-Mar-2021: Major narrative update - outcome of events, additional events reported; Sender's Comments: Based on the current available information which includes a strong temporal association between the use of the product and onset of pain, headache, chills, fever , nausea, loss of sense of taste, excruciating pains all over his body and myalgia and excluding other etiologies, causal relationship cannot be excluded. There is not enough details to assess the fatal event of hypertrophic cardiomyopathy and the administration of the product. Additional information has</p>

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								been requested.; Reported Cause(s) of Death: hypertrophic cardiomyopathy
4/5/2021		1168793		75	M	3/1/2021	3/7/2021	Death Narrative: Death on 03/07/2021. 2nd dose administered 6 days before serious event. No data about cause of death available. Pt was dx Iron deficiency anemia and had been scheduled to have a diagnostic colonoscopy. No indication that death was related to the vaccine.
4/5/2021		1167899	MN	79	F	2/9/2021	3/26/2021	Patient death within 60 days of receiving the COVID vaccine series
4/5/2021		1169181	VT	79	M	3/13/2021	3/16/2021	Wife reported that no side effects from vaccine noted until 3/16/2021 when patient had arm and back pain and wanted to go back to bed and she noted he was extremely sweaty at that time. He was lifted back to bed and was repositioned several times because he could not get comfortable. She went to get him a drink from the kitchen and heard a guttural sound and rushed back to find him unresponsive and blue in color. She called "911" and patient was dead upon arrival (and a DNR) so the Medical examiner arrived and pronounced him dead. She states sx started at about 4pm and he was pronounced dead at about 5pm. Medical examiner determined a heart attack cause of death. The family not sure that the vaccination had anything to do with death but wanted it to be reported.
4/5/2021		1168794		68	M	2/3/2021	3/21/2021	Death Narrative: Death on 03/21/2021. 2nd dose administered 46 days before serious event. Patient had been admitted to the hospital for AMS of unknown etiology concerning for sepsis with multiple sources and was on comfort care measures only. There are no indications that death was related to the vaccine.

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4/5/2021	1170447	WI	84	F	2/25/2021	2/25/2021	Patient fully recovered from natural SARS-COV-2 infection in early December 2020. Patient was doing quite well between mid December and mid January. Patient was hospitalized with congestive heart failure in late January 2021. Received first dose of Moderna COVID19 vaccine shortly before being discharged around February 1 (not sure of exact date). Patient was feeling well at that time. Patient became quite ill within 24 hours of Moderna COVID19 vaccine. Patient steadily worsened during February 2021. Was hospitalized in mid February (unsure of date) and diagnosed with kidney failure and liver disease. Congestive heart failure rapidly worsened and previously stable leukemia flared up. Patient was discharged from hospital February 19 and was placed in quarantine at Care Center. Patient was considered terminal and was to go into hospice care. Patient was administered second COVID19 vaccine on February 25, rapidly deteriorated, and died on March 1.
4/5/2021	1169913	TN	77	M	3/13/2021	3/26/2021	none noted or reported after the injection
4/5/2021	1169895	OR	67	M	3/31/2021	3/31/2021	Death; 48 hours after vaccine
4/5/2021	1169796	NY	81	F	2/7/2021	2/21/2021	4/2020 presumed COVID-19 (not formally diagnosed, not hospitalized) 2/07/21 Moderna vaccine #1 (date per pt's daughter) 2/21/21 onset SOB/DOE, fever 2/24/21 Seen at Urgent Care: RML crackles and infiltrate on CXR, given azithromycin and Augmentin 2/27/21 Presented to ED with progression of SOB/DOE, fatigue, diarrhea. Hypoxemic requiring low-flow NC, B/L basilar crackles noted; started on CTX/azithro (2/27-3/3) for presumed CAP 3/08/21 Required HFNC; first seen by me personally: diffuse, distinct velcro crackles, lower > upper fields 3/12/21 Started on high-dose steroids without improvement; unable to wean from HFNC with progressively worsening hypoxemia; pt declined intubation. 03/22/21 Patient died in Palliative Care Unit Diagnosis: Interstitial lung disease of uncertain etiology, acute interstitial pneumonitis vs. undiagnosed connective tissue disease
4/5/2021	1169683	WI	77	F	2/25/2021	2/25/2021	Within 5-10 hours of the second dose: nausea, vomiting, chills, fever, fatigue. Chills, fatigue and nausea continued for 10 days until death

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4/5/2021	1169650	TN	46	M	3/13/2021	3/13/2021	DIFFICULTY BREATHING, SEVERE CHEST PAIN, STOMACH ACHES, HEADACHE, JOINT PAIN WENT TO EMERGENCY ROOM THAT EVENING ON 3/15/2021 WENT TO BED WITH CHEST PAIN AND DID NOT WAKE UP THE NEXT MORNING PARAMEDICS WERE UNABLE TO REVIVE HIM, PRONOUNCED HIM DEAD AT THE SCENE.
4/5/2021	1169619	MS	59	F	1/21/2021	1/22/2021	Telephone call received from client who reports she received vaccine yesterday and is now having a sore arm and pressure in her ears. Also stated she had sinus infection for a month. Having buzzing in her ears but not sure if buzzing or "shot". Stated at work at time of this report and just wanted to report.
4/5/2021	1169518	MI	59	F	3/31/2021	3/31/2021	This report is being submitted following a periodic review of death certificates. Death certificate for this individual indicates "recent COVID vaccine" in "PART II. OTHER SIGNIFICANT CONDITIONS contributing to death but not resulting in the underlying cause~~
4/5/2021	1169170	OR	83	F	3/27/2021	3/28/2021	3/30/21 AM = (Patient's notes) "Chest/breast PAIN throughout night and (previous) day. Pain continuously in back last two (2) days. Nauseated, weak bladder every hour or so. No appetite. 1st Covid shot 3-27.

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4/5/2021	1169011	FL		U			<p>one friend got COVID after the shot and has passed away; A spontaneous report was received from a consumer concerning a female patient of an unknown age who received Moderna's COVID-19 vaccine and got COVID after the shot and has died/COVID-19. The patient's medical history was not provided. Concomitant product use was not provided by reporter. On an unknown date the patient received their first of two planned doses of mRNA-1273 (Batch number not provided) for prophylaxis of COVID-19 infection. Reporter mentioned that her friend got COVID after the shot and has died. No treatment information was provided. Action taken with the second dose of mRNA-1273 in response to the event death is not applicable. The patient died on an unknown date. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: A case of death of female patient of an unknown age who developed COVI on an unknown date post mRNA-1273 (vaccination (lot unknown) and died. Very limited information regarding this event/s has been provided at this time. However, based on the known etiology of COVID and the established profile of mRNA-1273, the event is assessed as unlikely related to mRNA-1273 administration. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death</p>

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4/5/2021	1168960	NY		U			<p>GOT THE VACCINE AND DIED 24 HOURS LATER; This spontaneous report received from a consumer concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient died 24 hours later vaccination. Cause of death was not reported. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0:20210350465-covid-19 vaccine ad26.cov2.s-Got the vaccine and died 24 hours later. This event(s) is considered unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s); Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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4/5/2021		1168970	NJ	95	F			<p>ATRIAL FIBRILLATION; INABILITY TO SWALLOW; BLOOD CLOT IN RIGHT ARM; LOW BLOOD PRESSURE; DEATH 4 DAYS AFTER RECEIVING VACCINE; This spontaneous report received from a vaccine facility via a company representative concerned a 95-year-old female. The patient's height, and weight were not reported. The patient's concurrent conditions included atrial fibrillation. The patient received COVID-19 VACCINE AD26.COV2.S (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, administered on 2021 for prophylactic vaccination. No concomitant medications were reported. The batch number was not reported and has been requested. It was reported that on an unspecified date in 2021 the patient received Janssen Covid-19 Vaccine and within 6hrs she had a major atrial fibrillation episode, then several the following day. The next day, she lost her ability to swallow. Two days later she was on oxygen. Three days later she developed a blood clot in her right arm, was still on oxygen and blood pressure was falling. On an unspecified date, the patient died 4 days after receiving vaccine. The action taken with COVID-19 VACCINE AD26.COV2.S was not applicable. The patient died 4 days after receiving vaccine on an unspecified date, and the outcome of atrial fibrillation, inability to swallow, blood clot in right arm and low blood pressure was not reported. This report was serious (Death, Hospitalization Caused / Prolonged, and Other Medically Important Condition).; Sender's Comments: V0: 20210400509: This spontaneous report received from a vaccine facility via a company representative involved a 95-year-old female with the past medical history remarkable for atrial fibrillation who received the Janssen COVID-19 Vaccine for prevention of COVID-19 infection and within 6hrs had a major atrial fibrillation episode. No concomitant medications were reported. The next day, she lost her ability to swallow. Two days later she was on oxygen. Three days later she developed a blood clot in her right arm, was still on oxygen and blood pressure was falling. On an unspecified date, the patient died 4 days after receiving vaccine. No information was provided regarding the cause of death. Considering the patient's past medical history of atrial fibrillation, the causality for the event of atrial fibrillation, as well the consequent events is assessed not related to the</p>

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								Janssen COVID-19 Vaccine.; Reported Cause(s) of Death: DEATH 4 DAYS AFTER RECEIVING VACCINE
4/5/2021		1170462	NV	56	M	3/31/2021	4/5/2021	Presented with rash and malaise "since I got my COVID shot". Rash red raised macular t/o body
4/5/2021		1168851		83	M	1/3/2021	3/4/2021	Death Narrative: Death on 03/04/21. 2nd dose of the vaccine was given 2 months before severe event. There is no indication that death was related to the vaccine. Patient was admitted to facility for hospice care when he passed.
4/5/2021		1168833		64	M	12/17/2020	12/27/2020	Death Narrative: Death on 12/27/20. 1st dose 10 days before serious event. Patient was admitted for hospice care at the facility with bladder cancer with mets to liver, lung, and bone. There are no indications that death was related to the vaccine.
4/5/2021		1168815		78	F	1/6/2021	1/25/2021	Death Narrative: Death on 01/25/2021. 2nd dose administered 19 days prior to severe event. Patient had diagnosis of malignant pulmonary process with a terminal prognosis. There are no indications that death was related to the vaccine.
4/5/2021		1168799		70	M	1/6/2021	2/10/2021	Death Narrative: Death on 02/10/2021. 2nd dose 28 days prior to serious event. Patient was admitted to facility for ALS and was on mechanical ventilation at time of death. No indications that death was related to the vaccine.
4/5/2021		1168795		81	M	12/17/2020	12/22/2020	Death Narrative: Death on 12/22/20. 1st dose administered 5 days prior to serious event. Patient passed of chronic illness while in facility. There are no indications that death was related to the vaccine.
4/5/2021		1169584	NC	50	F	4/2/2021	4/3/2021	Patient appeared in no distress the day after vaccination other than complaint of nausea. It is unclear but patient expired sometime the night of 4/3/21 or early morning of 4/4/21

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4/4/2021	1166062		0	M	3/17/2021	3/18/2021	Patient received second dose of Pfizer vaccine on March 17, 2020 while at work. March 18, 2020 her 5 month old breastfed infant developed a rash and within 24 hours was inconsolable, refusing to eat, and developed a fever. Patient brought baby to local ER where assessments were performed, blood analysis revealed elevated liver enzymes. Infant was hospitalized but continued to decline and passed away. Diagnosis of TTP. No known allergies. No new exposures aside from the mother's vaccination the previous day.
4/4/2021	1166300	PA	61	M	2/25/2021	2/25/2021	Note: I AM reporting this because I strongly believe that patient's death was caused by his second COvid-19 vaccine. The exact date of the vaccine is unknown. His girlfriend told me he got his second Vaccine at the end of February. I also don't know what vaccine (Moderna or Pfizer) he got, so the Pfizer is just a guess. Patient started feeling bad and looking bad after his second vaccine. He complained that he wasn't feeling well and missed appointments saying he wasn't feeling well during the two weeks or so between the time of his second vaccine and his death.

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4/4/2021	1166023			M			<p>killed himself; tinnitus; contracted the virus; contracted the virus; This is a spontaneous report from a non-contactable nurse. A male patient of an unspecified age received BNT162B2 (Pfizer-BioNTech COVID-19 vaccine, lot number and expiry date unknown), via an unspecified route of administration on an unspecified date as a single dose for COVID-19 immunization. Medical history included COVID-19 on an unknown date. The patient's concomitant medications were not reported. It was reported that the patient, contracted the virus and developed tinnitus after receiving the vaccine and killed himself. The outcome of the event tinnitus and contracted the virus was unknown. The patient died on an unspecified date. It was not reported if an autopsy was performed. No follow up attempts are possible; information about lot number/batch number cannot be obtained.; Sender's Comments: Based on the information currently available, a causal association between the reported event tinnitus and BNT162B2 cannot be excluded. Drug ineffective depends on many factors including pharmacokinetics, patient general health condition and immunity system function. However on conservative basis, the possible causality cannot be excluded. The event "killed himself" is not related to BNT162B2. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and investigators, as appropriate. ; Reported Cause(s) of Death: killed himself</p>

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4/4/2021	1166778	PA	85	M	4/1/2021	4/1/2021	Patient had chills the night after the vaccine and throughout the night pulse ox dropped to 88, given 3L O2. Pt had little sleep and the next day had no appetite pulse ox between 88-90. After dinner had severe chills, no fever ,extreme SOB , pulse ox down to 79, coughing up blood tinged sputum, fluid in lungs, anxious. EMT called sent to hospital confirmed to have had an MI and new onset CHF, enzymes elevated, creat 1.8. Transferred to hospital and was stable. The next day still SOB, enzymes lessening, trying to wean from O2. The nurse attempted to get the pt to the bathroom he became extremely SOB and became unresponsive. They attempted CPR and the pt expired shortly thereafter due to another MI.
4/4/2021	1166865	FL	83	F	3/1/2021	3/1/2021	After first vaccination mom was tired in bed flu symptoms for a few days. Had MG symptoms come back and talked to her Dr. Went for 2nd vaccination and very tired & had Severe MG symptoms dr said to take then stop taking Mestinon as she continued getting sicker he called and said not to get any therapeutic drugs called Solaris not to see a dr and she died few days after.
4/4/2021	1167042	NY	82	F	1/19/2021	1/28/2021	Severe tiredness/lethargy started on 01/28/2021. Died at home around noon on 01/29/2021.

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4/4/2021	1166447	CA	75	M	3/10/2021	3/14/2021	Pfizer-BioNTech COVID-19 Vaccine EUA Pt received 1st dose vaccine 2/17/2021, 2nd dose vaccine 3/10/2021. Had been on warfarin since 2015, unclear if pt had been taking atorvastatin (last refill was 2019 according to Dr, Adult Primary Care clinic). Pt was last seen normal by his wife at approximately 1030am, out in the yard. She went out at approximately 1130 am and found him down on the ground. Pt was brought in by paramedic to ER. IN ER, score =22, aphasic, R hemiplegic, CT scan of head showed large parenchymal hematoma in L basal ganglia with small SAH plus 2 mm L to F subfalcine midline shift. Pt was intubated in ER for airway protection after an episode of vomiting. In ER, pt was given - Vitamin K 10 mg IV x1, Levetiracetam 1500 mg IV x1, Nicardipine infusion, 4-factor PCC (KCentra) 3500 unitsx1, Sodium chloride 3% infusion, pantoprazole 40 mg IV x1, Ondansetron 4 mg IVx1. After intubation, pt also received propofol infusion, and admitted to CCU. 3/15 Repeat CT head showed expansion of hematoma associated with midline shift. 3/16-3/17 transfer to hospital was arranged, pt remained unresponsive. 3/18-3/19 comfort care
4/3/2021	1163093	CA	92	F	3/30/2021	3/31/2021	On the morning of 3/31/2021 patient had chills, she seemed to develop a cold, she was achy and not wanting to eat. She was very sleepy and by 6:00 P.M. she passed away.
4/3/2021	1168104	VA	38	F	3/2/2021	3/18/2021	Pfizer COVID Vaccine treatment under Emergency Use Authorization(EUA): Vaccination received 3/2/2021. On 3/16/2021, maternal cardiac arrest, terminal fetal bradycardia, emergent C-section. Likely amniotic fluid embolism and DIC.

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4/3/2021		1162419	FL	92	F	2/4/2021	2/4/2021	Failing health since vaccine; she does not want to eat; She slept probably five hours during the day; She got up and she does not want to eat, she took a nap, she changed chairs and she took a nap; Her health has declined each day; She has more fatigue every day; In constant pain; Lost 20 LBS.; became weak and lightheaded; became weak and lightheaded; her immune system began to shut down; The initial safety information received was reporting only non-serious adverse drug reaction. Upon receipt of follow-up information on 26Mar2021, this case now contains serious adverse reactions. Information processed together. This is a spontaneous report from a contactable consumer. A 92-year-old female patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration administered in Arm on 04Feb2021 at 12:30 (Batch/Lot Number: EN5318) as single dose for COVID-19 immunization. Medical history included ongoing diabetes, arthritis and thyroid, all three for 10 plus years; and bladder. Concomitant medication included ongoing methotrexate and meloxicam taken for arthritis; metformin taken for diabetes; mirabegron taken for bladder; and levothyroxine taken for thyroid, all from an unspecified start date and ongoing. The patient received the vaccine on 04Feb2021 (reported as last Thursday afternoon) and everyday since then her health has declined each day. She has more fatigue every day and lightheaded. Her immune system began to shut down (several blood draws taken). She just wanted little afternoon nap. On Saturday, she wanted to do very little 'aero' (word not clear), very little just the minimum. She get up, she had a little breakfast, and as I live near a little pond, she watched the water and birds. And then yesterday, she slept probably five hours during the day and today that is all she has done, she got up and she does not want to eat, she took a nap, she changed chairs and she took a nap. She is now in her bedroom and taking another nap and this is not my mother. The patient was still alive but in failing health since the vaccine. The patient is now bedridden, lost 20 pounds (lbs) and was in constant pain. The patient was fine, walking and even dancing prior to vaccine. The outcome of the events "Her health has declined each day" was not recovered while unknown for the other events. The patient died from vaccine on 15Mar2021. The autopsy was not done.

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								Follow-Up (02Apr2021): Follow-up attempts are completed. No further information is expected.; Reported Cause(s) of Death: Failing health since vaccine
4/3/2021		1163141	CO	74	F	3/31/2021	4/1/2021	Tongue swelling, feeling hot (no temperature taken)
4/3/2021		1163369		84	M	2/12/2021	2/22/2021	Blood clots
4/3/2021		1163428	PA	58	M	3/9/2021	3/24/2021	Began with weakness of March 24th and stroke- like symptoms despite a clear CT Scan and EKG. Trouble walking or staying awake. Heart stopped on March 28th. Deceased.
4/3/2021		1163967	MA	73	F	3/26/2021	3/30/2021	Felt crummy on day one and two better on day three and on day four developed four blood clots on Coumadin with an INR of 4.5 and died the next day on 3/31/2021.
4/3/2021		1164535	NY	85	M	3/28/2021	3/28/2021	The patient presented for his second Pfizer Covid-19 vaccination on 28MAR2021. On his way into the Vaccination Center, he was blown over by high winds sustaining a blow to his right forehead with small abrasion and a 3x4cm subcutaneous hematoma. He was assisted to a wheel chair and brought into the EMT booth for further assessment. He was awake and alert and oriented during his time with us. He never lost consciousness . He vigorously requested to receive the Covid-19 vaccination which we complied with. Due to the mechanism of injury and use of an anticoagulant, he was subsequently transfered to Hospital for further assessment and care. We heard on 4/3/21 of his death.
4/3/2021		1165014	OH	75	M	3/17/2021	3/18/2021	My dad had the first shot of the covid vaccine and less then 24 hours later he went into cardiac arrest. He spent 10 days in ICU and we had to remove him from life support and he survived another 6 days suffering until he past in April 3rd
4/3/2021		1165132	OR	70	F	4/2/2021	4/3/2021	Death; had vomited and was found unresponsive and covered in stool, intubated and then went in to PEA in the field and passed despite lengthy resuscitation.
4/3/2021		1165154	OH	46	M	3/12/2021	3/30/2021	My husband died 18 days after the shot
4/3/2021		1163843	NY	77	F	3/4/2021	3/14/2021	It was reported that patient died on 3/14/2021. This may have had nothing to do with the vaccine.

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4/2/2021	1159118	CT	69	M	3/29/2021	3/31/2021	Patient died at home in the night of 03/30/21 to 03/31/2021. Time of death unknown.
4/2/2021	1160361	FL	76	F	1/14/2021	1/24/2021	Respiratory distress, led to heart failure, and ultimately death of patient
4/2/2021	1160240		103	M	2/21/2021	3/27/2021	Hospice Patient death within 60 days of receiving the COVID vaccine series
4/2/2021	1160227	AK	85	F	3/17/2021	3/22/2021	death 5 days later
4/2/2021	1160210		79	F	1/22/2021	1/29/2021	Patient was a 79 yo F who presented to hospital on 1/29/2021. On admission patient was severely hypoxic with symptoms of SOB, cough, and severe dyspnea . The patient was COVID-19 positive on admission with symptoms starting 4 days prior to admission. Patient's labs on admission showed elevated ferritin, CRP, and d-dimer. Patient was diagnosed with COVID-19 infection with sepsis and respiratory failure with hypoxia. On arrival to hospital patient's O2 sats were in 60's and improved to upper 80s after nebulizer treatment. Patient was started on azithromycin 500mg once daily for 3 days, ceftriaxone 2g once daily for 2 days, dexamethasone 6mg once daily for 3 days, zinc 220 mg once daily for one dose, and duo-neb 3ml q4h for 3 days. Patient's respiratory status declined and was placed on BiPAP and comfort measures. The patient continued to decline until her passing on 2/3/2021.
4/2/2021	1160180		60	F	1/29/2021	3/27/2021	Long term care patient death within 60 days of receiving a COVID vaccine
4/2/2021	1159988	NY	86	F	2/18/2021	2/20/2021	Death
4/2/2021	1159900	MO	92	F	2/18/2021	3/3/2021	CVA (stroke) around 2:00 p.m., was immediately transported to hospital. Meds were given (I believe Alteplase, but would need to confirm.) 3 brain bleeds after medications. Patient passed away at 5:40 p.m.

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4/2/2021		1159573	TN	74	M	3/30/2021	3/31/2021	He received his vaccine, had soreness in his arm. Went to bed and around 2:00 AM his brother got a call from his dad (he lives upstairs from him in the same house) who said that something was wrong and he needed to go to the hospital. The brother found him sweating profusely, it appeared that the right side of his body was stiffening up, and they started to go out to the car to go to the hospital. He started to go limp and he collapsed and tried to revive him, they called 9-1-1 and they tried to revive him as well without success and he died.
4/2/2021		1160365		61	M	3/31/2021	4/2/2021	Death
4/2/2021		1159365	NY	66	M	3/27/2021	3/27/2021	My father received his second dose of the moderna vaccine on 3/27/2021. Around 5PM he started to feel unwell and went to lay down. My mom found him unresponsive at 10PM and called an ambulance. She was told at the hospital that he had a massive brain bleed. He passed away the following morning around 10AM.
4/2/2021		1159084	AR	74	M	3/31/2021	4/1/2021	Patient was found deceased on 4/2/21
4/2/2021		1158952	FL	51	M	2/18/2021	3/30/2021	Death of patient reported to have happened on 3/30/2021
4/2/2021		1159101	IA	84	M	3/25/2021	3/29/2021	My Father was ill for approx 3-4 days after first vaccine with fatigue and some minor chest pressure, this start approx 3 days after injection and had made a complete recover, he then recieved his 2nd vaccine shot and again 3-4 days later he again stated began having severe fatigue and mobility issues, (he stated his legs felt like jello), no chest pains and no breathing issues were associated. 3 days later he was still feeling the same with symptoms and on the 4 day he was found deceased in his home.
4/2/2021		1159535	AZ	29	F	3/31/2021	3/31/2021	Patient described myalgias, headache and dyspnea at ER visit on 4/1/21 at 2:37 am. Patient was discharged. Patient returned the same day at 15:40 cyanotic, altered, hypoxic and hypotensive. The patient was found to have profound metabolic acidosis, liver failure, renal failure. She went into cardiopulmonary arrest, was revived, rearrested and died. Patient was treated for possible sepsis, shock, liver failure.

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4/2/2021	1162137	PA		U			when the patient got really bad the patient died; This is a spontaneous report from a contactable consumer. A 92-year-old patient of an unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), via an unspecified route of administration on an unspecified date (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient experienced when the patient got really bad the patient died. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: when the patient got really bad the patient died
4/2/2021	1160526	PA	27	F	4/1/2021	4/1/2021	Death 5 hours after second shot. Decedent contacted her mother around 3:30 c/o difficulty breathing. Died on 4/1/20
4/2/2021	1158955	PA	71	F	3/26/2021	3/28/2021	Deceased
4/2/2021	1162930	CA	59	F	3/14/2021	3/15/2021	Patient died of a cerebral hemorrhage on 3/15/2021 at 11:30 AM.

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4/2/2021	1162124	TX	72	M	3/23/2021	3/23/2021	Death; Heart attack; Shortness of breath; This is a spontaneous report from a contactable consumer. A 72-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration at age of 72 years, at single dose on 23Mar2021 at 10:00 (Lot number was not reported) for COVID-19 immunisation. Medical history included asthma, penicillin allergy and she was diagnosed with COVID-19 prior to vaccination. Concomitant medications were not reported. The patient experienced death, shortness of breath and heart attack on 23Mar2021 at 20:30. And it was reported that the adverse event result in "Emergency room/department or urgent care" and patient was treatment with CPR. The patient did not receive any other vaccines within 4 weeks prior to the COVID vaccine and did not been tested for COVID-19 since the vaccination. Event outcome of events shortness of breath and heart attack was not recovered. The patient died on 23Mar2021 at 20:30. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Death

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4/2/2021	1161963	NY		M		3/1/2021	DEATH; CONFIRMED COVID-19 INFECTION; This spontaneous report received from a patient via a company representative concerned a male of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: UNKNOWN, expiry: UNKNOWN) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On MAR-2021, the subject experienced confirmed covid-19 infection. On 29-MAR-2021, the subject experienced death. Laboratory data (dates unspecified) included: COVID-19 virus test (NR: not provided) Positive. On 29-MAR-2021, the subject died from unknown cause of death. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. On an unspecified date, the patient died from unknown cause of death, and the outcome of confirmed covid-19 infection was not reported. It was unknown if an autopsy was performed This report was serious (Death, and Other Medically Important Condition).; Sender's Comments: V0: 20210358262-COVID-19 VACCINE AD26.COV2.S-Death, Confirmed Covid-19 Infection. This event(s) is considered Unassessable. The event(s) has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH

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4/2/2021	1161961			U			DEATH; This spontaneous report received from a patient via a company representative concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin)total 1 dose, start therapy date were not reported for prophylactic vaccination. The Batch number was not reported. The Company is unable to perform follow-up to request batch/lot number. No concomitant medications were reported. On an unspecified date, the patient experienced death. On an unspecified date, the patient died from unknown cause of death. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: 20210356723- Covid-19 vaccine ad26.cov2.s-Death. This event is considered unassessable. The event has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH
4/2/2021	1161106		47	F	3/11/2021	3/17/2021	CONTRACTED COVID, CONFIRMED 3/17/21, PATIENT DIED ON 3/23/21

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4/2/2021		1161015	RI	52	M	2/22/2021	3/19/2021	Per RN at Group Home where patient worked, on 3/19/21 he called the RN with complaints of a "low grade" fever (99-100 degrees) but otherwise reportedly felt fine. He was advised to stay home, was offered Covid testing but refused. On 3/22/21 the RN received an email from patient's supervisor that he still felt unwell and reported vomiting and diarrhea. Was offered a Covid test but refused. -Per patient's friend (a nurse who informed us of the case) various friends spoke with patient up until the morning of 3/25 and he reportedly had no respiratory or cardiac complaints. They were unable to reach him the evening of 3/25, nor the morning of 3/26 so sent the police for a well check and patient was found dead. He lived alone. -Per OSME. Patient did not receive an autopsy but did have an "inspection" which includes an external exam, toxicology and other testing including Covid testing which was positive. The specimen has been sent for sequencing. -Of note, Patient worked in a group home that had an outbreak of Covid in Jan/early Feb. His last exposure to a + person was likely 2/8/21 but possibly 2/10/21. He had a Covid test 2/15/21 that was "inconclusive". The test was re-run (same assay) and was also "inconclusive~~
4/2/2021		1161011	IA	73	M	3/25/2021	4/1/2021	Immediately following vaccination no adverse reaction noted. April 1, 2021 patient went into cardiac arrest and passed
4/2/2021		1160874	MT	53	F	2/26/2021	3/12/2021	Patient was seen in ED on 03/12/2021. Symptoms included fatigue and weakness, she was flown out to hospital. She passed away on 03/14/2021 in hospital.
4/2/2021		1160839	MN	72	M	2/21/2021	3/27/2021	Hospice patient death within 60 days of receiving the COVID vaccine series
4/2/2021		1160722	MI	85	M	1/27/2021	2/21/2021	Patient diagnosed with COVID on 2/21/2021 and subsequently expired

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4/2/2021	1160713	MI	74	F	3/7/2021	3/16/2021	<p>DETAILS OF HOSPITAL STAY: PRESENTING PROBLEM: Cardiac arrest (HCC) [I46.9] HOSPITAL COURSE: Patient is a 74 year old female who receives care through healthcare clinic and second healthcare clinic with past medical history of HTN, CKD, cardiomyopathy/congestive heart failure, atrial fibrillation on Pradaxa who presented to the ED 3/16 after suffering an out of hospital cardiac arrest at her dentist's office. Per report, patient had SBP in the 80s on arrival but was asymptomatic. Prior to start of any procedure (no reports of being given sedative medications), she became unresponsive. CPR was initiated and was found to be in asystole. She received 3 rounds of CPR with ROSC. CT head without acute abnormality. Chest XR showing mild vascular congestion and interstitial edema. Initial labs showing AKI, elevated liver enzymes, BNP >29,000, troponin 39, lactic acid of 11, INR of 6.6, PTT 62, APTT 87. UA with protein, nitrite, moderate blood. Urine culture ordered. Blood cultures ordered. In ED, patient was hypotensive requiring addition of vasopressors. Targeted temperature management was started. Ceftriaxone and flagyl started for possible urinary tract infection and aspiration. Patient with profound coagulopathy, INR increasing to 12.0 on arrival to the ICU. Two units FFP and vitamin K were given. Patient with escalating pressor requirements at this time so CT t/a/p was ordered showing multiple bilateral rib fractures, nondisplaced sternal fracture with small anterior mediastinal retrosternal hematoma, small right sided hemothorax, right chest wall hematoma, patchy bilateral airspace disease consistent with atelectasis/infiltrate/aspiration, diffuse GGO consistent with interstitial edema, enlarged pulmonary arteries consistent with pulmonary hypertension, cholelithiasis. FDP elevated and 2 units of cryoprecipitate given 3/16. Hemoglobin decreased to 5.9 3/17 with INR of 5.4. Two additional units of FFP and additional dose of vitamin K ordered. Two units RBCs ordered. CTA thorax and abdomen 3/17 re-confirmed hemothorax and chest wall hematoma but no active bleeding noted. CT bilateral LE showed no evidence of hematoma. Trauma consulted who recommended chest tube placement. Overnight 3/16-3/17, patient also noted to have seizure activity on EEG and patient loaded with Keppra. Head CT 3/17 negative for hemorrhage or other acute processes. Patient remained in status epilepticus</p>

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								3/17am and additional Keppra load was given and neurology consulted. Received Praxbind for continued bleeding/coagulopathy. 3/17pm went into PEA arrest with 10 minutes of CPR with ROSC. Bronchoscopy following ROSC noted evidence of bleeding from multiple areas, clots removed. MRI brain showing diffuse anoxic brain injury. Propofol stopped 3/19am. After goals of care discussion this morning, all first degree relatives (daughter and son) all in agreement to transition to comfort care measures. I received call from bedside RN that patient had passed away. On exam, no heart or breath sounds appreciated upon auscultation for 2 minutes. No spontaneous movement or chest rise noted. No pulse palpated for two minutes. Pupils fixed and dilated. No response to noxious stimuli. Time of death 1400 3/20/2021.
4/2/2021		1160669	IL	81	F	3/8/2021	3/9/2021	Fever, Weakness, Chills, Body aches Stared on 3/9/21
4/2/2021		1161042	MD	68	F	3/11/2021	3/18/2021	PATIENT CONTRACTED COVID, DATE OF COLLECTION 3/18/2021, DIED ON 3/21/2021
4/2/2021		1162753	MS	71	M	3/10/2021	3/15/2021	Tongue swolle so large he had to be put on a vent for 10 days, passed away after 2 weeks
4/2/2021		1158777	TX	79	M	3/23/2021	3/23/2021	Unknown. Decedent died several days after receiving COVID-19 vaccine (unknown manufacturer).
4/1/2021		1156250	CO	72	M	2/4/2021	2/4/2021	Patient recieved his second dose of the COVID-19 vaccine on February 4, 2021. His complains consisted of overwhelming exhaustion. He was found dead in his hotel room on February 10, 2021.
4/1/2021		1155311		87	F	2/18/2021	3/25/2021	NA Lymphoma - Hospice Care
4/1/2021		1155464	IL	86	F	2/5/2021	2/8/2021	Patient passed away 2/23/21
4/1/2021		1155594	MN	64	M	3/19/2021	3/29/2021	Patient death within 60 days of receiving a COVID vaccine
4/1/2021		1155633	MA	82	M	3/30/2021	4/1/2021	cardiac arrest/vfib arrest
4/1/2021		1155738	OR	54	M	2/19/2021		Death

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4/1/2021	1155752	MN	73	F	3/10/2021	3/29/2021	Patient death within 60 days of receiving a COVID vaccine
4/1/2021	1155785		89	F	1/28/2021	3/25/2021	NA Advanced age PVD, Heart failure ,respiratory failure
4/1/2021	1155891	NE	88	M	3/11/2021	3/12/2021	Pt was given 3rd dose of Moderna Covid Vax in error on 3/11/2021 at the rehabilitation center. 3/12/2021 - according to nursing home pt was acting strange around 7:30 am. Pt was scheduled to be picked up by family members at 9:00 am. When family got there the pt was unresponsive and 911 was called. He was transported by ambulance to Medical Center ER. Pt was intubated. He had fever so was given 3 different types of antibiotics. He was given for blood pressure medicine and Chest X-ray. He was moved to ICU and considered critical. Family was called in to make final decisions. His organs were failing. He was on ventilator at 100%. On 3/16/2021 the family made the decision to remove him from the ventilator. He passed around 7 AM on 3/16/2021.
4/1/2021	1156076	CO	75	F	2/4/2021	2/4/2021	Patient received her 2nd dose of the COVID-19 moderna vaccination on February 4, 2021. By the evening of February 4, 2021 her husband reported her health to decline rapidly. Her symptoms and complains included overall generalized body weakness and fatigue. She was reportedly unable to get out of bed on February 5, 2021. She continued to decline and became short of breath in the early morning hours of February 6, 2021. She went unresponsive and was pronounced deceased at 0615 by (medicolegal death investigator).
4/1/2021	1155002	MA	68	F	3/7/2021	3/9/2021	Patient died between late afternoon 3/9/21 and morning of 3/10/21. Found at a well-being check by police 3/10/21. Medical examiner declined autopsy.

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4/1/2021	1153969	PA	64	F	3/2/2021	3/3/2021	Brain bleed; Platelet count dropped to 40; Bruises all over the body; Organs shut down; A spontaneous report was received from a consumer concerning a 64-year-old female patient, who experienced bruises all over the body (contusion) , brain bleed (cerebral haemorrhage), platelet count dropped below 40 (platelet count decreased) and organs shutdown (multi organ failure). The patient's medical history included bacterial infection 2 days prior to receiving vaccine dose. Product known to have been used by the patient, within two weeks prior to the event, included antibiotics (not specified). On 02 Mar 2021, the patient received her first of the two planned vaccine doses of mRNA-1237 (Lot # unknown) for prophylaxis of Covid-19 infection. On 03-Mar-2021, the patient developed severe bruises all over her body. On 04 Mar 2021, within 2 days after receiving the vaccination, the patient was rushed to the hospital where it was determined that she had sustained a brain bleed. She had all her organs shutdown and her platelet count had dropped below 40. On 04 Mar 2021, it was reported that the patient died. The cause of death was reported as organ failure. Plans for autopsy were not provided. Action taken with the mRNA-1273 in response to the events was not applicable. The outcome of the events, bruises all over the body(contusion), brain bleed(cerebral haemorrhage), platelet count dropped below 40(platelet count decreased) were unknown.; Reporter's Comments: Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded. However, the patient's underlying history of bacterial infection could be a contributory factor. Awaiting further clarification.; Reported Cause(s) of Death: Organ Failure
4/1/2021	1156029		67	F	2/23/2021	3/28/2021	Patient death within 60 days of receiving the COVID vaccine series
4/1/2021	1154501	RI	89	F	2/20/2021	3/7/2021	Within days symptoms of likely CVA. Within one week diagnosis of shingles.
4/1/2021	1154465		76	M	2/26/2021	3/25/2021	NA MS End Stage Vascular disease COPD

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4/1/2021	1154155		67	M	2/9/2021	2/16/2021	DEATH Narrative: 66 yo male with PMH of HTN, HFpEF, COPD, T2DM, CKD, tobacco use disorder and bipolar disorder was found dead in his home on 2/16/2021 after police did a wellness check per request of patient's sister. Patient received the covid19 vaccine (Pfizer) on 2/9/2021, vaccine was administered without complications. No prior positive for covid19. After patient received his covid19 vaccine, he was seen at same day access for increased SOB/DOE, worsened orthopnea. Per progress notes, at this last appt, patient had expressed a number of medications which he was not willing to take, attributing his worsened health to their effects. Pt has continued spironolactone despite being advised to stop it by his medical provider. At the time of visit, provider noted that this kidney function was declining (patient does have CKD). Provider discussed the importance of medication adherence and patient was started on torsemide. Hctz was discontinued, minoxidil was increased due to patient preference. Prior to this same day access/express care visit, patient was hospitalized from 1/26 through 1/28/2021 for hypertensive urgency (211/105) and that at that time, pt already had orthopnea, SOB, and dyspnea. Patient was also admitted from 1/7 to 1/8 and left AMA. While inpatient, his MRI revealed a pontine lacunar infarct that was found to be chronic. It was recommended that patient be treated with aspirin/plavix for 21 days then aspirin alone but patient declined.
4/1/2021	1154154		89	M	2/8/2021	2/24/2021	death Narrative: 88 yo male with PMH CAD, aortic valve stenosis, sensorineural hearing loss, impaired fasting glucose, thrombocytopenia, obesity, GERD, and mixed hyperlipidemia was found to have passed away when staff did an outreach on 3/8/2021 for patient to come back for his second vaccine dose. Per family member, patient passed away on 2/24/2021. Patient has no prior positive for COVID19, no recent hospitalization (none found within the facilities record). Patient received the vaccine on 2/8/2021 with no complications. We have no other records to review. Pt was not hospitalized prior to vaccination or post vaccination. Possible cause of death unknown, no death note found in chart.

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4/1/2021	1154153		73	M	2/12/2021	2/13/2021	Cardiac Arrest Narrative: Pt went into cardiac arrest 2/13 when he was being taking off dialysis machine. Per wife, he was unresponsive, but they were able to revive him with CPR and then called 911 who took pt to Hospital. Pt ultimately died at Hospital 2/26/21. Pt received second dose COVID-19 vaccine 2/12/21 (day prior to cardiac arrest)
4/1/2021	1154152		72	M	2/16/2021	2/26/2021	death Narrative: Patient was a 71 y/o gentleman with PMHx schizoaffective-bipolar, major neurocognitive disorder, hx covid- 19 in 12/15/20, chronic insomnia, BPH s/p LUTS, OA/DJD at unspecified joint, and acquired hypothyroidism who presented to the clinic for hospital follow up and monitoring while on clozapine. Pt received covid19 vaccine on 2/16/2021 while inpatient, right before his discharge on 2/17/2021. Of note, pt was put on hospice care at the time of discharge to patient's home. He passed away on 2/26/2021. I could not find the death notice in the chart (which usually contains the medical cause of death). This was reported to us from an staff. The following describes his hospitalization: At facility, was noted to be dehydrated and reported to not have been taking his medications or having good PO intake. Per reports from nursing home, patient was noted to have difficulty swallowing" and spit up meals and medications. SLP evaluation with concerns for mastication and dysphagia. At time of hospitalization his Na was at 153, also noted to have AKI2. His hypernatremia, aki, and dehydration resolved with fluid replacement. His potassium was also replaced. His constipation resolved with laxatives which also improved his abdominal discomfort. Also, his olanzapine was changed to disintegrating tablet which helped with his intermittent agitation. Currently, he was calm, amenable, and with medication compliance. To help with his poor appetite, his mirtazapine dose was increased to 30 mg from 15 mg. Pt was discharged on 2/17/2021 when family decided to place him under hospice care.

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4/1/2021	1154126	CA	33	M			Diabetic ketoacidosis; This is a spontaneous report from a contactable consumer. A contactable consumer reported for her nephew. A 33-years-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date (at the age of 33-years-old) at single dose for covid-19 immunisation. Medical history included type 1 diabetes mellitus from an unknown date and unknown if ongoing, impaired gastric emptying from an unknown date and unknown if ongoing, ulcer from an unknown date and unknown if ongoing. The patient's concomitant medications were not reported. The patient experienced diabetic ketoacidosis on an unspecified date. The patient died on 21Mar2021 due to diabetic ketoacidosis. An autopsy was not performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Diabetic ketoacidosis
4/1/2021	1156266		45	F	3/4/2021	3/17/2021	pt presented in ER 3/17/21 with SOB and back pain; felt bad since vaccine given; UTI diagnosis-given keflex 500 tid and rocephin shot pt presented to clinic 3/19/21 with continuing back pain dx low back pain and candidia given methocarbamol, diflucan, and ibuprofen pt presented to clinic 3/26/21 with continuing back pain, difficulty urination. given ceftin and rocephin shot pt presented to ER 3/27/21 renal failure and expired within 10 min of arrival no fever documented at any visit

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4/1/2021		1153971	CA	67	M	3/18/2021	3/19/2021	<p>Patient passed away; Heavy breathing; Shortness of breath; Low temperature; Tired; This spontaneous case was reported by a consumer (subsequently medically confirmed) and describes the occurrence of DEATH (Patient passed away) in a 67-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch no. 046AZ1A) for COVID-19 vaccination. The occurrence of additional non-serious events is detailed below. Concomitant products included ROSUVASTATIN CALCIUM (CRESTOR) for an unknown indication. On 18-Mar-2021, the patient received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (unknown route) 1 dosage form. On 19-Mar-2021, the patient experienced BODY TEMPERATURE DECREASED (low temperature) and FATIGUE (tired). On 20-Mar-2021, the patient experienced DEATH (Patient passed away) (seriousness criterion death), DYSPNOEA (heavy breathing) and DYSPNOEA (shortness of breath). The patient died on 20-Mar-2021. The cause of death was not reported. It is unknown if an autopsy was performed. At the time of death, DYSPNOEA (heavy breathing), DYSPNOEA (shortness of breath), BODY TEMPERATURE DECREASED (low temperature) and FATIGUE (tired) outcome was unknown.; Reporter's Comments: Very limited information regarding these events has been provided at this time. The fatal outcome may be related to the patient's pre-existing comorbidities. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death</p>
4/1/2021		1155893	NY	63	M	3/22/2021	3/27/2021	<p>pt was at his normal baseline of health the Monday of vaccine. Per sister, he had a fever of 104F, chills and myalgias hte following Saturday. he was not heard from on Sunday therefore on Monday his sister did a forced entry and found him on the ground.</p>

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4/1/2021	1153902	MS		F			<p>DIED; SORE ARM/ARM PAIN; This spontaneous report received from a consumer concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin, and batch number were not reported) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient had a sore arm/arm pain, and later on died. On an unspecified date, the patient died from unknown cause of death. It was unspecified if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on an unspecified date, and the outcome of sore arm/arm pain was not reported. This report was serious (Death). This case, from the same reporter is linked to 20210329044.; Sender's Comments: V0: 20210353764 - COVID-19 VACCINE AD26.COV2.S - Died. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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4/1/2021	1153885	NY		F		3/11/2021	<p>ASYSTOLE; PASSED AWAY; This spontaneous report received from a physician concerned their mother-in-law, an female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose was not reported, administered on 11-MAR-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On an unspecified date, the patient was in a nursing home, but was hospitalized for pyelonephritis. The patient was not allowed back into the nursing home without a negative COVID test and the vaccine. After discharge from the hospital, the patient's COVID test came back negative, and upon arrival to the nursing home, the patient received the Janssen COVID-19 vaccine. Within 30 minutes, the patient was unresponsive and transported back to the hospital. On arrival to the hospital, the patient was asystole. She was treated at the hospital until 13-MAR-2021, when she passed away. Asystole was reported as fatal. Additionally, cause of death was reported as "cause unknown", therefore, an additional serious adverse event of "passed away" was captured. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died on 13-MAR-2021. This report was serious (Death and Hospitalization).; Sender's Comments: V0: An female of unknown age became unresponsive 30 minutes after, experienced asystole on the same day as, and died of unknown causes 2 days after receiving Janssen COVID-19 Vaccine Ad26.COV2.S (suspension for injection; route of administration and batch number unknown) for prophylactic vaccination while in a nursing home. Medical history and concomitant medications were not reported. The patient was the mother-in-law of the reporter, an internal medicine physician. The patient had no complaints for 30 minutes after receiving the vaccine, then became unresponsive; she was transported to a hospital where she was noted to be asystolic upon arrival. Treatment and hospital course were not provided. The patient died 2 days after receiving the vaccine, and cause of death was unknown; outcome of asystole was reported as fatal. An autopsy was not</p>

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performed. This case has insufficient information to make a meaningful medical assessment.; Reported Cause(s) of Death: ASYSTOLE; UNKNOWN CAUSE OF DEATH

Died from the Moderna vaccine; A spontaneous report was received from a consumer concerning a patient who received Moderna's COVID-19 vaccine (mRNA-1273) and died from the Moderna vaccine/death. The patient's medical history was not provided. No concomitant product use was reported. On unknown date, the patient received their first of two planned doses of mRNA-1273 (Lot number: not provided) intramuscularly for prophylaxis of COVID-19 infection. On unknown date, the patient died after receiving the Moderna vaccine (Seriousness criteria: death, medically significant). The date of death was unknown. Autopsy results not provided. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event, died from the Moderna vaccine/death, was considered fatal. .; Reporter's Comments: Very limited information regarding the event of death has been provided at this time. No further information has been requested.; Reported Cause(s) of Death: Died from the Moderna vaccine

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4/1/2021	1160235		89	M	1/11/2021	2/1/2021	Death Narrative: Pt passed away ~3 weeks after dose 1 of COVID vaccine (Moderna). Daughter was home with pt and after he went to the bathroom she reports pt was out of breath, however that has been chronic/ongoing for him due to his diagnosis of COPD, pulmonary HTN and metastatic lung cancer. After sitting and resting in a chair, she states patient became unresponsive. She called 911 who told her he had no pulse and was not breathing. She states that they were not able to resuscitate him. Pt had been suspected to be positive for COVID as he had symptoms of increased cough, congestion and rhinitis. Daughter (that is primary caregiver and lives in home with patient) tested positive for COVID on 1/31/21. She started having symptoms on 1/25/21. Patient started having symptoms on 1/31/21. No COVID test confirmed prior to pt's death. Patient had a definitive diagnosis of metastatic adenocarcinoma in October 2020. History of multimorbidity. He did have a 60 pack year history of smoking. Most likely cause of death from available records is metastatic lung cancer, with other serious diagnoses contributing.
4/1/2021	1160237		88	F	2/18/2021	3/17/2021	COVID+ Narrative: Patient administered COVID-19 vaccine (Moderna) dose #1 2/18/2021. On 3/17/2021, Patient developed a cough and fever and was brought by ambulance to tertiary care facility with diagnosis of COVID-19. Patient on BIPAP as of 3/22/2021. On 3/26/2021, Patient was initiated on morphine drip for comfort care and BIPAP was discontinued. Patient passed away 3/26/2021.
4/1/2021	1155829	NV	51	M	3/24/2021	3/24/2021	Cardiopulmonary arrest and death at 0822 4/1/21

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4/1/2021	1160236		87	M	2/11/2021	3/19/2021	covid+ Narrative: Patient with diagnosis of chronic respiratory failure with hypoxia secondary to COPD, dependent on oxygen/steroid, GERD, Rosacea secondary to long term steroid use, CAD, HLD, HTN, Diet controlled DM, Granulomatous disease of the lungs, Hx Abnormality Imaging of the lungs early 1990's- further imaging resolved without treatment, Vitamin D/B12 deficiency, Chronic rhinitis, Adjustment disorder with anxiety, Osteoarthritis of multiple joints. Patient admitted 3/19/21 with +COVID symptoms/test. Transferred to facility 3/27/21 with new onset Afib/further respiratory decompensation requiring NRB/Amiodarone gtt. Was made comfort care for Patient request and placed on MSO4 gtt. Patient passed away 3/31/21 at 1640 of Acute on Chronic respiratory failure secondary to COPD/COVID with daughter at side.
4/1/2021	1156284	PR	91	F	3/3/2021	3/23/2021	Cerebral stroke on 3/23/21
4/1/2021	1157805	SC	76	F	3/25/2021	3/28/2021	Patient had the 2nd Vaccine on 3-25-2021 and Passed away on 3-28-2021. our tech found out. No clue if it is related to the vaccine or not.
4/1/2021	1157733	OH	60	F	3/12/2021	3/15/2021	Patient experienced a brain hemorrhage and was hospitalized on Monday, March 15. Despite numerous tests, doctors could not find the source or cause of the bleeding. Over time, the bleeding spread to other areas of her brain including her brain stem. Damage from the bleeding was so severe that she would not recover. She passed away on March 24 after being removed from life support.
4/1/2021	1157683	SC	86	M	2/28/2021	3/3/2021	Patient had his Vaccine on 2-28-2021. Patient passed away on 3-3-2021. Do not know the cause, just found out from our tech and thought we should report it in case.

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4/1/2021	1157604	CA		F		3/21/2021	Pneumonia; Stage four stomach cancer; Parent died after receiving both doses; A spontaneous report was received from a consumer concerning a female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced stage four stomach cancer/gastric cancer stage IV, pneumonia and parent died after receiving both doses. The patient's medical history, as provided by the reporter, included stomach cancer. Concomitant product use was not provided by the reporter. On an unspecified date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (Lot number: unknown) via unknown route of administration for prophylaxis of COVID-19 infection. On an unspecified date, prior to the onset of the events, the patient received their second of two planned doses of mRNA-1273 (Lot number: unknown) via unknown route of administration for prophylaxis of COVID-19 infection. On an unspecified date, patient was diagnosed of stage four stomach cancer and developed pneumonia after both doses of vaccine with seriousness criteria as medically significant. The patient died on 21 Mar 2021. Treatment information was not provided. The patient received both scheduled doses of mRNA-1273 prior to the events, therefore action taken with the drug in response to the events were not applicable. The outcome of the events, stage four stomach cancer and pneumonia were fatal. The patient died on 21 Mar 2021. The cause of death was reported as stage four stomach cancer and pneumonia. Plans for an autopsy were unknown.; Reporter's Comments: This patient's stage IVgastric cancer is unlikely due to the Moderna's mRNA-1273 vaccine due to the latency of gastric cancer. Very limited information regarding these events have been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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4/1/2021		1157561	MI		F	2/11/2021	2/11/2021	Died; Unresponsive; Shortness of breath; Not able to eat; Sick; Nauseous; Vomiting; Passed out on kitchen floor; Blood sugar increased; A spontaneous report was received from a consumer concerning an unspecified age, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced raised blood sugar/blood sugar increased, passed out on kitchen floor/loss of consciousness, nausea, vomiting, sick/illness, not being able to eat/decreased appetite, shortness of breath/dyspnea, unresponsive/unresponsive to stimuli and died/death. The patient's medical history included diabetes. Products known to have been used by the patient, within two weeks prior to the event, included unspecified insulin. On 11 Feb 2021, the patient received their first planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 11 Feb 2021, the patient had a rise in her blood sugar (blood sugar 208, 212, 199 up until her bedtime of 9:45PM). On 12 Feb 2021, the patient passed out on the kitchen floor and the patient's blood sugar took a dive (blood sugar was 304 9:00AM, blood sugar was 260 10:30AM then stayed over 200/280 all day even with insulin). That evening, the patient experienced nausea and vomiting. On 13 Feb 2021, the patient's blood sugar was up and had nausea and vomiting throughout the night. The patient spoke with her doctor, who told her to regulate it with insulin if she needed too. Per the report, the doctor informed the patient that there have been studies that say the vaccine has shown to mess with blood sugars. The patient's blood sugar remained between 144-179 all day even with insulin. The patient had nausea and vomiting. On 14 Feb 2021, the patient reported still being sick. The patient reported a weight loss of 5 pounds and reported not being able to eat. Blood sugar was 174-292 all day even with insulin. On 17 Feb 2021, the patient's blood sugar was bouncing between 53-151 all day even with insulin. On 18 Feb 2021, the patient reported shortness of breath and was using Vicks to help clear the nasal passage. On 19 Feb 2021, approximately at 6:00AM, the patient's spouse found patient breathing but unresponsive. At approximately 7:25AM, the patient died. Treatment information included, unspecified insulin and Vicks. Action taken with the drug in response to the event is not applicable. The outcome of event, passed out on kitchen

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floor/loss of consciousness, was considered resolved on 12 Feb 2021. The outcome of events, raised blood sugar/blood sugar increased, passed out on kitchen floor/loss of consciousness, nausea, vomiting, sick/illness, not being able to eat/decreased appetite, shortness of breath/dyspnea, were considered unknown. The outcome of events, unresponsive/unresponsive to stimuli and died/death, were considered fatal. The cause of death was not provided. Plans for autopsy was not provided.; Reporter's Comments: Very limited information regarding these events has been provided at this time. Patient's history of uncontrolled diabetes with recent fluctuations may have been contributory for the occurrence of the death. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

4/1/2021 1157534

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3/28/2021 DEATH; This spontaneous report received from a consumer via a company representative concerned a female of unspecified age. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown, expiry date: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On 28-MAR-2021, the patient received vaccine shot and she died on the same day. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death and Other Medically Important Condition).; Sender's Comments: 20210356482 - Covid-19 Vaccine Ad26.Cov2.S - Death. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.

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4/1/2021	1157515	PA		U			DEATH; This spontaneous report received from a consumer concerned multiple patients. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: Unknown) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported, per procedure no follow up will be requested for this case. No concomitant medications were reported. The reported called for an agency, during call she had mentioned "several deaths were reported with the vaccine". She read it on a website. The cause of the deaths was not reported. It was unknown if autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: 20210350272-covid-19 vaccine ad26.cov2.s-Death. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).

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4/1/2021	1157506	CT		F		3/10/2021	<p>FEELING BETTER FOR THE MOST PART; DEATH; LOOKED PALE; STOMACH CRAMPS; EAR ACHES; ARM HURTS; BEYOND EXHAUSTED; HEADACHE; This spontaneous report received from physician via social media post and concerned a 25 year old female. The patient's weight, height and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of administration, and batch number were not reported) dose was not reported, administered on 09-MAR-2021 for prophylactic vaccination. The batch number was not reported and has been requested. No concomitant medications were reported. On 10-MAR-2021, the patient felt "the vaccine is killing me today" and "its taking it's toll on me". The patient was told that she looked pale on an unspecified date in MAR-2021. On 10-MAR-2021, the patient developed stomach cramps, ear aches, arm hurt, was beyond exhausted, and headache. On an unspecified date, the patient had reported feeling better for the most part. On 17-MAR-2021, the patient died from an unknown cause. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The outcome for looked pale, stomach cramps, ear aches, feeling better for the most part, arm hurts, beyond exhausted and headache was unknown. This report was serious (Death).; Sender's Comments: v0 This spontaneous report from a physician reporting a social media post involved a 25-year-old female who received the Janssen COVID-19 Vaccine for prevention of COVID-19 infection and died approximately one week later. Medical history and concomitant medications were not reported. The patient reported no adverse effect on the day of the vaccination. The next day, she reported that "The vaccine is killing me today. My arm hurts, beyond exhausted, headache, stomach cramps and earaches." She also reported that people told her she looked pale. The following day, the patient reported that she was feeling better "for the most part". The patient died approximately 6 days later. No information was provided regarding the cause of death. There is insufficient information provided in this case to make a meaningful medical assessment.; Reported Cause(s) of Death: UNKNOWN CAUSE OF DEATH</p>

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4/1/2021		1157494	PA	53	M		3/22/2021	CARDIAC ARREST; This spontaneous report received from a consumer concerned a 53 year old male. The patient's height, and weight were not reported. The patient's concurrent conditions included type 2 diabetes, picc line, and diabetic foot ulcer. The patient had no known allergies. The patient had no previous history of heart conditions. The patient received COVID-19 VACCINE AD26.COV2.S (suspension for injection, route of admin not reported, batch number: 1805022, expiry: UNKNOWN) dose was not reported, administered on 11-MAR-2021 for prophylactic vaccination. Concomitant medications included Ceftriaxone for diabetic foot ulcer, and Heparin for picc line prophylaxis. On Saturday, 20-MAR-2021, the patient reported that his chest felt funny but he wasn't sure about the cause. On Monday, 22-MAR-2021 morning; the patient had collapsed when he got out of the shower and yelled for help. The patient was gasping for breath and reading on pulse oximeter dropped into the 70's and also reported that he felt light headed. It was unknown weather the patient died in ambulance or at hospital. It was unspecified if an autopsy was performed. Laboratory data included: Oxygen saturation decreased (NR: not provided) Dropped to 70's. On 22-MAR-2021, the subject died from cardiac arrest. The action taken with COVID-19 VACCINE AD26.COV2.S was not applicable. This report was serious (Death).; Sender's Comments: V0: 20210342361 -COVID-19 VACCINE AD26.COV2.S-Cardiac Arrest. This event is considered not related. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There are other factors more likely to be associated with the event than the drug. Specifically: MEDICAL HISTORY.; Reported Cause(s) of Death: CARDIAC ARREST

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4/1/2021		1157491	AL		M		3/10/2021	<p>COLLAPSED; HEADACHE; This spontaneous report received from a consumer concerned a 70 year old male. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported, batch number: 1802070 expiry: UNKNOWN) dose was not reported, administered on 10-MAR-2021 11:00 for prophylactic vaccination. No concomitant medications were reported. On 10-MAR-2021, the patient experienced headache, was clammy to the touch. On same day at 14:00, checked blood pressure (BP) and it was 145/75 and his oxygen level read in the 90's. At 18:00, he collapsed while getting up out of his chair and emergency medical services (EMS) was called performed cardiopulmonary resuscitation (CPR) but never got him back. On 10-MAR-2021, the patient died from cause unknown. An autopsy was not performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. The patient died of collapsed on 10-MAR-2021, and the outcome of headache was not reported. This report was serious (Death, and Other Medically Important Condition). The suspected product quality complaint has been confirmed to be no product quality complaint identified within the reported. Complaint is approved for void, based on the PQC evaluation/investigation performed. This report was associated with product quality complaint :90000173895.; Sender's Comments: V0: 20210341940-COVID-19 VACCINE AD26.CO2.S- COLLAPSED. This event is considered Unassessable. The event has a compatible/suggestive temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event.; Reported Cause(s) of Death: Cause unknown</p>

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4/1/2021	1156365	XB	72	M	3/1/2021	3/4/2021	Client has history of COPD and CHF. Three days after the 1st COVID Vaccine, client had some SOB and he called 911. When the ambulance arrived they had to do CPR on him and got him to the hospital and at the hospital they got him breathing on his own. From the ER they transferred him to Facility. He spent 23 days in the hospital and Rehab. He was told he could take the vaccine. He was out of the hospital for one week before his 2nd COVID Vaccine. His friend/neighbor is the historian and she states that since he was out of rehab that he was having a lot of extremity swelling. He then came to the Health Services on 03/29/2021 for his 2nd COVID Vaccine. On 3/30/2021 at 5:45 pm, client went to Pharmacy to pick up his medications, and after 9 pm was found by friend deceased in his car at Pharmacy. This information was received from friend/neighbor, no local family available.
4/1/2021	1157484			U			COVID-19 INFECTION; This spontaneous report received from a consumer via a company representative and concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. We are unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient developed covid-19 infection. On an unspecified date, the patient died from covid-19. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).; Sender's Comments: V0: A patient of unknown age and gender died an unknown time after receiving Janssen COVID-19 Vaccine Ad26.COVS (suspension for injection, route of administration not reported) for prophylactic vaccination. Medical history, concomitant medications, and details of the event were not reported. It was unknown if an autopsy was performed. This case has insufficient information to make a meaningful medical assessment.; Reported Cause(s) of Death: COVID-19
4/1/2021	1156328	PR	72	M	3/3/2021	3/29/2021	Death on 03/29/2021

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4/1/2021		1156352	NY	71	M	3/11/2021	3/13/2021	Patient's wife returned for second Pfizer CoVid vaccine on 4/1/2021 she told the vaccinator, that her husband, died two days after he received the first Pfizer vaccine. Date of Death - 03/13/2021. Wife states that husband had a "massive stroke." EEG indicated no brain activity and it was decided to remove him from life support.
4/1/2021		1156392	CO	87	M	2/26/2021	3/10/2021	.Mandatory EUA Reporting - Received 2nd Moderna Covid vaccine on 2/26. Admitted to hospital on 3/10 with pneumonia and COVID positive. Patient's son was living with him and Covid positive. Failed treatment with abx, steroids, oxygen. Transitioned to comfort care and passed away on day 8 of hospitalization.
4/1/2021		1156450	CO	96	M	2/17/2021	2/17/2021	Patient received his second dose of the COVID-19 vaccine on February 17, 2021. Per family, he complained of feeling chilly and cold. He was found deceased in the early morning on February 18, 2021.
4/1/2021		1156579	NJ	73	M	2/24/2021	3/14/2021	Per Hospital medical records patient was admitted to hospital 3/14/2021 at 1021. Notes from 3/14/21 indicate patient presented with 1 week of nonproductive cough. Received chemotherapy 4 days ago. 3 days ago developed fever, chills, dyspnea, anorexia.
4/1/2021		1157040	IL	92	F	3/25/2021	3/31/2021	The patient received vaccine on 3/25 (2nd dose in series). The patient was a 911 call 3/31 with death at home (natural causes) 6 days after vaccine receipt
4/1/2021		1156620	CO	47	M	1/12/2021	1/12/2021	Mandatory EUA Reporting - Patient received COVID-19 vaccine on 1/12/21 and then tested positive for Covid the same day. Was admitted to hospital from rehab (resides in rehab for chronic respiratory failure). Patient deteriorated throughout hospitalization, was transitioned to comfort care, and expired on 2/10/21.
4/1/2021		1156845	MI	72	F	3/23/2021	3/27/2021	Patient received COVID vaccine 3/23/2021. The family called the vaccination clinic to inform that the patient died on 3/27/2021. Family believes the vaccine caused the death. I have no other information on this chart.

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4/1/2021		1157033	CA	67	M	3/30/2021	3/30/2021	Per family patient reported c/o nausea and vomiting at home post treatment on 3/30/2021, he went to bed and was found unresponsive on 3/31, EMS was contacted and pronounced deceased at home on 3/31/2021. (exact time unknown).
4/1/2021		1156595	CO	76	F	1/4/2021	1/11/2021	Mandatory EUA Reporting - Patient received Moderna COVID-19 vaccine on 1/4. She was living with someone who was diagnosed with COVID-19 on 1/11. Patient was tested on 1/11 and was negative for COVID-19. Then about 4-5 days later developed symptoms and tested positive. She was admitted to hospital on 1/20/2021 to medical floor, transferred to ICU on 1/27, and died on 2/5/2021.
4/1/2021		1157133	CA	60	F	3/25/2021	3/26/2021	pt deceased approx 36 hours after vaccination
4/1/2021		1155643	KY	101	F	2/1/2021	3/30/2021	Patient had Covid in November 2020. Received a dose of covid vaccine in January 2021 and February 2021. Arrived to Regional with SOA . Covid-19 (NAA) was positive on 03/29/2021 10:17am -repeat Sars-Cov-2 (PCR)-negative on 03/29/2021 14:30 negative. Patient expired on 3/30/2021 at o146
4/1/2021		1156071	FL	69	M	3/29/2021	3/30/2021	Unknown type of COVID-19 vaccine. Death in less than 24 hours. Unknown if vaccine related.
3/31/2021		1150753	WI	68	F	3/10/2021	3/10/2021	Rapidly progressive dyspnea and fatigue, worse with even light exertion, at night and laying down.
3/31/2021		1151270	MI	98	F	2/19/2021	3/17/2021	Unknown what if any adverse event may have occurred. This report is being submitted following a periodic review of death certificates . Death certificate for this individual indicates "recent COVID vaccine" in "PART II. OTHER SIGNIFICANT CONDITIONS contributing to death but not resulting in the underlying cause~~
3/31/2021		1151500	VA	50	M	3/18/2021	3/19/2021	Found unresponsive by family member after falling asleep. Started CPR .Rescue squad arrived. Transported to Hospital. Cease resuscitation order at 1:32 am.

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3/31/2021		1151636	PA	85	M	2/3/2021	2/12/2021	<p>My father received his first Pfizer vaccine on 02/03/21. On 2/12/21 I rushed him to the ER. He was vomiting uncontrollably and had shortness of breath. Once arrived at ER, they immediately put him on oxygen. Vomiting lasted several hours. They tested him for Covid and did a chest x-ray. Tested positive for Covid. Chest x-ray showed Covid pneumonia. Was admitted. Stayed in hospital for 5 days and was then released to nursing home for physical and occupational therapy. He was very weak and on days experienced what they called Covid fog. After 2 weeks of therapy, he was released on 03/06/21 to go back home to his apartment, with extended visiting nurse therapy. On 3/10/21, was the first visiting nurse appointment. At 12:00 an RN came to his apartment from Home Health Care. She checked his vitals. She said his blood pressure was good, lungs sounded good and oxygen level was 98. She said he was doing good and that she would not need to continue to come out and check on him weekly. She left. At 2:30 the same day, a Physical Therapist from Home Health Care came. She asked him lots of questions and adjusted my fathers' walker for him. He showed her how he was doing using the walker. Walked approximately 15-20 feet in his apartment. She checked his vitals before she left. His oxygen level was now at 91. She had him take a few deep breathes until his oxygen level was up to 93. She left and said she would be back on Friday the 12th to begin the actual physical therapy then. Within 10 minutes after she left my father started shaking uncontrollably and was having difficulties breathing. I called 911. Paramedics arrived. My fathers' oxygen level was all the way down to 74. They took him to the ER. When getting him out of ambulance he began vomiting. Vomiting lasted for hours just like when he went to the hospital back in February. They tried 3 different drugs to control the nausea. They did EKG, chest and abdomen scans. Was found that he had multiple blood clots and inflammation in his lungs and a bacterial infection in his blood. After testing, bacteria was found to be E Coli. Treated him with heparin for clots and antibiotics for infection and had him on oxygen in nose. Every day thereafter, he felt worse. They switched him to a high flow oxygen mask to keep his oxygen levels up. By Saturday night (early morning Sunday) on 03/14, they had taken the high flow oxygen mask off and hooked him up to a BiPap oxygen machine</p>

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							because his oxygen levels were dropping too low. We were then told by the lung doctor, that the damage to his lungs was extreme and that the next step would be to put him on a ventilator and feeding tube. My father did not want this per his will and his discussion with Dr earlier in the week. Dr indicated that he would not get better just being on the BiPap machine and we then chose to have them take him off of the machine because he did not want to go on life support. My father passed away on Sunday, March 14th around 6:30pm.
3/31/2021	1151679	PA	96	M	3/4/2021	3/14/2021	Patient received 2nd Moderna Covid-19 vaccine on 3/4/21. Patient was admitted to hospital on 3/14/21 with a stroke. The patient fell the night before and laid on the floor until family found him and then was taken to the ER. Prior to falling he experienced left arm weakness.
3/31/2021	1151697		78	M	2/9/2021	3/10/2021	DEATH Narrative: No information about patient's death in record, patient received most of his care outside the clinic with only 2 ambulatory care notes in clinic total. Had diagnosis of CLL and was no longer on chemo. No documentation of: prior COVID infection, immediate ADR to COVID vaccine, prior hospitalizations for covid or anything else, death note, autopsy Unlikely that covid vaccine resulted in this patient's death, but was due to advanced age and diagnosis of CLL.

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3/31/2021	1151700		98	F	3/11/2021	3/22/2021	Narrative: Patient received dose 1 of Moderna COVID-19 vaccine on 3/11/21 from clinic. Vaccine was administered to patient without complications and patient was observed for 15 minutes post-vaccination without any adverse effects. No documentation as to any adverse effects following the 15 minutes post-vaccination. 11 days later on 3/22/21, EMS was dispatched to patient's home and patient was found lying supine, unconscious, and unresponsive to stimuli. Patient was noted to have shallow breathing per EMS staff, and was subsequently brought to the hospital. Per family, patient lives alone and was feeling well - they had spoken to her two days prior to the event. Per family patient did not have recent fevers, vomiting, diarrhea, or cough. Also no recent medication changes or trauma. PMH includes stroke approx. 8 years ago, gout, HLD, HTN, and RLS. BP upon admission was 126/93, HR 123, temp 37.1 degrees Celcius, RR 28. Patient noted to smell of urine. CT showed large completed right sided infarct consistent with MCA stroke. Per neurology the lesion was not recoverable and patient would be unlikely to regain any function. Family was notified and poor prognosis was discussed. Patient has been very clear in the past that she would prefer "to go when her time came". She had a DNR And DNI as well. Daughter requested to pursue comfort measures for patient, therefore she was transferred to hospice care. Patient passed away the following day on 3/23/21. Death very unlikely due to COVID-19 vaccination since CT imaging clearly showed cerebral infarct and patient had a PMH of stroke.
3/31/2021	1151699		75	M	2/10/2021	3/11/2021	DEATH Narrative: NO INFORMATION AVAILABLE IN RECORD OTHER THAN DATE OF DEATH VACCINE GIVEN 02/10/2021 DATE OF DEATH 03/11/2021 PT DID NOT RECEIVE CARE AT CLINIC SINCE 2013 (AUDIOLOGY ONLY AT THAT TIME) NO DOCUMENTATION OF PREVIOUS COVID INFECTION NO IMMEDIATE ADR FOLLOWING VACCINE NO DOCUMENTATION OF HOSPITALIZATIONS (RECENT OR AFTER VACCINE) NO DEATH NOTE OR AUTOPSY Likely that vaccine did not contribute to this patient's death.

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3/31/2021	1150577	TX	65	M	3/27/2021	3/27/2021	Got the shot Saturday patients arm was hurting Saturday and the people at shot clinic told the patient to take Tylenol for pain, Sunday the patient was extremely tired and clammy told the daughter his joints and body was hurting so badly. Sunday the patient woke up with allergy symptoms so patient was waiting it out to see dr until his appointment. The patient finally woke up on 3-31-21 around 5 am and the patient had cold chills and clammy the patient put on his robe then told his wife that he was too hot shortly after. The wife was leaving for work at 6am and the patient was curled around toilet stating he felt nauseous, wife left for work around 6am and then she stated about 15-20 minutes later the husband called her asking her to come back home she stated he sounded very short of breath and just not right, she turned around and got home around 645am and found her husband pale and in his recliner with his mouth open and unresponsive. The wife called 911 and she stated the told her pull him into floor and EMS arrived as soon as she got in the floor to start CPR.
3/31/2021	1149401	CA	85	M	3/11/2021	3/12/2021	Systemic: Exhaustion / Lethargy-Medium, Systemic: Fever-Medium, Systemic: CAREGIVER REPORTED PATIENT STOPPED EATING AND HAD FEVER OF 101, FEVER WENT DOWN AFTER A DAY OR SO BUT CONTINUED NOT TO EAT-Severe, Additional Details: CAREGIVER REPORTED PT HAD FEVER AND LOSS OF APPETITE AFTER FIRST DOSE, QUESTIONED IF SECOND DOSE IS APPROPRIATE. PER THE CDC GUIDELINES THE PATIENT DID NOT HAVE A SEVERE ALLRGIC REACTON TO THE VACCINE AND THEREFOR SHOULD PROCEED WITH SECOND DOSE. CAREGIVERS STATES TOOK A WHILE FOR PT TO REGAIN APPETITE AFTER THE FIRST DOSE. SECOND DOSE HE HAD FEVER OF 101 FOR ABOUT 1 DAY BUT LOST APPETITE AND NEVER REGAINED. PASSED AWAY ON THE 24TH OF MARCH. CAREGIVER STATES PT WAS "STRIVING" PRIOR TO 2ND DOSE

<i>RECVDATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
3/31/2021	1151701		79	M	1/5/2021	3/10/2021	COUGH, WEAKNESS, INSOMNIA, ACUTE ON CHRONIC CKD, ACUTE ON CHRONIC CHF, EMESIS, DEATH Narrative: 1/12/21-PT REPORTED FEELING TIRED, UNABLE TO SLEEP AND EXPERIENCING DYSPNEA ON EXERTION THAT HE FEELS MAY BE RELATED TO RECENT COVID VACCINE 1/17/21- patient admitted to hospital due to 'severe abdominal pain;' received 1 unit PRBC due to symptomatic anemia and weakness (Hgb 8.4->7.1); dx: acute on chronic CHF exacerbation and difficulty breathing, acute kidney injury- CKD Stage IV; HPI includes chief complaint "weakness/sob since last night, cough x 2 weeks since covid vaccine;" HPI includes "pt states that for 2 weeks he has had SOB, cough, chills, body aches, and weakness, symptoms not improved over the last few days, more weak as of late" 1/28/21-transferred to facility 2/12/21-transferred back to hospital due to SOB, abnormal labs, pleural effusion 2/16/21-episode of coffee ground emesis 2/19/21-EGD showed ulcerative esophagitis and gastritis 2/24/21-transferred to SNF 3/9/21-admitted to hospital d/t multiple episodes of vomiting 3/10/21-pt passed away at hospital Possibility that acute inflammatory process triggered by vaccine resulted in patient's eventual death, but difficult to ascertain due to patient's various comorbidities. Patient never tested positive for COVID. Did not experience immediate ADR following 1st dose of vaccine. Did not received 2nd dose due to illness. Hospitalized multiple times following 1st vaccine dose.

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3/31/2021	1151915	KY	66	M	3/11/2021	3/30/2021	presents to the ED via EMS in cardiac arrest. EMS report patient was in agonal respiration upon arrival and has had no pulse since 2109. Patient had a syncopal episode on the toilet prior to EMS call. EMS notes they gave patient 4 epinephrine, 1 bicarbonate, and 1 Narcan. Patient arrived with a lucas machine in place and intubated. Patient's intubation was verified to be a 7.0 ETT and 23 cm at the lip. Cardiac Activity noted in ED at 2150. See nurses notes for times medications were administered. Further history limited due to unstable vital signs. Pt hypotensive, started and maxed on levophed, epinephrine infusions and additional push dose epi given. Right femoral central line placed. Pt began to brady down, was given atropine, ultimately again became pulseless and CPR resumed. After 2 further rounds of ACLS, total down time approached 1 hour without return of pulse. On echo, there were occasional agonal beats, but no organized cardiac activity. EKG and case had been discussed with Dr. Friday and decision was to attempt therapeutic hypothermia prior to second cardiac arrest as EKG showed inferolateral STEMI
3/31/2021	1151698		93	M		3/6/2021	death Narrative: patient did not receive active care at the clinic since 2017 no evidence of COVID positive diagnosis in past no known hospitalizations no acute ADRS following vaccination no death note or autopsy in record no other ADRS documented in record
3/31/2021	1150107	GA	86	F	1/20/2021	2/6/2021	received vaccine on 01/20/21. 02/06/21vomiting, difficulty eating, hypotension, sent to hospital and admitted with hypotension and hypothermia, placed on Bi-pap, 02/15/21 resident returned to facility under hospice care, expired on 02/24/2021
3/31/2021	1150089	TX	71	M	2/2/2021	2/3/2021	Suicide, no vaccine symptoms

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3/31/2021	1149905	NJ		U			Died; A spontaneous report was received from a Consumer concerning a patient where age and gender unspecified who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced event Death. The patient's medical history was not provided. No relevant concomitant medications were reported. On unknown date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) in the Anatomical location unspecified for prophylaxis of COVID-19 infection. On unknown date, The patient experienced the event Death. Laboratory details were not provided. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not reported. The outcome of the event was Fatal. The reporter assessed the event Death related to the study drug was unknown.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/31/2021	1149835	WI	77	F	3/11/2021	3/27/2021	Patient received her first Moderna COVID-19 vaccination on 03/11/2021. She did not have any ill effects directly afterwards. However, starting on 03/27/2021, she began complaining of left arm pain in the area of the injection. She continued to complain of pain in the injection site on 03/28/2021. On 03/29/2021, her roommate found her deceased on her bed due to a probable cardiac event.
3/31/2021	1149826	AR	67	M	3/1/2021	3/20/2021	Patient took the Pfizer Corona Virus shot does 1 on march 1, 2021. He passed away on march 20, 2021. Reported being fatigued and exhausted after taking does 1. Was sleeping up 10 hours a day. On the day he passed, he reported being light-headed and struggling to breath. The paramedics worked on him for 40 minutes to try and revive him.

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3/31/2021		1149448	OH	90	F	2/20/2021	3/4/2021	Covid vaccine monitoring documentation. 90 yof patient presented to ED 3/4/21 at 1233 unresponsive via EMS due to cardiac arrest. BP documented 82/43 at 1233, pulse 49. Prior to arrival, patient had been in bathroom and had syncopal event. Patient lived with family. EMS began CPR and administered doses of Epi. Documentation also stated patient's family member said patient received their 2nd covid vaccine 5 days prior and has not been okay since. After arrival to ED, patient was intubated, cardiac ultrasound showed no cardiac activity and no pericardial fluid. Patient received sodium bicarbonate and calcium chloride. Patient expired in the ED department at 03/04/2021 12:51. Per Death Summary Form clinical diagnosis cardiopulmonary arrest, clinical impression of cause of death or terminal events leading to death, possible myocardial infarction. Pfizer EL9265 on 1/30/21, Pfizer EL9266 on 2/20/21.
3/31/2021		1149770		72	M	3/1/2021	3/5/2021	Aches, fevers, chills-within 24 hrs Nausea and vomiting-within 48 hrs Heart attack and death on third day
3/31/2021		1149704	OH	74	F	3/12/2021	3/14/2021	Patient received Moderna vaccine on 3/12 and passed away on 3/14. Patient had multiple chronic and acute conditions and was in overall poor health.
3/31/2021		1149497	MN	102	M	2/3/2021	3/19/2021	Patient death within 60 days of receiving the COVID vaccine series
3/31/2021		1149493	TN	72	M	2/4/2021	3/4/2021	WHEN CALLED TO SCHEDULE 2ND DOSE, FAMILY STATES HE IS DECEASED.
3/31/2021		1149492	MN	73	M	3/12/2021	3/22/2021	Patient death within 60 days of receiving the COVID vaccine series
3/31/2021		1154150		97	M	2/15/2021	3/8/2021	DEATH Narrative: NO INFORMATION AVAILABLE AS PATIENT DID NOT RECEIVE CARE AT THE FACILITY ALL EXCEPT AUDIOLOGY CLINIC WITH THE LAST VISIT IN 2019 NO DEATH NOTE, NO AUTOPSY NOTED, PT HAD ONE AMBULATORY CARE NOTE IN 2012 NO DOCUMENTATION OF PREVIOUS COVID INFECTION, NO HOSPITALIZATIONS, NO ACUTE REACTION AFTER VACCINE. Most likely cause of death was advanced age, not related to vaccine.

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3/31/2021		1151937	MI	91	F	3/2/2021	3/19/2021	Unknown what if any adverse event may have occurred. This report is being submitted following a periodic review of death certificates . Death certificate for this individual indicates "recent COVID vaccine" in "PART II. OTHER SIGNIFICANT CONDITIONS contributing to death but not resulting in the underlying cause~~
3/31/2021		1149813	KY	64	M	3/26/2021	3/28/2021	PT RECEIVED MODERNA #1 ON 3/26 AND PASSED AWAY ON 3/28 AT HOME.
3/31/2021		1154141		67	M	2/9/2021	3/2/2021	loss of appetite, abdominal pain, weight loss, death Narrative: 02/12/21: GI VISIT-ASSESSMENT: 1-R/O Gastric or Cecal Cancer with Peritoneal Carcinomatosis is most the cause of his weight loss and early satiety. Liver and Pancreas on CT Scan unremarkable. 2- Weight loss and early satiety may be due to Gastric Mass with metastasis or Colon Mass. 02/17/21: ED VISIT AND ADMISSION w/ CC 4 weeks of poor appetite and 2 weeks of inability to hold down food and abdominal pain, decreased BM and decreased urination Assessment on admission: acute kidney insufficiency, Possible partial Gastric outlet obstruction 2/2 malignancy, GI malignancy with peritoneal carcinomatosis as per CT scan 2/11, asymptomatic bacteruria hyperkalemia and AKI during admission 02/21/21: pt signed out of hospital AMA due to 'personal problems' 02/22/21: pt returned to hospital for continuation of care and was readmitted with same c/o 02/24/21: pt tachycardic and hypotensive w/ altered mental status; rapid response team called, transferred to icu; impression: acute severe sepsis with uremia; during procedure to place nephrostomy tubes, pt goes into wide complex vtach then vfib and ACLS done w/ compressions, ROSC @ 2255 w/ BP 70-41, Norepi started; pt intubated 02/25/21: pt extubated 02/25/21@2106: pt with inferior lateral stemi 03/01/21: pt w/ sudden deterioration with decreased LOC and increased WOB., intubated, found to be profoundly hypoxemic, developed severe metabolic acidosis and hyperkalemia, severe refractory hypotension 03/02/21: pt unresponsive without pulse or respirations, NOK declined autopsy no prior covid infection noted, no immediate reaction after covid vaccine, pt was hospitalized leading up to death with unrelenting abdominal pain, AKI, metabolic abnormalities. It is unlikely that vaccine led to patient's death.

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3/31/2021		1154143		68	M	2/9/2021	2/14/2021	weakness, fatigue, body ache Narrative: 67-year-old male with past history of diabetes type 2, hyperlipidemia, left BKA, who presented to hospital 2/14/21 with generalized weakness, fatigue, body aches and left leg pain for the past 5 days. He reported it started after receiving his COVID-19 vaccine on 2/09/21. He also had associated nausea, vomiting, diarrhea. He denied fever, chest pain, shortness of breath, abdominal pain. Labs showed mild leukocytosis 12k, AKI with Cr 4.6, K 3.2, Bili 2.9, trop 0.01, lactate 2.2. He was given 3L IVF, vanco blue in ED at 18:35. Asystole on monitor. ACLS initiated and once eventually stabilized he was transferred to ICU. Pt again coded 2 more times while in ICU with were halted due to medical futility.
3/31/2021		1152051	MI	85	M	2/10/2021	3/22/2021	Unknown what if any adverse event may have occurred. This report is being submitted following a periodic review of death certificates . Death certificate for this individual indicates "COPD - Decline Acutely After COVID Vaccine 1st Dose" in "PART II. OTHER SIGNIFICANT CONDITIONS contributing to death but not resulting in the underlying cause~~
3/31/2021		1154856	SC	48	F	3/29/2021	3/29/2021	My sister died due to allergic reaction 45min after taking the Moderna Vaccine
3/31/2021		1154639	MI	38	M	3/27/2021	3/27/2021	Patient began having seizures about four hours post vaccine while at a friends house and passed away
3/31/2021		1154290	MI	87	M	3/26/2021	3/30/2021	The patient apparently woke up in the morning and told his wife that he was tired and went back to bed and did not wake up.

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3/31/2021	1154151		87	M	2/19/2021	2/26/2021	FALLS, CHEST PAIN, HEMORRAHAGIC CONTUSION, COVID, PNEUMONIA, HYPOXIC RESPIRATORY FAILURE Narrative: 2/22/2021 Patient presented to hospital with multiple complaints. He was reporting falls, chest pain, his wife was diagnosed with Covid. While he was there, he was found to have hemorrhagic contusion in the right frontoparietal region with minimal surrounding edema, Covid, pneumonia, elevated troponin. He was accepted in transfer by trauma surgeon Dr. and arrives with no complaints. 2/26/2021 Patient died after code blue was called Death Diagnosis: s/p fall with head trauma Focal area right intracranial hemorrhage per initial CT - serial CT head showing stability Acute hypoxic respiratory failure secondary to COVID-19 viral illness COVID-19 viral illness Acute chest pain, improved Elevated troponin, suspected type 2 NSTEMI Elevated D-dimer - V/Q scan with intermittent probability PE Acute kidney injury on CKD, improving unlikely that vaccine contributed to patient's death.
3/31/2021	1154142		77	M	2/27/2021	3/20/2021	cardia arrest Narrative: 76 yo with CAD, carotid artery stenosis, abdominal aortic aneurism, history of MI, DM. Patient was given both COVID vaccinations with the 2nd and most recent on 2/27. On 3/20, patient was admitted to an outside local emergency room with cardiac arrest and passed away at the facility. They were unsure if this had anything to do with his covid vaccinations but thought we should at least report it.
3/31/2021	1154140		92	M	2/11/2021	3/3/2021	DEATH Narrative: LIMITED INFORMATION PROVIDED IN MEDICAL RECORD OTHER THAN SON CALLED TO REPORT PATIENT HAD BEEN TRANSFERRED OUT OF ICU TO HOSPICE CARE ON 03/02/21. No documentation regarding hospital admission or ICU care. Son called on 3/3/21 to report patient passed away peacefully and without pain. No previous COVID infection, no recent hospitalizations known, no immediate acute reaction to COVID vaccine. Unlikely that vaccine contributed to death, as patient was on hospice with advanced age of 91 years.

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3/31/2021		1153540	MI		M	3/1/2021	3/1/2021	He had not been experiencing any issues or symptoms of his chronic illnesses, but within 1 day had CHF symptoms and died; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration in Mar2021 (Batch/Lot number was not reported) as single dose for covid-19 immunisation. Medical history included chronic kidney disease, Congestive heart failure (CHF), hypertension, diabetes mellitus. The concomitant drugs included other unspecified medications in two weeks. There were no covid prior vaccination, and no covid tested post vaccination. The patient had not been experiencing any issues or symptoms of his chronic illnesses, but within 1 day had CHF symptoms and died in Mar2021, which resulted in Emergency room/department or urgent care, Hospitalization, Life threatening illness (immediate risk of death from the event), died. The patient was hospitalized for 1 days. Treatment was received. The patient died in Mar2021. The event was listed as complication of Covid 19 vaccination. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: He had not been experiencing any issues or symptoms of his chronic illnesses, but within 1 day had CHF symptoms and died

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3/31/2021	1153527	MN		F	1/29/2021	1/30/2021	Suffered massive stroke 24 hours after Pfizer vaccine; This is a spontaneous report from a contactable consumer. This consumer reported for a (age- 86; unit-unknown) female elderly patient with no pregnant received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 29Jan2021 13:45 PM at single dose for covid-19 immunisation. No pregnant at time of vaccination. No illnesses or chronic health conditions, no family history of strokes, heart disease or high blood pressure, very healthy prior to vaccine. No other vaccine in four weeks. She suffered massive stroke 24 hours after Pfizer vaccine on 30Jan2021 13:00 PM. Event resulted in Emergency room/department or urgent care, Hospitalization for 27 days, Life threatening illness (immediate risk of death from the event), Disability or permanent damage, Patient died on 18Mar2021. Treatments were received for the event. Outcome of the event was fatal. No autopsy was done. lot/batch number has been requested.; Reported Cause(s) of Death: Suffered massive stroke 24 hours after Pfizer vaccine

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3/31/2021		1153162	CA	79	M	2/3/2021	3/4/2021	<p>Death; Trouble in breathing; chills; sweating; his body was really cold; A spontaneous report was received from a consumer concerning a 79 years old, male patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced events death, trouble in breathing/dyspnoea, chills, sweating/hyperhidrosis and his body was really cold/hypothermia. The patient's medical history included blood clotting, blood pressure and diabetes. The relevant concomitant medications reported were provided as medications for blood thinner, blood pressure medication and diabetes medication. On 03 Feb 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA (Lot number: unknown) through intramuscular route of administration for prophylaxis of COVID-19 infection. On 03 Mar 2021, prior to the onset of the events, the patient received their second of two planned doses of mRNA (Lot number: unknown) through unknown route of administration for prophylaxis of COVID-19 infection. On 04 Mar 2021, after second dose patient experienced sweating, his body was really cold. His wife called ambulance and paramedics had quoted that these were usual symptoms of second shot and if they want, they can take him to hospital for monitoring. The patient doesn't want to go hospital and wanted to take rest in bed. On 05 Mar 2021, at 2am, four hours after first ambulance call, his wife noticed that he was still sweating, had chills and also had trouble in breathing. She called the ambulance second time and while it arrived at home it was too late and he was already passed. All the events were provided as intervention/medically important. No laboratory data was provided. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The events trouble in breathing, chills, sweating and body was really cold were not recovered. The patient died on 05 Mar 2021, due to unknown cause of death but On 19 Mar 2021, his wife talked with primary care physician and he mentioned that vaccine is one of the contributing factors to his death and it is noted on his death certificate. Plans for autopsy was unknown.; Reporter's Comments: This is a case of sudden death in a 79-year-old female patient with a history of blood clotting, abnormal blood pressure and diabetes, who died 2 days after receiving second dose of vaccine. Very</p>

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3/31/2021	1153088	CA		F				<p>limited information has been provided at this time.; Reported Cause(s) of Death: unknown cause of death</p> <p>MAJOR HEART ATTACK; This spontaneous report received from a consumer concerned a 50 year old female. The patient's weight, height, and medical history were not reported. The patient received Covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin, and batch number were not reported) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. The Company is unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, she had major heart attack and died. It was unknown if an autopsy was performed. The action taken with Covid-19 vaccine ad26.cov2.s was not applicable. The reporter and company provided causality between Covid-19 vaccine ad26.cov2.s and major heart attack as possible. This report was serious (Death).; Sender's Comments: - covid-19 vaccine ad26.cov2.s - Heart attack. This event(s) is considered unassessable. The event(s) has an unknown/unclear temporal relationship, is unlabeled, and has unknown scientific plausibility. There is no information on any other factors potentially associated with the event(s).; Reported Cause(s) of Death: MAJOR HEART ATTACK</p>
3/31/2021	1152288	AK		91	M	1/7/2021	3/30/2021	Death
3/31/2021	1152164	TN		60	F	2/24/2021	2/26/2021	Deceased 2/26/21

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3/31/2021		1154145		87	M	2/2/2021	2/24/2021	NASAL CONGESTION, COUGH, FATIGUED, WEAK, NO APPETITE, DEATH Narrative: 02/02-VACCINE GIVEN 02/22-pt not feeling well, dry cough, nasal congestion, weakness, loss of appetite, fatigued and weak; pt was exposed to "non-covid" virus through caregiver 02/23-caregiver called telecare to report pt with 3 days fatigue, admitted to hospital 02/25-alerted that pt passed away; they thought he might have been having a mild MI and later placed him on a ventilator and was told he had Pneumonia. He passed away on 2/24/21 at 1030AM confirmed by Daughter; no record of autopsy or death note no documentation of prior covid infection, acute adr to covid vaccine, teste negative to covid on 12/28 (exposed to daughter who have covid) hospitalized 09/23-09/29/2020 due to vomiting and diarrhea, found to have elevated troponins and abnormal kidney function, discharged home; was result of working in the sun and getting dehydrated not likely that covid vaccine contributed to patient's death, but death d/t advanced age and potential exposure to non-COVID virus shortly prior to death
3/31/2021		1152267	VT	94	M	2/26/2021	3/14/2021	The patient was a Hospice patient that passed away.
3/31/2021		1152765	AZ	67	F	3/16/2021	3/19/2021	The patient has passed away 3 days after receiving the 2nd dose of the Moderna Covid vaccine. They were pronounced dead Friday March 19. The patient lived alone and was on unreachable Thursday March 18th. The patient was found deceased the next day at their residence.
3/31/2021		1152421	VT	63	F	3/12/2021	3/25/2021	hospice patieth passed away
3/31/2021		1152513	MD	62	F	1/6/2021	3/15/2021	Employee had a heart attack and past away around 3/17/21.
3/31/2021		1152648	SC	77	F	3/31/2021	3/31/2021	Cardiac arrest resulting in death. I actually do not know the name of the vaccine or which type it was it was her 2nd one and it occurred today at 1:30 pm
3/31/2021		1152674	MI	73	F	3/3/2021	3/1/2021	Patient hospitalized with shortness of breath

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3/31/2021	1152686	IL	84	M	2/17/2021	2/27/2021	Respiratory distress, Atrial fibrillation, Acute Kidney Injury, COVID 19 positive High flow nasal cannula, BiPAP machine, antibiotics
3/31/2021	1152693	DC	75	F	2/13/2021	3/12/2021	Patient received dose #1 of Moderna COVID-19 vaccine 2/13/2021. Family member reported patient death 3/12/2021
3/31/2021	1152698	NC	68	M	2/19/2021	2/21/2021	stroke -venous thrombosis
3/31/2021	1152757	ND	63	M	3/29/2021	3/30/2021	vaccine recieved 3/29/21, on 3/30/21 patient expired in his home. cause of death assumed to be cardiac related. Pt. was not feeling well after covid vaccination, therefore refused to go to dialysis (3/30/21). Collapsed in basement and was found by spouse 30 minutes later. Patient was DNR. spouse stated she feels death was not directly related to vaccine because he had several health conditions in which he has been noncompliant with and has not been following his medical providers treatment plans.
3/31/2021	1152759	NE	48	F	3/17/2021	3/25/2021	7 AM 3/25/2021 - Patient called out to husband from the bathroom where she experienced a syncopal event, then passed out. An ambulance was called and she was revived for a short period of time. She was taken to Hospital where she coded 3 times. She was then life-flighted to second Hospital. According to the hospital records, tests conducted over the course of several days determined that she had no neurological activity. Initial reports in the records indicate pulmonary embolism, cardiac and respiratory arrest. She was on life support for the remainder of her time. Organ donation is being pursued at present and results of this are pending at time of this report submission. Date of death is unknown until organ retrieval is accomplished. Family will be contacted in the next few days to ask further questions about any other kinds of vaccine-related reactions that may have happened more immediately to days after the vaccination on 3/17/2021. A co-worker thought that she had shortness of breath for 3-4 days before this critical event occurred on 3/25/2021.
3/30/2021	1147418	IN	71	F	3/19/2021	3/25/2021	Patient died 6 days after 2nd Moderna vaccine.

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3/30/2021		1147151	WI	66	M	3/10/2021	3/12/2021	Received email from Public Health Nurse that patient had passed away on 3-16-21. The coroner did not believe it was associated with the vaccine, just reporting the death. Requested VAERS form still be filled out.
3/30/2021		1147848	IL	74	F	1/19/2021	1/22/2021	Approximately 3-4 days after her first immunization, patient became ill. She contacted our triage line 6 days after immunization with report of chills and weakness. She presented to Medical Center Emergency Room where she was admitted for hypoxia. She was subsequently diagnosed with COVID by PCR. She developed respiratory failure, worsening kidney failure necessitating dialysis, c diff colitis, GI bleed, and acute heart failure. Despite maximal efforts by the ICU/hospitalist team and specialists her conditioned worsened. She was made comfort care and died on 2.26.21
3/30/2021		1147210	AZ	61	M	3/16/2021	3/22/2021	Massive heart attack, yelled for help to wife, 10 seconds later no pulse, called EMT, could not revive, DOA at hospital
3/30/2021		1145721			U			COVID-19 INFECTION (COVID-19, COVID-19) This spontaneous report received from a consumer via a company representative and concerned a patient of unspecified age and sex. The patient's weight, height, and medical history were not reported. The patient received covid-19 vaccine ad26.cov2.s (suspension for injection, route of admin not reported) dose, start therapy date were not reported for prophylactic vaccination. The batch number was not reported. We are unable to perform follow-up to request batch/lot numbers. No concomitant medications were reported. On an unspecified date, the patient developed covid-10 infection. On an unspecified date, the patient died from covid-19. It was unknown if an autopsy was performed. The action taken with covid-19 vaccine ad26.cov2.s was not applicable. This report was serious (Death).
3/30/2021		1147303	MN	72	M	1/31/2021	3/19/2021	Patient death within 60 days of receiving a COVID vaccine

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3/30/2021	1147326	IL	76	F	3/24/2021	3/27/2021	Patient received 1st vaccine on 3/24 with no issues reported. Patient returned on FRiday for routine treatment and was afebrile, BP within normal limits and no compliants. Left the unit stable post treatment. Patient passed away on Saturday morning. There was no hospitalization. Patient went straight from home to the funeral home. Daughter states that patient had been feeling warm since Wednesday.
3/30/2021	1147354	MN	63	F	3/6/2021	3/22/2021	Patient death within 60 days of receiving a COVID vaccine
3/30/2021	1147428	MN	76	F	2/19/2021	2/19/2021	Patient hospitalization and death within 60 days of receiving a COVID vaccine
3/30/2021	1147393	IN	80	F	3/1/2021	3/21/2021	Died 20 days after first vaccine.
3/30/2021	1146940	NY	71	F	2/28/2021	3/7/2021	Patient died on March 7th 2021 exactly one week after she received the vaccine. The only symptoms she exhibited was pain at the injection site.
3/30/2021	1147433	KS	77	F	3/16/2021	3/29/2021	Decedent received first Covid-19 vaccination on 03/16/2021, has not been feeling well the past week. This past week the decedent stated she had been more tired and was experiencing shortness of breath.
3/30/2021	1147392	IL	73	M	3/24/2021	3/29/2021	Death--Patient woke up in morning and c/o not feeling well. Died in route to hospital.

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3/30/2021	1146789		70	M	2/27/2021	3/13/2021	death Narrative: Pt received COVID vaccine dose #1 on 2/27 at facility. Pt admitted to Hospital d/t COPD exacerbation and severe hypoxia. Pt with longstanding hx respiratory complications including air hunger, use of continuous oxygen, panic attacks and pain requiring narcotics (also impacted respiratory drive). Pt evaluated by palliative care/hospice services at Hospital and was deemed appropriate for end-of-life care. Pt unable to discharge home for home hospice services, therefore remained at Hospital where he later passed away. Pt's wife called facility 3/29 to report the death of patient, exact date of death was 3/13. Anticipated cause of death includes respiratory failure d/t severe COPD, hypoxia and narcotic use. Was pt previously covid positive? No Are there any predisposing factors (i.e. PMH, HPI, allergy history etc) for patient experiencing adverse drug event? No Any occurrence of an ADR at time of administration or during time of observation? No Was there and ADR between observation period and date of death? No Was patient hospitalized prior to vaccination? No Was patient hospitalized between vaccination and date of death? Yes - d/t severe hypoxia and COPD exacerbation Was hospitalization attributable to ADE ? No Was patient hospitalized prior to death Yes What are the possible cause of death? severe COPD, hypoxia, reduced respiratory drive d/t narcotic use (chronic pain)
3/30/2021	1146788		81	M	3/10/2021	3/11/2021	patient passed away Narrative: Family member reported patient passed away day after receiving the covid vaccine
3/30/2021	1146787		93	M	3/2/2021	3/15/2021	death Narrative: Pt has been declining prior to starting COVID vaccine doses; then he got COVID after first dose (VAER reported); and then was admitted to hospice for dyspnea, chronic pain, pressure ulcers, urinary incontinence with foley catheter in place, bedbound, dysphagia.

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3/30/2021	1146785	VA		F			She died in the bathroom on the second day.; This is a spontaneous report from a contactable consumer. This reporter reported similar events for 3 patients. This is 2nd of 3 patients. A female patient of an unspecified age received bnt162b2 (BNT162B2, PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date as single dose for covid-19 immunisation. The patient medical history was not reported. The patient's concomitant medications were not reported. It is reported the patient died in upstate. Waiting on the autopsy. She died in the bathroom on the second day. It was not expected. The patient died on an unspecified date. It was not reported if an autopsy was performed. The outcome of the event was fatal. Information on Lot/Batch has been requested.; Reported Cause(s) of Death: She died in the bathroom on the second day.
3/30/2021	1146779	MS		M			passed away; This is a spontaneous report received from a contactable consumer reporting for a male patient of unspecified age that received second dose of BNT162B2 via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. Medical history and concomitant medications were not reported. It was reported that the patient passed away late Saturday night after receiving his second COVID-19 Vaccine on Friday. An autopsy was not performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained; Reported Cause(s) of Death: passed away
3/30/2021	1146768	KY	66	F	3/26/2021	3/29/2021	Death

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3/30/2021	1146761	IN	81	F	2/6/2021	3/4/2021	<p>~~widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; "widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; "widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; Cardiogenic shock; Anterior myocardial infarction; This is a spontaneous report from a contactable consumer. An 81-years-old female patient received BNT162B2, dose 2 via an unspecified route of administration, administered in left arm on 06Feb2021 (Batch/Lot number was not reported) as single dose for COVID-19 immunisation. Medical history included very sensitive to medication effects (usually takes only 1/2 dose with strong efficacy to avoid side effects). Breast cancer survivor (2014 onset, 2019 declared permanent remission) and mild blood pressure treated successfully with medication for about 10 years. Concomitant medications included spironolactone and valsartan, both taken for blood pressure. The patient previously received first dose of BNT162B2 on 16Jan2021 in left arm for COVID-19 immunization. The reporter's mother died 3 weeks and 6 days after having received the second dose of the Pfizer covid vaccine. The cause of death was a "widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; the event began about 11:45pm on 04Mar2021. The blockage was confirmed via cardiac cath procedure performed within 2 hours of the onset by Doctor, he removed the clot and placed a stent. However her heart was too damaged and could not recover. Doctor confirmed to us that she did not have excessive or evidence of any prior blockage and not excessive plaque. The blood clot likely came on and caused the cardiac event within roughly an hour, he explained. The patient had no prior symptoms and no comorbidities for blood clotting and was full of life and energy on 05Mar up to when she went to bed that night. She died 06Mar at 4:04 am at hospital. The strat date of the events was reported as 04Mar2021 at 11:45 PM. AE resulted in emergency room/department or urgent care, life threatening illness (immediate risk of death from the event). The patient died on 06Mar2021. An autopsy was not performed. The death cause: Triggered by the sudden 100% blockage of the LAD by a blood clot, the cause of death is listed as (A) Cardiogenic shock (B) Anterior myocardial infarction.</p>

RECVDATE VAERS_ID STATE AGE_YRS SEX VAX_DATE ONSET_DATE SYMPTOM_TEXT

Treatment was received for the events which included multiple resuscitations and angioplasty surgery. No covid prior vaccination, no covid tested post vaccination. The outcome of the events was fatal. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: "widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; "widow maker" type heart attack where the LAD artery suddenly became 100% blocked by a blood clot; "widow maker" type heart attack where the LAD artery

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3/30/2021	1146708	CA	65	M	3/14/2021	3/16/2021	not feeling; Patient was found deceased; Stiffness in neck; Extreme fatigue; A Spontaneous report was received from a consumer concerning a 65-year-old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced stiffness in neck/ musculoskeletal stiffness, extreme fatigue and patient was found deceased/Death. The patient's current condition included obesity and diabetes. Concomitant medication was not reported. On an unknown date, the patient received his first of two planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 14 Mar 2021, prior to the event, the patient received his second of two planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 14 Mar 2021, after receiving the second dose of the vaccination the patient began to complain of not Feeling. On 16 Mar 2021, the patient began to complain of stiffness in neck and extreme fatigue. On Wednesday 17 Mar 2021, the patient was found deceased in their home. The event deceased was reported as serious. The family member states they would hate to link the Moderna vaccination to their uncle's death but the vaccination was the only alteration of the patient normal diet and medications. Treatment medication was not reported. The patient died on 17 Mar 2021. It was unknown if autopsy was performed. Action taken with the drug in response to the events was not applicable. The outcome of the event patient was found deceased was fatal whereas outcome of other events stiffness in neck, extreme fatigue was unknown.; Reporter's Comments: This is a case of sudden death in a 65-year-old male subject with a hx of obesity and diabetes who died 3 days after receiving the second dose of vaccine. Very limited information has been provided at this time." Further information is requested.; Reported Cause(s) of Death: Death

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3/30/2021	1146678	OH	84	F	2/26/2021	3/7/2021	Patient received 1st dose Pfizer COVID vaccine on 2/5/2021 and second dose on 2/26/21. She had no adverse reaction to either dose. Around 3/2/2021, she saw her physician complaining of pain in her arm, which was attributed to gout. At the time, she also had a nonproductive cough, generalized weakness and one episode of loose stool. She presented to the emergency room on 3/7/21 with significant hypoxia. She tested positive for COVID 19 by both rapid test and PCR. A quantitative test for COVID antibodies was sent out to a reference lab on 3/7/2021 and resulted on 3/11/2021 as >250 U/mL. Pt. required CPAP, BiPAP, High Flow Oxygen and ultimately intubation. Was not oxygen dependent before hospitalization. Pt. treated with dexamethasone, 2 doses of Remdesivir (then held due to acute kidney injury), tocilizumab X 1 dose, 1 unit COVID-19 convalescent plasma. Pt. expired on 3/19/2021. Sample sent for genome sequencing to check for variants of interest in joint effort between pathology and infectious disease. Report not yet available.
3/30/2021	1146467		100	M	2/3/2021	3/27/2021	NA- patient refused second dose of vaccine - Patient condition at time of death Chronic Conditions Renal failure Advanced age 100 y/o Cardiopulmonary arrest secondary to Covid 19
3/30/2021	1146461		88	F	2/8/2021	2/21/2021	Death Shortness of Breath A-fib COPD exacerbation Pneumonia
3/30/2021	1146320	WV	75	M	3/11/2021	3/12/2021	Flu symptoms 14 hours after injection. Respiratory failure within 22 hours after injection leading to death
3/30/2021	1146282	PR	94	M	3/1/2021	3/23/2021	On 3/23/2021 he had respiratory problems and high blood pressure, for which he was transferred to the hospital and days later he died.

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3/30/2021	1146288	MI	82	F	3/24/2021	3/24/2021	Vaccine administered at 1816. Patient walked to the observation area and while in the observation area, got up to use the restroom. Patient exited the restroom and said she needed assistance. She indicated to the observation nurse that "this ain't good" or "this ain't right". Patient reported seeing spots and having chest pain. The time was approximately 1830. She was assisted to the floor. Help was summoned and 911 called at approximately 1834. Upon being lowered to the floor patient was breathing, she was not cyanotic, her eyes were open and she was not responsive. The patient had a pulse. Sometime after 1830, but before 1835, the patient was observed to have seizure like activity as bilateral
3/30/2021	1148451	AR	87	F	3/3/2021	3/5/2021	Described patient feeling fine the day after the vaccine (3/4/21), but by 3/5 she wasn't feeling well and was on the couch all day. By 3/8 she couldn't get out of bed, then was subsequently admitted to the hospital. Patient remained in hospital for ~2 weeks before passing away on 3/29/21.
3/30/2021	1147469	MN	91	M	3/5/2021	3/15/2021	Patient was hospitalized and died within 60 days of receiving a COVID vaccine series
3/30/2021	1149202	TX	57	M	3/9/2021	3/25/2021	Per ED Provider Report, the patient collapsed while outside on 3/25/21. Ambulance was called to the scene where patient was found unresponsive. Patient was transferred to Hospital. Patient was in full cardiac arrest upon arrival. CPR was initiated. Patient deceased. Patient's mother stated the patient had been feeling badly for 2-days, but refused to seek medical treatment.
3/30/2021	1148858	MI	85	M	3/26/2021	3/29/2021	UNKNOWN. PT'S WIFE CALLED US TODAY 3/30/2021 TO INFORM US THAT PATIENT PASSED AWAY ON 3/29/2021 DUE TO MASSIVE HEART ATTACKED
3/30/2021	1148826	IL	95	M	2/26/2021	3/22/2021	Overall Decline w/congestion and ABT tx, Hospice Care, Crisis Care, Expired
3/30/2021	1148527	IL	95	F	2/5/2021	3/1/2021	Overall decline, Hospice, Crisis Care, Expired
3/30/2021	1147783	OH	57	F	3/24/2021	3/25/2021	Had 2nd COVID shot died next day physician advised me to notify.

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3/30/2021	1148390	NC	67	F	3/5/2021	3/6/2021	Diarrhea, Pulmonary embolism resulting in death
3/30/2021	1148354	IL	87	F	3/12/2021	3/17/2021	Patient felt ill afterwards, did not regain typical activity level, found deceased in home on day 5 after 2nd dose
3/30/2021	1148285	SD	75	M	3/1/2021	3/21/2021	Death
3/30/2021	1148250	IL	66	M	3/19/2021	3/28/2021	3/28/21 ER HPI 66 y.o. male who presents with cardiac arrest. Wife said patient went to load machines in the truck between 6:30 p.m. to 7:00 p.m. and about 745 p.m. when she did not see him, she went searching for him and found him about 8:15 p.m. without pulseless and cold. EMS was called and they got there about 8:23 p.m. and started CPR and brought the patient to the emergency room at at 9:05 p.m. and he was certified dead at 2110 p.m.
3/30/2021	1148224	PA	89	M	2/25/2021	2/27/2021	on 2/27 patient's wife called and stated that he had fatigue, body aches, low grade fever, and poor appetite. on 3/4, patient's wife called and stated he had some shortness of breath and extreme fatigue. on the evening of 3/4, he experienced sharp back pain and shortness of breath and was taken by ambulance to the hospital, where he was diagnosed with CHF exacerbation and NSTEMI and worsening CKD. he developed cardiogenic shock and renal failure. on 3/10 he was started on milrinone, then on 3/11 he went into pulseless VT and expired.
3/30/2021	1148215	AK	95	F	1/8/2021	3/26/2021	Death
3/30/2021	1147591	WA	64	M	3/26/2021	3/27/2021	Patient received vaccine on 3/26/2021. Was found deceased on 03/27/2021
3/30/2021	1148585	IL	78	F	2/5/2021	2/16/2021	Overall Decline, Hospice Care, Crisis Care, Expired.
3/30/2021	1148204	MA	58	M	1/26/2021	2/5/2021	My husband died on Feb 5. 2021. I do not know if the vaccination had any effect but he died of heart attack from Coronary Artery Disease which was unknown.
3/30/2021	1147527	GA	68	M	3/2/2021	3/16/2021	Pt. died due to natural causes at home

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3/30/2021		1147576	DE	89	M	3/5/2021	3/13/2021	HE HAD A RECTAL BLEED AND WAS ON ELIQUIS, SO THEY STOPPED ELIQUIS, THEY SAID THE CAUSE OF DEATH WAS CONGESTIVE HEART FAILURE
3/30/2021		1147518	MN	71	M	2/24/2021	3/20/2021	Patient death within 60 days of receiving a COVID vaccine
3/30/2021		1147618	NY	57	F	3/22/2021	3/29/2021	cardiac arrest
3/30/2021		1147625	MN	74	M	3/4/2021	3/20/2021	Patient death within 60 days of receiving a COVID vaccine
3/30/2021		1147758	AR	63	F	1/23/2021	1/25/2021	headaches, coughing, fatigue, fever, chills, nonapeptide, vomiting
3/30/2021		1147793	CA	79	F	2/18/2021	2/19/2021	she got couple episodes of vomiting next day of vaccine and by the day after morning she became unresponsive and took to ER and found benign meningioma (not known before) and uncle herniation, thalamic infarct and followed by went for the decompressive surgery at the and brought home after 2 week and at the 3 rd week put on hospice and died on 03/18/2021. She would be alive today if she hasn't received vaccine.
3/30/2021		1147948	KY	86	F	1/20/2021	1/21/2021	Received Vaccine 1/20/21 1/21/2021 Morning: Nursing staff noted decreased O2 Saturation and put her on an oxygen mask 1/21/2021 Night: Patient found unresponsive, not breathing. DNR. Pronounced Expired
3/30/2021		1148091	IL	78	M	2/5/2021	2/24/2021	Hospice Care. End of Life. Expired.
3/30/2021		1148157	IL	90	M	2/5/2021	2/10/2021	Hospice Care, Crisis Care, Expired.
3/29/2021		1143266		74	M	2/19/2021	3/25/2021	Death
3/29/2021		1143222		70	M	2/20/2021	3/20/2021	CHEST PAIN WEAKNESS - GENERALIZED Hyperkalemia Lactic acidosis Hyponatremia SEPSIS EKG abnormalities Acute kidney injury (CMS/HCC) Neutropenia (CMS/HCC) DEATH
3/29/2021		1143239	PR	87	M	2/11/2021	2/27/2021	He was taken to hospital 2/27/2021 for respiratory problems, diagnosed with pneumonia and died in hospital.

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3/29/2021		1143240		84	M	3/5/2021	3/17/2021	Acute renal failure (ARF) (CMS/HCC) Septic shock (CMS/HCC)
3/29/2021		1143254		72	M	3/17/2021	3/24/2021	Death
3/29/2021		1143063	PR	72	M	2/15/2021	3/24/2021	POC alleges that the resident was eating days before but, on 3/24/2021 he did not want to eat in the afternoon, he took a Pediasure around 4 pm, at 6 pm, caregivers on their rounds found him foaming at the mouth. It was heard with phlegm. They refer him to the hospital, they take a chest plate and indicate that everything was fine. Dies by aspiration, due to cardiac respiratory arrest.
3/29/2021		1143277		84	F	3/10/2021	3/19/2021	Altered mental status Intracranial hemorrhage (CMS/HCC) Hypertension Cerebral brain hemorrhage (CMS/HCC)
3/29/2021		1143334	PR	90	F	2/23/2021	3/4/2021	The doctor diagnosed the death as aspiration pneumonia.
3/29/2021		1143356	PR	80	F	1/19/2021	2/2/2021	Breathing difficulties, not taken to hospital, managed at home. Certifies respiratory arrest.
3/29/2021		1143393	PR	87	F	3/4/2021	3/15/2021	Before receiving the vaccine, she was deteriorating, but relatives agreed to vaccinate her. Last week she began to have swallowing problems, she was not eating. They started with serum, supplements, and nasogastric.
3/29/2021		1143895	KS	55	F	1/13/2021	1/18/2021	13th of January received first Moderna shot. 18-19th began to have headaches 22nd headaches worsened 25th at the doctor's (tested negative nose swab) home till 28th (28th tested positive for corona after having her first shot at Advent) stroke symptoms at school 28th Advent did CT scan MRI venous thrombosis diagnosis, from front to back, hemorrhage in the northern hemisphere 29th blood thinner administered to attempt to drain clot, seizures 31st passed away
3/29/2021		1144220	FL	84	F	3/12/2021	3/28/2021	Bacteremia - strep epidermidis, developed respiratory distress required intubation for hypercapnic respiratory failure. Developed PEA on 3/28 died.

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3/29/2021	1143040	PR	84	F	1/25/2021	2/3/2021	During the last month she was losing weight, reflux due to having PEG, low blood pressure, lack of tension. They notified relatives and hospice, she lost mobility, stopped urinating. Respiratory cardiac arrest and end-stage Alzheimer's certified
3/29/2021	1144095	VA	75	M	3/15/2021	3/15/2021	The patient started having breathing issues and increased heart rate 5 hours after vaccine administration. He was transported to Hospital where he later passed away.
3/29/2021	1143017	PR	87	F	2/15/2021	2/16/2021	Low BLP, dies at Hospital
3/29/2021	1142999	PR	73	F	2/24/2021	3/5/2021	Patient have generalized weakness for the last few months, she stop chewing. On 3/4/2021 he stopped reacting to stimuli and had dilated pupils. Certified Alzheimer's deseases, cerebral aneurysm.
3/29/2021	1142995		62	F	3/20/2021	3/25/2021	Death
3/29/2021	1142982	PR	88	F	2/22/2021	2/24/2021	Cold symptoms (cough with phlegm) Weakness Low oxygenation
3/29/2021	1142975		79	F	1/29/2021	3/24/2021	Death
3/29/2021	1142969		58	M	3/4/2021	3/22/2021	Thrombocytopenia (CMS/HCC) Prostate cancer (CMS/HCC) Pain VOMITING DEATH
3/29/2021	1142965	NC	74	M	3/17/2021	3/17/2021	Following the vaccination, individual ate lunch and then returned home. Later found deceased in chair in home ~8 hours after vaccine. No known symptoms. However no one was at home with individual for prolonged period of time during this time frame.
3/29/2021	1142957		86	M	2/16/2021	3/22/2021	SHORTNESS OF BREATH Pleural effusion Acute renal failure superimposed on chronic kidney disease, unspecified CKD stage, unspecified acute renal failure type (CMS/HCC) DEATH
3/29/2021	1142953		83	M	2/27/2021	3/26/2021	death
3/29/2021	1142950		90	M	2/26/2021	3/26/2021	ALTERED MENTAL STATUS Bradycardia Elevated troponin Non-traumatic rhabdomyolysis Death
3/29/2021	1142806		80	M	2/16/2021	1/28/2021	altered mental status cardiac arrest hyperglycemia death

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3/29/2021	1144235	NY	71	F	3/23/2021	3/23/2021	Patient deceased on 3/23/2021.
3/29/2021	1142674	MN	84	F	3/26/2021	3/26/2021	She developed chills she couldn't control and fell asleep all afternoon, evening and through the night. I spoke with her twice and my uncle and aunt checked on her three times, all three she was freezing cold and too tired to get up. In the morning, she was dazed, cold and walked to the bathroom, where she collapsed to her death. Paramedics could not revive her. My mom died Saturday morning - within the 24-hour period of her vaccine. She was feeling so great leading up to it, active, stripping the guest bedroom sheets, bubbly, and excited for us to be able to finally visit her soon.
3/29/2021	1143912	OH	67	M	3/10/2021	3/10/2021	Suspected pneumonitis. Patient presented on day following vaccination as shortness of breath, nausea, and diarrhea were not abating with home management. They had started later in the day after the vaccination. At ER admission - SpO2 = 80% room air. Nasal cannula was applied and SpO2 recovered quickly. BNP was elevated so acute exacerbation of heart failure was suspected and treated. However, patient did not improve with diuresis. Viral workup and bacterial cause workup negative. No acute cardiac events discovered. Patient continued to decline. Transferred to ICU on 3-19-21 to use BiPAP with 65% FiO2 and able to take breaks to 15L nasal cannula. Borderline blood pressures at this time. Infectious disease, pulmonology, cardiology, nephrology, and critical care anesthesia services evaluated and ruled out multiple possible diagnoses and patient continued to decline. Diagnostic bronchoscopy on 3-22-21 with BAL lead to patient ventilator dependent with profound hypotension. Aggressive ICU management ensued. Bronchoscopy very clean with no real secretions - in line with CT evidence of pneumonitis. Despite aggressive care and maximized pressor support, patient expired on 3-29-21 when family chose to withdraw care as blood pressure declined again.

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3/29/2021	1142724	IA	71	F	3/11/2021	3/13/2021	PATIENT RECIEVED FIRST SHOT ON FEBRUARY 18TH AND SHOWED NO OBVIOUS SIGNS, SYMPTOMS, OR ISSUES. PATIENT RECIEVED THE SECOND SHOT ON MARCH 11TH SHOWED NO IMMEDIATE SIGNS OR SYMPTOMS UNTIL A DAY AND A HALF LATER ON MARCH 13TH WHEN PATIENT SUDDENLY STOPPED BREATHING AND WENT INTO CARDIAC FAILURE FOR NO APPARENT REASON.
3/29/2021	1145662	ME	97	M	3/12/2021	3/13/2021	Pfizer-BioNTech COVID-19 Vaccine treatment under Emergency Use Authorization(EUA): The decedent received their vaccine and had no reaction. He was found dead in bed the next morning.
3/29/2021	1145434	NC	92	F	3/26/2021	3/26/2021	Acute onset shortness of breath approximately 11-12 hours post second dose of Moderna covid vaccine. EMS responded and briefly performed CPR before DNR was produced and life saving measures were discontinued. Patient subsequently expired.
3/29/2021	1145488	CA	74	F	2/25/2021	3/28/2021	Death
3/29/2021	1145508	IL	89	F	2/4/2021	3/1/2021	Patient presented to the ED 2/6/2021 with increasing SOB and found to have abnormal labs as an outpatient. Patient was found to be COVID positive on 2/6/2021 as well. Patient was discharged on 2/9/2021 for acute decompensations diastolic HF. At 2/19/2021 visit with Nephrology, patient found to have hypervolemic hyponatremia, not responding to oral diuretics and decision was made to manage as an inpatient. Patient found to have cardiomegaly, mild pulmonary vascular congestions with small bilateral pleural effusions, EF 59%, severely elevated pulmonary artery systolic pressure, and had a AKI. Patient did not improve with diuretic therapy. Hospice and comfort care measures were pursued and patient expired on 3/1/2021.

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3/29/2021	1145510		95	M	3/19/2021	3/20/2021	Patient seen at my office 3/18/2021 (ambulatory). Had dose 2 on 3/19/21. The next morning around 5am (3/20), he had difficulty get to bathroom. Was holding onto the sink because his legs would not work. Family had to help him use bathroom and get him back into bed. Family got him bedside commode that day and even then had severe weakness like a "bowl of jelly". Had mild cough and neighbor listened to lungs and was clear. Cough cleared and had labored breathing intermittently. His breathing became more labored and he slept a lot and then breathing "kind of erratic" and then breathing slowed down and got slower and slower until he stopped breathing altogether. Passed on 3/21/2021.
3/29/2021	1145526	CA	38	F	3/13/2021	3/14/2021	3/13- First shot of Moderna vaccine received. 3/14- Sore arm, chills and a headache. 3/15- Shortness of breath and rapid heartbeat. 3/16- Went to ER because of more severe shortness of breath and rapid heartbeat. 3/17- COVID test with negative result. 3/19- Patient messaged her PCP explaining persisted symptoms. 3/23- Chest pain and shortness of breath developed and she died at ER in PEA. 3/25- Autopsy showed pulmonary embolism with no evidence of peripheral vascular disease. Double check COVID test with negative result.
3/29/2021	1145320		74	F	3/27/2021	3/27/2021	Patient reviewed vaccination at 1:20pm. She was observed for one hour per MD. At 5:18, she became unresponsive in her wheelchair and became blue with no palpable pulse. Patient had a DNR status and was not revived.
3/29/2021	1145552	IL	67	M	2/23/2021	3/8/2021	Patient expired 3/8/2021 at home. Coroner pronounced time of death at 0415 and assumed cause of death was history of transplant and cardiac.
3/29/2021	1145423	IL	88	F	3/12/2021	3/26/2021	3/26/21 ER to Inpt Admission: Patient was admitted to the hospital for comfort measures after patient suffered MI and did not want any life-prolonging therapies. Patient was started on comfort medications and symptoms were monitored closely. The patient passed peacefully before she could be fully assessed

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3/29/2021	1145887	PA	58	F	3/23/2021	3/28/2021	She received the vaccine on March 23. On March 28 she felt unwell and early on March 29, 2021 developed severe headache and came to the Medical Center ER. She had a large intracranial hemorrhage. Platelet count was 4,000. She had a normal platelet count in December 2020. She had not received chemotherapy for her breast cancer, only radiation. The hemorrhage rapidly expanded. She was intubated and admitted to the ICU under my care. Her husband opted for palliative extubation and she died soon after.
3/29/2021	1145916	CA	59	F	3/7/2021	3/7/2021	Extreme rigors, fever, shortness of breath/hypoxemia within hours of receiving vaccine according to staff at the care home. leukopenia, pulmonary edema, death
3/29/2021	1145918	IN	28	F	1/19/2021	1/20/2021	As reported by the patient's mother, the patient received the vaccine on 1/19/21, "got sick" on 1/20/21, and died in the early morning hours of 1/21/21. No further information was offered.
3/29/2021	1146022	NY	90	F	3/22/2021	3/24/2021	on 3/24, she had decreased level of alertness, eating less, but continued to drink. On 3/25, appeared a bit better, but still not at baseline. drinking fluids but not eating. she vomited up black material and then passed away on 3/25.
3/29/2021	1144355	AZ	52	F	3/20/2021	3/21/2021	no details provided, informed patient died on 3/21/21
3/29/2021	1143613	PR	92	F	2/2/2021	2/3/2021	He was going to be discharged from Hospice on Monday 2/15/2021. The patient was in Hospice due to a stroke. The nurse indicates after the vaccine she started with stomach pain and vomiting. Hospice evaluated her, she was given Pedialyte and then she died on 2/19/2021
3/29/2021	1145531	IA	76	M	2/12/2021	2/24/2021	Pt diagnosed with COVID-19 despite 2 COVID vaccines (first given 1/15/2021. Pt developed respiratory symptoms, including dyspnea, which progressed over 3.5 weeks and then systemic symptoms of myalgias, malaise. He was admitted 3/21/2021 and had positive NP swab for SARS-CoV-2 x 2. He required admission to ICU and died of respiratory failure on 3/28/2021.

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3/29/2021	1144826		39	M	2/17/2021	3/5/2021	received word that the patient passed away on 3/5/2021. Do not know the cause of death, nor where he passed away. He does not have any significant medical history at Health Care Corporation, but did get his first vaccination here on 2/17/2021.
3/29/2021	1144356	KY	81	M	2/3/2021	2/22/2021	Pfizer COVID -19 Vaccine EUA Patient's wife reported to facility, upon contacting for 2nd dose appointment, that the patient passed away from COVID-19. This patient did not pass away at facility, as there are no records of this patient in our EHR. Per patient's wife, patient was vaccinated on 2/3/21 at the clinic with the initial Pfizer COVID-19 vaccine. The patient passed away on 2/22/21 from COVID-19 (3 weeks after the initial dose, but prior to the booster dose). Pfizer/BioNtech NDC# 59267-1000-2 Pfizer/BioNtech Lot # EL9269 Lot Exp: 05/30/2021 Site: left Deltoid Time of vaccination: 2/3/2021 6:15:53 PM
3/29/2021	1144468	KY	90	F	3/24/2021	3/26/2021	NAUSEA, VOMITING AND DIARRHEA 48 HOURS AFTER VACCINE.
3/29/2021	1144499	WA	73	F	2/5/2021	3/5/2021	pts arm was bothering her after taking the covid vax. On 3/10/2021 pt went to Hospital to have a Echocardiogram procedure. Pt was sent home. The next day pt was vomiting and heaving. Her blood pressure was high and she was having symptoms of a heart attack. 911 was called. First Responder was first to arrive so pt was put on gurney and put on a flight to Hospital. Pt was loaded for the heart flight but perished in flight to the hospital due to cardiac arrest.
3/29/2021	1146141	NY	73	F	3/11/2021	3/12/2021	My mother didn't feel well after the 2nd shot. She died in her bathtub overnight 3/12 into 3/13
3/29/2021	1144617	MD	69	F	3/27/2021	3/27/2021	Patient was found deceased in her home by her daughter 9+ hours after receiving the vaccine. There was no indication of how long the patient had been deceased prior to being discovered.

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3/29/2021	1145479	WI	87	F	3/27/2021	3/27/2021	Patient received vaccine at 10:18am and then went home with no reaction in the vaccination POD. EMS was called to the patients home shortly before 2:30 that afternoon. When EMS arrived patient was posturing with lower extremities extended in plantar flexion. Last seen normal 30 minutes prior. she was also tachycardic and in respiratory distress with sonorous respirations. Cranial nerve deficit present GCS 3. She was unresponsive and intubated. Airlifted after CT to hospital. She died at 1647 at Hospital from hemorrhagic stroke.
3/29/2021	1144818	MN	83	M	2/15/2021	3/24/2021	Patient death within 60 days of receiving a COVID vaccine
3/29/2021	1145251	MA	98	M	3/25/2021	3/27/2021	Ppt collapsed at home on 3/27/2021 late morning. Presented to ED on 3/27/21 from home around 11am with altered mental status. Was found to have a hyper acute stroke per CT head (intracranial hemorrhage). Ppt was pronounced on 3/28/2021 at 1:45pm. UNSURE IF DEATH RELATED TO VACCINE.
3/29/2021	1145005	IL	66	F	2/16/2021	3/10/2021	Patient presented to the ED on 3/4/2021 with left facial droop, left-sided weakness, and dysarthria that started upon awakening that morning. Patient found to have an ischemic stroke and ultimately admitted to hospice. Patient expired on 3/10/2021.
3/29/2021	1145054		44	F	3/13/2021	3/14/2021	patient received 2nd dose of Moderna on 3/13/2021; reported by Police Department as having passed away on 3/14/2021. No other details available.

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3/29/2021		1145135	SC	94	F	1/22/2021	1/23/2021	My mom received her first Moderna Vaccine on 1/22/21. Late on 1/23 her face began to swell so the staff called the ambulance to come take her to the hospital for what they thought was an abscessed tooth. ER doctor said there was an infection and that she needed to be seen by an oral surgeon. On 1/25/21 I took my mom to Dr., her oral surgeon and after the examination he advised that there was no abscess but an allergic reaction to the Moderna vaccine. He suggested Benadryl. I gave her benadryl and the swelling started subsiding. From this point on her gums and teeth hurt. Her eating habits started to decline. She received her 2nd Moderna vaccine on 2/19/21 and from that point on she could no longer chew or brush her teeth because the pain was so severe. She passed on 3/19/21.
3/29/2021		1145183	NC	70	M	3/25/2021	3/26/2021	25 hours after receiving Covid vaccine, patient began seizing and went into cardiac arrest. Daughter began CPR and continued until EMS arrived. Patient subsequently passed away at Hospital.
3/29/2021		1145196	MS	86	F	3/8/2021	3/10/2021	Patient was found deceased by her son 2 days following vaccination. Coroner stated heart attack was the likely cause of death. However, a autopsy was not performed before the body was cremated.
3/29/2021		1145219	MA	85	M	3/25/2021	3/27/2021	Left-sided weakness, slurred speech
3/28/2021		1141402	FL	77	M	2/18/2021	2/19/2021	Dad had a heart attack either on February 19th or 20th. He was found dead on the morning of February 20th.
3/28/2021		1140697	VA		F			She passed one to two days after the shot; This is a spontaneous report from a contactable consumer. A female patient of an unspecified age received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. Patient died after receiving the COVID vaccine. She passed one to two days after the shot. It was not expected. Waiting on the autopsy. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: She passed one to two days after the shot

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3/28/2021	1142078	NY	97	F	3/5/2021	3/25/2021	Patient was a high functioning 97-year-old female with a history of CLL diagnosed 1 year ago on no treatment prior to arrival, chronic stable thrombocytopenia, chronic kidney disease, past history of breast cancer and bladder cancer in remission, transfusion dependent anemia of chronic disease, covid 19 vaccination on 3/5/2021, who presented to the emergency room on 3/25/2021 unresponsive found by the family and emergency services was called. The paramedics found her temperature to be 101.6 and her room air sat was 87%. In the ER CT of the head revealed acute subarachnoid hemorrhage. There was no trauma. CT the abdomen and pelvis showed lymphadenopathy and splenomegaly consistent with her known CLL and new bilateral lung infiltrates. Patient's white blood cell count was 124,000 consistent with her known CLL. Patient prior was high functioning and still drove herself to her doctor's appointments. The day prior she told her son she was feeling slightly nauseous and ill and went to bed early. She was admitted with a subarachnoid hemorrhage which was felt to be spontaneous and not traumatic. She was not on any anticoagulation prior to arrival. She was also admitted with severe sepsis felt possibly due to aspiration pneumonia or pneumonia in general and she did have fever and bilateral infiltrates on imaging. covid 19 and influenza neg. The decision was made to place her on comfort care after discussion with family. She ultimately expired on 3/28 At 14:48 PM in the presence of her family
3/28/2021	1141262	NY	92	F	1/21/2021	1/23/2021	Moderna vaccine administered. Death resulted 48 hours later.

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3/28/2021	1140696	MI	69	F	2/2/2021	2/4/2021	Multifocal Intracerebral Hemorrhage; Disseminated Intravascular Coagulopathy; strokes, Ischemic and Hemorrhagic; strokes, Ischemic and Hemorrhagic; AML; Leukemia; Blood clot diagnosis; Sore lower leg; RDW Stand. Dev. H/RDW Coeff Var H; Platelet Count L, Platelet Vol L; Neutrophils L; Band Neutrophils H; Monocytes H; Metamyelocytes H; Myelocytes H; Absolute Neutrophils L; Other Cell Type Blast Like Cells H; This is a spontaneous report from a contactable consumer. A 70-year-old female patient received the second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE) lot number: EL9261, via an unspecified route of administration, administered in Arm Right on 02Feb2021 08:30 (Batch/Lot Number: EL9261) as SINGLE DOSE for covid-19 immunisation. Medical history included breast cancer (8 years ago no chemo just radiation). Historical vaccine included first dose of BNT162B2 (lot number: EL0140) on 11Jan2021 for Covid-19 immunization. Concomitant medication included vitamin c [ascorbic acid] (VITAMIN C [ASCORBIC ACID]), calcium citrate, colecalciferol (CALCIUM CITRATE + D3), glucosamine, magnesium citrate, docosahexaenoic acid, eicosapentaenoic acid, tocopheryl acetate (OMEGA 3 [DOCOSAHEXAENOIC ACID;EICOSAPENTAENOIC ACID;TOCOPHERYL ACETATE]) and curcuma longa (TURMERIC [CURCUMA LONGA]). On 04Feb2021, the patient's blood work result showed red cell distribution width (RDW) stand. dev. high; RDW coeff var high, platelet count low, platelet vol low; neutrophils low; band neutrophils high; monocytes high; metamyelocytes high; myelocytes high; absolute neutrophils low; other cell type blast like cells high. On 15Feb2021, the patient experienced sore lower leg. On 16Feb2021, the patient was diagnosed with blood clot. On 19Feb2021, the patient was diagnosed with leukemia. On 20Feb2021, the patient was diagnosed with acute myeloid leukemia (AML). On 21Feb2021, the patient had tow types of stroke, ischemic and hemorrhagic, the patient was intubated. On 23Feb2021, the patient was extubated and died due to multifocal intracerebral hemorrhage, disseminated intravascular coagulopathy, acute myeloid leukemia with blast crisis. The patient received chemotherapy and leukapheresis as treatment. The patient died on 23Feb2021. An autopsy was not

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								performed.; Reported Cause(s) of Death: Disseminated Intravascular Coagulopathy; Acute Myeloid Leukemia With Blast Crisis; Multifocal Intracerebral Hemorrhage
3/28/2021		1141641	NJ	58	M	2/28/2021	3/2/2021	Received first Pfizer Covid19 vaccine on 2/28/21. Developed fever 102.8, chills, SOB on 3/2/21 and was transported by EMS to ER and admitted. He was tested 3 times for COVID 19 and found to be negative. CT scan was concerning for viral pneumonia and suspected COVID. He was treated and released to home on 3/4/21. Followed by pulmonologist. Received second Pfizer COVID19 vaccine on 3/21/21. On 3/23/21 developed fatigue, weakness, shakiness, nausea and vomiting. had significant decline over the week. Has acute event on 3/27/21 and was pronounced dead at home.
3/28/2021		1141968	OR	54	M	3/1/2021	3/19/2021	My husband died of a sudden massive heart attack. He was one of two teachers who died after the moderna vaccine, second dose. A third teacher had a stroke.
3/28/2021		1142047	IN	87	F	3/2/2021	3/11/2021	Patient received the injection on May 2nd. Following the injection, we noticed an increased weakness and general achiness. On the 8th she was so weak that we purchased a gait belt to assist her. We were not super concerned as we were expecting the second shot to cause body aches or flu like symptoms based on what we had heard from others who had received both vaccine shots. She continued to be unsteady and we found that she has a mild UTI which we had begun treating with prescribed antibiotics. Late afternoon on the 11th, mother suffered a major stroke. we did not take her to the hospital because we had already been told that they would not be able to do anything at her age should she suffer a stroke. On the 12th I called the doctors office and asked for them to send Hospice to the house as we could tell that she was dying. Mother died on the 13th. Just a week prior to her death I had spoken with Dr. and we had discussed how that she was declining in health but that she was not even close to needing Hospice, yet she is dead a week later. Less than 2 weeks after getting her second Covid Shot.

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3/28/2021	1141989	MA	85	F	3/24/2021	3/24/2021	Patient received Johnson and Johnson vaccine at approx 1:30 pm and passed away on 11:03 pm - May 24, 2021. Was told around 10:20 pm, the patient was experiencing trouble breathing, cold, clammy, non-responsive .
3/28/2021	1141569	NY	61	M	3/13/2021	3/23/2021	patient experienced heart attack and subsequently passed away approximately 2 weeks following vaccination. it is not believed to be related to the vaccination.
3/27/2021	1139677	NM	68	M	1/27/2021	3/23/2021	Per family pt became more somnolent, gaining weight, jaundiced after 2nd covid vaccine dose. Pt was admitted to the hospital on 3/23 with decompensated cirrhosis and ecoli bacteremia and died on 3/25.
3/27/2021	1139186	AZ	83	M	3/22/2021	3/23/2021	Hospice of Compusus nurse called and reported that patient passed away. She reported no adverse reaction and that patient had no complications before going to bed and patient did not wake up from his sleep.
3/27/2021	1139653	KS	73	M	3/25/2021	3/26/2021	Patient reported to hospital ER department the day following second vaccination. Patients issues at ER was: breathing difficulty, Respiratory arrest, Cardiac arrest, aspiration vomit. The patient died while in ER. It should be noted patient had been on hospice prior to vaccination.
3/27/2021	1139812	CA	60	M	3/17/2021	3/20/2021	Patient was found expired in his home on 3/20/2021.
3/27/2021	1139971	TX	72	F	2/1/2021	3/27/2021	Per pts husband, pt had been ? normal, ? coking and even mowing the grass prior to receiving the covid vaccine. She started to hallucinate and eventually was admitted to our facility and diagnosed with acute encephalopathy. The pt went home on hospice and has since passed. Husband reports no one will listen to him regarding the events that took place.

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3/27/2021	1140050	UT	82	M	2/3/2021	2/6/2021	Patient received his first dose of Pfizer COVID-19 vaccine on 02/03/2021. He has significant medical history, but presented to the hospital on afternoon of 02/08/2021 with report of three days of nausea and vomiting. He thought this attributed to a new cholesterol medication. He also reported some shortness of breath, mild cough, no fever. reported some epigastrium pain the day prior but since resolved. Significant other reported some significant swelling and that pt complained of feeling like he had a "blockage in his throat". Workup showed concerns of pneumonia so pt was started on antibiotics and Vitamin K. Shortly after meds started pt started complaining of itching arm and trouble breathing. He became bradycardic and lost consciousness. Resuscitative efforts initiated but unsuccessful. Time of death called on 02/08/2021 at 1737. Hospital notes report "cause of death is anaphylaxis", and pt would be an OME case.
3/27/2021	1140258	NY	21	F	3/26/2021	3/27/2021	Patient contacted 911 complaining of not feeling well and difficulty breathing. Upon arrival patient was found by EMS in cardiac arrest. EMS was unable to get return of spontaneous circulation.
3/27/2021	1140716	TN	66	M	3/27/2021	3/27/2021	Approximately 30 minutes after vaccination the patient experienced a cardiac arrest. He was brought to the hospital where resuscitation efforts were continued but ultimately proved to be unsuccessful. The patient was pronounced deceased.
3/27/2021	1140772	CT	89	M	2/18/2021	2/18/2021	Chills, fever and tremors began around 2100 on night of vaccination, was reported symptoms subsided the following day. Found early morning of 2/22/2021 deceased in bed by live-in caregiver

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3/27/2021		1140864	NJ	80	F	3/26/2021	3/27/2021	My mom received her second covid shot at 10:05 AM on 3/26 and experienced no adverse symptoms. At around 6 am the following day, on the morning of 3/27 she was found on the floor, and presumably suffered from a heart attack. After devastation to our family, we called her physician and he himself was also surprised. Although she is a type 2 diabetic with high blood pressure she has maintained great health and kept her conditions under control with her medications. This, unfortunately, seems too coincidental to not have been in some way or completely caused by the second dose of the shot.
3/27/2021		1139999	VA	91	F	2/23/2021	3/10/2021	Daughter-in-law called earlier this week to report that has passed away on March 10, 2021.
3/27/2021		1139599	FL	72	M	3/10/2021	3/14/2021	Patient was found deceased in his own home on Monday, March 15, 2021. He was found on the floor in a sitting position with three fingers of his right hand on his right carotid. It appeared that he was getting ready for church, which was a routine event. Although patient was a diabetic, he never had episodes that were life threatening, and was always able to manage to remediate with insulin or food. Patient last spoke to a neighbor at 2:30 a.m. on Sunday, March 14th, who said he appeared to be just fine and they scheduled a date with their dogs on Sunday afternoon. A sheet of instructions found on the kitchen counter at the home informed us that he had a COVID vaccine at the VA Hospital on Wednesday, March 10th. He was documenting side-effects of very sore right arm and low blood sugars. that was unusual because if he was able to manage he wouldn't have noted it. It was apparent that something sudden happened such that he was unable to get to help and his heart rate must have been of concern. We believe that patient suffered onset of some sort of cardiac event, blood clot, high heart rate, or heart attack, that was associated with the vaccine on Wednesday and 4 days later he was suddenly gone, unable to call for help (he has family close by in this community). We want healthcare providers and individuals to be able to make informed decisions about giving/taking the vaccine when there is another health issue such as diabetes to consider. We lost a brother, a father, a friend and a dedicated veteran unnecessarily.

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3/26/2021		1136479	OH	68	M	3/19/2021	3/23/2021	PATIENT HAD THE FOLLOWING SYMTOMS AFTER RECEIVING THE PFIZER COVID VACCINATION. MORNING OF MARCH 23RD HE WAS NOT WELL AND STATED HOME FROM WORK. SYMTOMS WERE AN UPSET STOMACH, UPPER BACK SORENESS, AND SORENESS OF ARM. DURING THE AFTERNOON HE TOLD HIS WIFE HE NEEDED TO LAY DOWN AND NEVER REGAINED CONCIIOUSNESS BEFORE AND AFTER EMS WAS CALLED @7PM. SPECIFIC DETAILS OF EMERGENCY MEDICAL CARE CAN BE GATHERED FROM THE HOSPITAL. UPON VISITING PATIENT AT POST MORTUM, STAFF NURSE INFORMED ME THEY WORKED ON HIM FOR OVER AN HOUR BUT THEY NEVER GOT A PULSE. FURTHER DETAILS SUCH AS LOCATATION OF VACCINE ADMINISTRATION MAY BE GATHERED BY THIS AGENCY FROM HIS WIDOW.
3/26/2021		1137449	PR	73	M	2/11/2021	3/7/2021	He returned from the hospital through a PEG tube, he was stable. On 7/3/2021, caregivers give a round of vitals at 7:30 am, he was stable, when he was going to receive food he was without vital signs. Cause of death respiratory cardiac arrest.
3/26/2021		1137286	FL	59	M	3/5/2021	3/11/2021	Brought in from ED, family concerned for altered mental status, hyperthermia, Tmax in 105. The patient stated that after the covid-19 vaccine on Friday, he experienced acute onset of R shoulder pain, constant, associated with decreased ROM. On PM Monday, he noticed first episode of chills, that lasted a few minutes, accompanied with sweating. This episode recurred 4 times over the week, then the family started noticed the patient was unable to answer questions and was somnolent. Blood Cultures in the ED were positive for MRSA 2:2. He was positive for endocarditis (previous dental work). Acute metabolic encephalopathy due to severe sepsis most likely 2/2 MRSA bacteremia complicated by NSTEMI and AKI in setting of newly diagnosed aortic valve endocarditis complicated by septic emboli to the bilateral cerebral hemispheres
3/26/2021		1137069	KY	57	M	1/6/2021	1/11/2021	57yo Male, resident, declared dead 01/11/2021 , following a period of ill health related to diabetic ulcers.

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3/26/2021	1136867	CA	76	F	2/27/2021	2/27/2021	headache started about 12 noon on day of, texted a friend at 5:47pm to say wasn't feeling well, hurting all over mostly in chest, shoulders and head.
3/26/2021	1136862	FL	74	M	3/9/2021	3/10/2021	Had his vaccine, he had some reaction but not aware of what it was. On 3/20/21 they found him slumped over the toilet where he had died. His brother had spoken with him the day before and was supposed to see him on Saturday. Brother is not aware if he had taken anything for his symptoms, probably just took some Tylenol.
3/26/2021	1136716	PR	95	F	2/12/2021	3/3/2021	The patient referred that has no symptoms. POC was with her, until she died. She died of Alzheimer's, diabetes and a sacral ulcer that she brought when she was admitted.
3/26/2021	1135730	FL	48	M	3/11/2021	3/13/2021	Patient found dead two days after vaccination; A spontaneous report was received from a healthcare provider concerning 48-year-old, male patient who received Moderna's COVID-19 vaccine (mrna-1273) and died. The patient's medical history includes bipolar disorder, colon polyps, hypertension, benign tremors & other Comorbidities. Concomitant product like iron sulfate, Fluticasone, Gabapentin, Lamotrigine, Methocarbamol, Propranolol hydrochloride was reported by the reporter . On 11 mar 2021, approximately 2 days prior to the event, the patient received their first dose of two planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 13 Mar 2021, the patient died. No other details were reported. Treatment information was unknown. The patient died on 13 Mar 2021. The cause of death was not provided. Plans for an autopsy were unknown.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/26/2021	1136657	ND	74	M	2/26/2021	3/20/2021	NA 74 y/o several comorbidities. Stroke

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3/26/2021		1135778	CA	78	F	3/8/2021	3/10/2021	Breathing issues; Death; A spontaneous report was received from a consumer concerning a 78 years old, female patient who experienced breathing issues/dyspnoea. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. On 08 Mar 2021, prior to the onset of the symptoms, the patient received their first of two planned doses of mRNA-1273 (Batch number not provided) intramuscularly in an unknown arm for prophylaxis of COVID-19 infection. The patient experienced breathing difficulty on 12 Mar 2021. The patient died on 12 Mar 2021. Treatment information was not provided. Action taken with the drug in response to the events is not applicable. The patient died on 12 Mar 2021. The cause of death was not reported. The reporter wanted to conduct a autopsy to find out if the death was caused by the vaccine.; Reporter's Comments: This is a case of death in a 78-year-old female subject with unknown medical history, who died 4 days after receiving first dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/26/2021		1137529	PR	86	F	1/19/2021	2/8/2021	See started having shortness of breath on the night of 8/2/2021. He sends her to do tests, and she was taken to the hospital. She died in the hospital due to kidney and heart failure.
3/26/2021		1136624		98	M	3/4/2021	3/21/2021	N/A 98 y/o with dementia and heart disease
3/26/2021		1139056	NH	60	F	3/11/2021	3/15/2021	****I want to note that I am submitting on behave of my mother who passed away yesterday. The medical examiner has declined 2x for an autopsy to be done. My mother was healthy and was absolutely fine besides the rash (dr diagnosed her with cellulitis week of March 14). I do not agree with the rule of death being ?natural causes? neither does her doctor.
3/26/2021		1136547		92	F	2/19/2021	3/14/2021	92 y/o - Severe dementia. Hospice

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3/26/2021		1139039	NY	69	M	3/24/2021	3/24/2021	According to daughter pt was in his usual state of health (pt was critically ill, so daughter provided hx) until he received his 2nd dose of the moderna covid 19 vaccination at 11am on 3/24/2021. He had not had any side effects from the first dose. Around 15 hrs after getting the vaccine he started having fevers, myalgias, fatigue, and sob. He has poor po intake following the vaccine. He arrived to the ER on 3/26 in hypoxic respiratory failure, septic shock, acute renal failure, nstemi, hyperkalemic with severe b/l pneumonia on chest x ray. He expired with in hours of arrival to the ER despite full attempts at resuscitation.
3/26/2021		1139029	OH	75	M	3/4/2021	3/1/2021	Progressively following vaccine on 3/4/21 became more fatigued until taken to hospital on 3/13/21. Found to have lesions on liver and in lungs on scans. Told to follow up with Oncologist on 3/16 but instead had to go to ED due to worsened fatigue and confusion. Liver enzymes noted to be very elevated on admission and progressively deteriorated in to liver failure and subsequent kidney failure over 3 day hospitalization. Unable to biopsy lesions due to risk of bleeding. Discharged to hospice facility on 3/19/21 and died 3/20/21 early AM.
3/26/2021		1138695	TX	53	M	3/24/2021	3/26/2021	expiration
3/26/2021		1138403	NY	70	F	3/24/2021	3/26/2021	patient showed no signs or symptoms after but was found deceased the following day.
3/26/2021		1138368	IA	84	M	3/21/2021	3/21/2021	Injection SUNDAY. within 2 hrs of the 2nd injection, he was amazed to no longer feeling the chronic pain throughout his shoulder. MONDAY: The following evening (after supper) he experienced severe light-headedness, followed by violent, prolonged projectile vomiting, during which, his eyes rolled back and he passed out while continuing to vomit. Low BP. transported to hospital; CT scan showed perforated esophagus, air in chest lining. 2nd CT: air and fluid spread to neck area, bowel obstruction/infection. TUESDAY: 5am: Transferred to hospice ward, unresponsive. Tuesday, 2:20pm: died.
3/26/2021		1138309	NY	59	F	3/6/2021	3/18/2021	Death - unattended

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3/26/2021		1138291	OK	62	M	3/3/2021	3/4/2021	Severe headache, fatigue, very sleepy about two hours after injection. Woke about 1:00 a.m. with severe headache. Gave two Tylenol and cold wash cloth for forehead. Started tossing and turning about five minutes later. Sat up in bed, fell over and struck bedside table. EMT said he suffered stroke around 1:30 am. He passed away on the 5th.
3/26/2021		1138065	CO	80	M	3/22/2021	3/25/2021	Pt came into Emergency Department with resuscitation efforts in progress. Patient spouse states no known health concerns but was feeling unwell after 2nd dose of vaccine on Monday.
3/26/2021		1137994	PA	65	M	3/19/2021	3/22/2021	Patient passed away on Monday (March 22nd, 2021)
3/26/2021		1138370	AZ	50	M	3/4/2021	3/5/2021	he started feeling sick day after vaccine with flu like symptoms, seen in ED 5 days after vaccination, diagnosed with COVID19, About 1 week after that, he was found dead at home on his couch.
3/26/2021		1137579	MI	62	F	3/16/2021	3/25/2021	? Maderna vaccine #1 on 3/16 at clinic ? Provider visit 3/22 dx bronchitis due to COVID-19, z pak and steroids ? ED 3/25 syncope, full arrest and patient expired patient states she had COVID in February
3/26/2021		1137284	CA	95	M	1/1/2021	1/1/2021	tested positive for Covid, June 1, 2020, ASYMPTOMATIC Received the vaccine, was extremely fatigued, went to bed and was on nebulizer for about a week, wheezing terribly, shortness of breath, went into cardiac arrest and passed away
3/25/2021		1133712	KY	47	F	3/22/2021	3/24/2021	reported bad headaches on the day following the vaccine--did not see the doctor--later died. the coroner reported that the preliminary autopsy showed an enlarged heart and liver
3/25/2021		1132800	OH	67	M	3/22/2021	3/24/2021	Wife found husband dead two days after 2nd dose. This Health Department was made aware of the death by the the Kidney Center. The patient failed to show up for a scheduled dialysis appointment on 03/24/2022. The clinic obtained information of the passing from the wife. The patient received his SECOND dose of COVID-19 vaccine on 3/22/21, reported feeling ill 3/23/21 and then passing on 3/24/21. The clinic called the health department to report the death of the patient on 3/24/2021.

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3/25/2021	1133010		51	M		3/9/2021	shortness of breath; weakness; diffuse chest tightness; confusion; dizziness; cardiac failure; pulmonary failure; A spontaneous report was received from a consumer concerning a 51-year-old, male patient who developed cardiac failure, pulmonary failure/respiratory failure and died. The patient's medical history included hypertension, obesity, bee allergy and bipolar disorder. Concomitant product use was not provided by the reporter. Patient received first dose of vaccine prior to two weeks to his death (died on 09 Mar 2021). A week prior to his vaccination as shortness of breath, weakness, diffuse chest tightness, confusion, and dizziness. These symptoms progressed following his vaccination and he was hospitalized for two days prior to his death on 09 Mar 2021. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 09 Mar 2021 The cause of death was reported as cardio/pulmonary failure with secondary and tertiary causes of hypertension and obesity. Plans for an autopsy were not provided. The outcome of the events, cardiac failure and pulmonary failure were fatal.; Reporter's Comments: This is a case of death in a 51-year-old male subject with a medical history of HTN, obesity, bee allergy and bipolar disorder,who died 7 days after receiving first dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: cardiac failure; pulmonary failure

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3/25/2021	1133038			M			died after receiving the first dose of a COVID-19 vaccine; cardiac arrest; fell ill; This is a spontaneous report from a non-contactable consumer reported for a patient (friend's cousin). A male patient of an unspecified age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, batch/lot number and expiration date not provided), via an unspecified route of administration, on an unspecified date, at single dose, for COVID-19 immunization. Medical history included patient was infected with the virus in 2020 (reported as "over six months ago"), but not in the current time. Concomitant medications were not reported. The patient died after receiving the first dose of a COVID-19 vaccine on an unknown date. Patient felt ill that evening a few hours after receiving the shot, followed by cardiac arrest. Patient was taken to the hospital, where he died the next day. The outcome of the event "unknown cause of death" was fatal, of other events was unknown. The cause of death was not reported. It was unknown if an autopsy was performed. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: died after receiving the first dose of a COVID-19 vaccine

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3/25/2021	1133039	TN		M		3/1/2021	kidneys were unable to support life; Diarrhea; unable to get up without assistance; shaking so bad; This is a spontaneous report from a contactable consumer (Patient's wife). An 80-year-old male patient received second dose of BNT162B2 (BNT162B2) via an unspecified route of administration, administered in Arm Right on an unspecified date (Batch/Lot Number: EN6201, expiry date not reported) as single dose for covid-19 immunization. Medical history included ongoing glomerulonephritis, dementia (He had dementia prior to getting the vaccine) and walking aid user. The patient experienced kidneys were unable to support life on an unspecified date and was reported as fatal, shaking so bad on 01Mar2021, diarrhea on 02Mar2021, unable to get up without assistance on 01Mar2021. Patient's wife reports that her husband didn't have any reactions until the third day. He was shaking so bad that the car seat was vibrating. He also had diarrhea. He had dementia prior to getting the vaccine. After getting the vaccine he was unable to get out of the chair without physically being helped out of the chair. He was able to use his walker before getting the vaccine but was not able to after getting the vaccine. Her husband passed away yesterday. He was shaking so bad on 01Mar2021. It lasted for 12-24 hours and then it was not as spasmodic. He had diarrhea from 02Mar - 03Mar2021. He recovered completely from it. He was unable to get up without assistance on 01Mar2021. That did not change. He required assistance until he died. He was unable to use his walker starting on 01Mar2021. His kidneys were unable to support life. Two weeks before he received the vaccine her husband was up and walking. After he received the second dose this happened. Caller is unsure if this caused kidney failure. An autopsy is not being performed. Her husband died yesterday. He had kidney problems that he lived with for 58 years. After receiving the vaccine his kidney functions took a nose dive. She was told by some of the people taking care of him that the kidneys could have had a decrease in function from the vaccine. He was sent to a dementia facility on 02Mar2021 for long term placement. The patient received his first dose of BNT162B2 on an unspecified date. The patient died on 16Mar2021. An autopsy was not performed.; Reported Cause(s) of Death: kidneys were unable to support life

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3/25/2021		1133040			M			died from heart attack; This is a spontaneous report from a contactable consumer via a Pfizer Sponsored reported for a male patient (Husband). A male patient of an unspecified age received first dose of COVID-19 vaccine (UNSPECIFIED TRADE NAME), via an unspecified route of administration on an unspecified date as single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient died from heart attack exactly 1 week later after vaccine on an unspecified date. Never had any heart issues or anything. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: died from heart attack
3/25/2021		1133552		88	M	3/3/2021	3/23/2021	Unknown - Documentation not available
3/25/2021		1133650	NH	84	M	1/15/2021	1/16/2021	Patient presented to the emergency department of Hospital on 1/16/21 with severe hypoxia to 70s% on room air and was found to have COVID-19 infection with pneumonitis. Patient is a resident where received Covid Vaccination on 1/15/21
3/25/2021		1132786	IN	61	M	3/19/2021	3/20/2021	Death
3/25/2021		1132299	PR	89	F	3/6/2021	3/18/2021	Unstable vitals
3/25/2021		1133604	PR	69	F	2/26/2021	3/2/2021	She was taken to hospital 03/02/2021 where she died at 4 am from a heart attack.
3/25/2021		1132752	TX	63	M	3/16/2021	3/17/2021	Decedent began noticing symptoms on 3/17/2021. He c/o worsening back pain, joint pain, headache and stiffness last Sunday (3/21/2021). Today (3/25/2021), he c/o chest pain. The decedent received his COVID-19 vaccine on 3/16/2021.
3/25/2021		1132713	PR	65	M	2/2/2021	2/16/2021	2/16/2021 He was transferred to the Regional Hospital of due to low pressure (systole), received CPR in the ambulance on the way to the hospital. He died on 2/19/2021 due to various complications, including pneumonia.

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3/25/2021		1132667	PR	81	F	2/4/2021	3/4/2021	She was transferred to the hospital on 3/4/2021 due to low blood pressure, she understands that due to heart failure. The death certification information is unknown.
3/25/2021		1132458	PR	92	M	2/4/2021	3/14/2021	He was in Hospice. He died as a veteran. He had a constant lack of appetite. Has no additional information
3/25/2021		1132360	PR	85	F	1/27/2021	2/2/2021	She was being treated for kidney failure, at one point her body was not responding to the treatments and they put her in Hospice. She was in hospice for some 5 days. She had been dying for days and in one of the rounds around 6 am on 2/2/2021, the caregivers accompanied her until she no longer had vital signs.
3/25/2021		1133747		97	M		3/14/2021	died on hospice Narrative: Patient died on hospice, it is my clinical recommendation that death was r/t chronic anema, advanced dementia, COPD, CAD, and not related to prior administration of COVID-19 vaccination
3/25/2021		1132313	OH	69	F	3/23/2021	3/1/2021	Patient got vaccine dose #2 on 3/23/21 (Tues) approx 10am. Per family reports patient went to hospital 3/24/21 (Wed) for unspecified pain and temp of 102f. Family states a "scan" was done and came back with nothing. P was treated for UTI and sent home. Patient was reportedly laying down at home about 8:15 or 8:30am complaining of a bad headache. Patient was found later that am deceased in her bed.
3/25/2021		1133564	PR	62	F	2/2/2021	2/12/2021	It was sent for low pressure on 02/12/2021 to the Hospital Medical Center. He died of respiratory arrest.
3/25/2021		1132159	NY	73	M	3/23/2021	3/24/2021	Death, adverse event occurred outside of the hospital and outside of observation window. Event was reported via employee to hospital.
3/25/2021		1132090	IL	97	F		3/9/2021	Patient reportedly received COVID vaccine doses on 1/23 and 2/15, but we are unsure of which manufacturer or lot number. Patient admitted to our hospital on 3/9/2021. Patient presented with elevated D-dimer with concern for septic shock. Ultrasound of patient revealed no VTEs. COVID test on 3/10 resulted POSITIVE. Patient was going to require vasopressors but patient requested to go on comfort measures only. Patient ordered comfort measures on 3/10 and pronounced deceased on 3/18.

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3/25/2021		1132062	MI	56	F	3/18/2021	3/22/2021	Had multiple hospitalizations for COPD prior to COVID-19 infection in December 2020. Had been admitted to Hospice for further decompensation after COVID diagnosis. Limited oral intake and hospice began using morphine and Ativan. Was on comfort medications only prior to 1/26/2021
3/25/2021		1132327	PR	76	F	3/1/2021	3/19/2021	They proceed to take the round and at that moment they realize that she was not breathing, she was already compromised . He dies of heart failure.
3/25/2021		1135589	TX		M			Death; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received bnt162b2 (BNT162B2), via an unspecified route of administration on an unspecified date (batch/lot number was not reported) as single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient got a steroid shot in between his 2 doses of the vaccine and he fell dead the next day. The reporter stated that the reporter didn't know what manufacturer he received, but that he took steroids all the time. The patient died on an unspecified date. The cause of death was unknown. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/25/2021		1136163	OH	88	M			Death

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3/25/2021	1133044	IL	73	F	3/10/2021	3/13/2021	Ventricular tachycardia; This is a spontaneous report from a contactable physician and consumer. A 73-year-old non-pregnant female patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Formulation: Solution for injection; Lot Number: UNKNOWN) via intramuscular in left arm on 10Mar2021 (at the age of 73-years-old) as single dose for covid-19 immunisation. The patient medical history was not reported. The patient did not receive other vaccine in four weeks prior to vaccination. Prior to vaccination the patient was not diagnosed with COVID-19. Concomitant medications included carvedilol (COREG), apixaban (ELIQUIS), enalapril(MANUFACTURER UNKNOWN), furosemide (LASIX), dofetilide (TIKOSYN), allopurinol (MANUFACTURER UNKNOWN). The patient previously received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE) on an unspecified date for Covid-19 immunization. On 13Mar2021, the patient experienced ventricular tachycardia. Seriousness criteria was considered as emergency room/department or urgent care, hospitalization, life threatening illness (immediate risk of death from the event). The patient was hospitalized for 1 day and died on same day (13Mar2021). The patient was not tested for covid post vaccination. The patient received treatment for the event. An autopsy was not performed, and the reported cause of death was ventricular tachycardia. Information on the lot/batch number has been requested.; Sender's Comments: Based on the information currently available, a causal association between the reported event ventricular tachycardia and BNT162B2 cannot be fully excluded. Case will be reassessed when additional information is available including medical history data. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and investigators, as appropriate. ; Reported Cause(s) of Death: Ventricular tachycardia

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3/25/2021	1136004	NY	67	M	3/15/2021	3/25/2021	Patients representative notified pharmacy today to cancel patients second appointment as the patient had died this morning due to a staff infection in hospital. Representative did state they did not believe it was related to vaccination as patient has been having difficult time with underlying conditions (pulmonary fibrosis and atrial fibrillation).
3/25/2021	1133748		99	M	2/2/2021	2/7/2021	Death Narrative: admitted to hospital on 12/29/20 due to Covid-19 PNA. PMH includes MRSA+, CHF, COPD, HTN, HDL, Meniere's. 1/12 DC to NH where he rec vaccine. 2/7 pt passed away at NH 2/7/21.
3/25/2021	1135587			M	3/17/2021	3/1/2021	died yesterday; This is a spontaneous report received from Medical Information from a contactable other health professional. A 57-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, on 17Mar2021, at single dose, for COVID-19 immunization. Medical history and concomitant medications were not reported. The patient died in Mar2021 (reported as "yesterday"). The outcome of the event was fatal. The cause of death was not reported. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: Event unknown cause of death is assessed as related until sufficient information is available to confirm an unrelated cause of death. 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: died yesterday
3/25/2021	1135483	WA	76	F	3/25/2021	3/25/2021	Patient got 2nd vaccine, waited 15 minutes for observation and collapsed when getting into car
3/25/2021	1135351	OR	78	M	1/13/2021	2/3/2021	2/03/2021 Death. No treatment. Deceased.

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3/25/2021		1135281	AZ		M	1/21/2021	1/22/2021	Passed away; A spontaneous report was received from a Healthcare Professional concerning a 57-years-old male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and passed away/death. The patient's medical history was not provided. However, the patient had some serious chronic health condition. No relevant concomitant medications were reported. On 21 Jan 2021, prior to the onset of the event, the patient received their first of two planned doses of mRNA-1273 (lot/batch: LOT: 011L20A Exp: 03July2021) intramuscularly in the left deltoid for prophylaxis of COVID-19 infection. He did not experience any symptoms right away and nothing within the next 15 mins under observation. On 22 Jan 2021, the patient passed away. Treatment details was not reported. Action taken with mRNA-1273 in response to the event passed away, was not applicable. On 22 Jan 2021, the patient died. It was unknown if an autopsy was performed.; Reporter's Comments: Very limited information regarding the event of death has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Passed away
3/25/2021		1134819	MD	51	F	3/4/2021	3/11/2021	She developed a large pulmonary embolus, and she died on 3/17 at Hospital. She developed symptoms of SOB on 3/11, and was admitted to the hospital. She was initially stable and not requiring oxygen and was sent home on anticoagulation. However she returned the same day with worsening symptoms, troponin now elevated, and ECHO showing signs of right heart strain. Embolus on imaging had increased in just over days from previous CT scan. She became pulseless and died despite resuscitative efforts. It is my opinion (Dr.) that she died of a pulmonary embolus, and an autopsy is pending.
3/25/2021		1134751	WI	66	M	3/10/2021	3/14/2021	Patient was hospitalized within 4 days of getting the vaccine and passed away 6 days after getting the vaccine
3/25/2021		1134697	TX	51	M	3/23/2021	3/24/2021	Patient reportedly passed away on 3-24-21 on the day after the vaccine was given. We have no further information at our facility regarding the event.
3/25/2021		1134651	NC	63	F	3/7/2021	3/10/2021	The patient had a hemorrhagic stroke approximately 3 days after receiving the vaccine and died.

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3/25/2021	1134647		81	M	3/3/2021	3/6/2021	81 y/o male patient was vaccinated 3/3/21 and died 3/6/21. Patient's wife reported he was having "some trouble breathing" but could not remember whether this problem started before or after being vaccinated.
3/25/2021	1134002	OR	69	M	2/24/2021	2/28/2021	Death 4 days after vaccination
3/25/2021	1134616	MN	87	F	2/18/2021	3/12/2021	Patient death within 60 days of receiving the COVID vaccine series
3/25/2021	1133940	HI	65	M	2/12/2021	2/20/2021	Patient was found deceased at home on 2/20/2021, 8 days after receiving the 1st dose of COVID-19 vaccine.
3/25/2021	1133939	IN	70	F	2/11/2021	2/15/2021	Acute hemolytic anemia of unknown cause - may/may not be related to vaccination
3/25/2021	1134021	MN	70	M	2/9/2021	3/11/2021	Patient death within 60 days of receiving the COVID vaccine series
3/25/2021	1134070		96	F	1/29/2021	3/13/2021	Patient death within 60 days of receiving the COVID vaccine series
3/25/2021	1134252	NC	82	M	2/11/2021	2/12/2021	1/15 through 1/19 Pt was hospitalized for COVID symptoms and diagnosed COVID +. received remdesivir and plasma on 1/15. 1/19 discharged home and doing well until 2/12 2/11 received pfizer vaccine 2/12 readmitted to hospital after being found unresponsive at home, sats 35%, rales, temp 103.8, CXR infiltrates, placed on PR mask then BIPAP- diagnosed with cytokine storm possibly from vaccine. 2/13 sats 78% on BIPAP, sweating, rapid response called and stabilized 2/16 pt found with left sided weakness, droop and left arm flaccid. CT scan revealed ischemic stroke 2/17 6L salter lab remain weak on left side 2/19 increased to 10L salter lab 2/20 possible aspiration - worsening sats 2/21 continues to have decreased sats PR mask at 15L. then back on BIPAP 2/22 discussion with family about poor prognosis. DNR comfort. 2/23 Pt passed away
3/25/2021	1134376	MN	67	M	2/4/2021	3/25/2021	Patient passed away from cardiogenic shock after a CABG

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3/25/2021		1134398	NE	77	F	2/4/2021	2/5/2021	<p>She had been in her usual state of health until tonight. Assisted living facility staff called. He mentioned that the facility staff had earlier noticed that she was dragging her right foot and and has been needing more assistance with activities. The patient was walking and did not feel well. She was lowered to the ground and had a witnessed cardiac arrest. The ambulance was called and she was reportedly found to have pulseless electrical activity. She was given Epinephrine and Amiodarone with return of pulse. The patient was brought to the Emergency Room and was evaluated by ER physician. EKG showed atrial fibrillation, ventricular rate = 66, RBBB with Brugada pattern. She was emergently brought to the Cath Lab. Cardiac catheterization showed normal coronary arteries but EF 35-40%. Repeat EKG showed atrial fibrillation with rapid ventricular response = 110, RBBB. Therapeutic hypothermia was initiated. The patient was admitted to the ICU on mechanical ventilation with TV 350 RR 14 PEEP 5. She is sedated with Propofol and Fentanyl IV. She is on Levophed IV. ABG showed pH = 7.22, pCO2 = 53, pO2 = 66, O2 sat = 88%. Lactate level = 9.5. WBC 8.8, Hgb 13.4, Hct 46, Platelets 138. Na 138, K 3.2, Cl 102, bicarb 20, BUN 16, Crea 1.19, estimated GFR = 44 mL/minute. Magnesium 2.7. Glucose levels have ranged from 273-312. Pro-Calcitonin = 0.26. Albumin 3.7. SGOT 262, SGPT 294. Troponin elevated at 47. Pro-BNP = 600. Urinalysis showed large blood. Chest x-ray showed vague peripheral pneumonitis. Endotracheal tube is in place. COVID-19 test by PCR is negative (2/5/21). COURSE IN HOSPITAL The patient was admitted to the ICU and was followed by Pulmonary/Critical Care. Patient was maintained on mechanical ventilation, sedated with propofol and fentanyl IV. Vasopressors were administered (Levophed IV). She was managed with therapeutic hypothermia. She was followed by Cardiology. Foley catheter was inserted for close input/output monitoring. Neuro checks, vital signs, daily weights, pulse oximetry, cardiac telemetry and fingersticks were monitored. She was given sodium bicarbonate IV due to metabolic acidosis. She was also given insulin IV drip. Potassium chloride IV was administered due to hypokalemia. The patient was given amiodarone IV. Platelet count was noted to be low but stable. Glucose levels were within acceptable range.</p>

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								Metabolic acidosis resolved. Hypokalemia resolved. Hypomagnesemia resolved. There were elevated LFTs which improved. Elevated CPK also improved. She was taken off hypothermia protocol. Sedation was decreased and she was able to open her eyes with verbal stimulus but unable to follow commands. Ammonia level was normal. Neurology evaluated the patient. EEG showed left periodic epileptiform discharges consistent with severe diffuse encephalopathy. Chest x-ray revealed right upper lung and left mid lung increasing opacity for which meropenem IV was started. Levophed was discontinued. Initially she had peripheral cyanosis, but this resolved upon discontinuation of vasopressors. Brain MRI was done demonstrating diffuse bilateral small and moderate-sized ischemic foci throughout the cerebellum and cerebellar region suggestive of embolism. There also was chronic marked atrophy and moderate small-vessel gliosis. CIRCUMSTANCES SURROUNDING DEMISE Based on neurologic evaluation, her prognosis for meaningful neurologic recovery was thought to be extremely poor. The patient was evaluated and followed by Palliative Care. She does not have family members and had designated her neighbor friends as her power of attorney. They have known the patient for a long time and they know that she does not want to live like this. A decision was therefore made for comfort care measures only. Compassionate extubation was performed on February 12, 2021. The patient passed away on February 12, 2021, at 6:39 p.m.
3/25/2021		1134432	KS	62	M	3/23/2021	3/24/2021	Pt went unresponsive at home per wife, was transported to hospital by EMS and died after getting to the hospital. This is not a suspected allergic reaction to the COVID Moderna vaccine at this time.
3/25/2021		1134477	VA	78	F	3/23/2021	3/24/2021	Resident found unresponsive found at 1545, CPR done, EMS responded and resident Pronounced Dead at 1615
3/24/2021		1130112		90	M	2/9/2021	2/16/2021	Patient passed away unrelated to covid vaccination Narrative: The patient had COPD and history of prostate cancer. Patient was placed on hospice care. Patient received his first dose Moderna on 2/9. Patient passed away on 2/16. Cause of death not documented. No indication that death was related to COVID 19 vaccination.

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3/24/2021		1129951	MN	72	M	3/2/2021	3/21/2021	72 y/o with hx of HTN, Aortic valve replacement, venous stasis and venous insufficiency of both lower extremities, CAD, AAA, and s/p squamous cell carcinoma excision in 2019. Upon reviewing the history, here is what we found. 1. 2/27 -- Received send-out covid swabbing/testing- Patient did not disclose this information when screened for his covid vaccination at the clinic. 2. 3/2, 10:00 AM ? Presented to Covid Vaccination Clinic and received 1st dose of Moderna. Results of pending covid test were not back at this time, nor did he disclose this information when screened by nurse prior to vaccination. 3. 3/2, 10:30 PM ? Covid result came back to lab as positive SARS Co-V 2019 4. 3/3 ? patient called and notified of result per ED nurse 5. 3/3 ? Pharmacy recommended patient for mAB infusion (patient did not receive it) 6. 3/6 ? patient presents to ED in severe respiratory distress, DX of Covid-19 pneumonia & transferred to ICU 7. 3/21 ? patient dies after 15 day hospitalization in ICU (pt. had received convalescent plasma x 2 and remdesivir there)
3/24/2021		1129993	OH	77	F	3/11/2021	3/23/2021	Family stated she felt fine after shot. Had upset stomach night before her death. Took turns. Died in sleep.
3/24/2021		1130105	IN	80	F	2/1/2021	2/24/2021	Kidney failure and death. Patient heart labs were good.
3/24/2021		1130109		75	M	1/20/2021	1/26/2021	Patient passed away unrelated to covid vaccination Narrative: The patient received his first dose of Pfizer vaccine on 1/20. Patient was on hospice and passed away at his home with family on 1/26. Cause of death not documented. No indication that death was related to COVID 19 vaccination.
3/24/2021		1130113		74	M	1/16/2021	1/30/2021	Patient passed away unrelated to covid vaccination Narrative: The patient had Alzheimer's disease and was placed on hospice care. Patient received his first Pfizer vaccine on 1/16. No adverse reaction was reported. Patient passed away on 1/30. Cause of death not documented. No indication that death was related to COVID 19 vaccination.

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3/24/2021		1130111		93	M	1/14/2021	2/8/2021	Patient passed away unrelated to covid vaccine Narrative: The patient received his first dose of Moderna on 1/14 and he was rushed to the hospital at 4 am on 1/15. The patient tested positive for COVID and is hospitalized in the hospital. The patient passed away on 2/8. Cause of death not documented, possibly due to COVID complication. No indication that death was related to COVID 19 vaccination.
3/24/2021		1130115		74	M		2/24/2021	DEATH Narrative: 73 y.o. male with pmh severe COPD, CAD, HTN, hypothyroidism, OSA treated with CPAP, obesity. Noted to have engaged with Pulmonary clinic in December 2020 for worsening respiratory status. No PFTs since 2015. Was found slumped over deceased in his home on the afternoon of 2/24/2021. Medical Examiner notified. Request sent to ME office for report if one exists. No drugs or alcohol were found on the scene and no sign of trauma. Hypertensive cardiovascular disease were reported as an adequate cause for death. "pathologist" reported that Covid vaccine does not need to be listed as it was "more than 24 hours since the shot".
3/24/2021		1129860		28	F	1/19/2021	1/21/2021	Died January 21 after she received an mRNA shot; A spontaneous report was received from a consumer via social media concerning a 28-year-old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and died two days later (death). The patient's medical history was not provided. No relevant concomitant medications were reported. On 19 Jan 2021, per social media post, the patient received one of their two planned doses of mRNA-1273 (Batch number not provided) intramuscularly for prophylaxis of COVID-19 infection. The reporter stated that the patient was dead on 21 Jan 2021. Treatment information was not provided. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on 21 Jan 2021. The cause of death was reported as unknown. An autopsy was done. The reporter stated that the autopsy showed no other red flags, otherwise, no additional autopsy results were reported.; Reporter's Comments: Very limited information regarding this event has been provided at this time.; Reported Cause(s) of Death: Unknown cause of death

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3/24/2021	1130114		74	M		2/28/2021	Death Narrative: 73 yr old male with a history of CAD, HTN, HFrEF, CKD stage 4, COPD, HCV Cirrhosis and opioid dependence who presented with incarcerated ventral hernia 3 days post OP from ex lap, reduction of SB, closure of hernia primarily. He was off pressors but remained intubated due to poor mental status with unclear etiology. It could be related to liver failure, vs neurological insult vs renal failure. Head CT 4 days prior on the 2/24 were without acute intracranial pathology. Hepatology was consulted and did not believe the liver was the main etiology behind poor mental status. Patient progressively declined with continuously increased IV pressor requirement. ABG showed worsening lactate acidosis and was anuric. Patient's family was notified of decline and agreed for the patient to be transition to comfort care early 2/28. Bedside RN notified pronouncing physician of cessation of respiration and cardiac activity.
3/24/2021	1130110		91	M	1/7/2021	2/21/2021	Patient passed away unrelated to covid vaccination Narrative: The patient had diabetes, hypertension and coronary atherosclerosis. Patient received his first dose of Moderna on 1/7/2021. Patient elected to not receive 2nd dose vaccination following clinical discussion with provider. Patient was diagnosed with pancreatic cancer and was place on hospice care. Patient passed away on 2/21.No indication that death was related to COVID 19 vaccination.
3/24/2021	1129851	NC	92	M	1/18/2021	1/21/2021	Family reported patient passed away 3 days after injection by MI
3/24/2021	1129838	IL	73	M	3/16/2021	3/16/2021	chest pain, vomiting, death

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3/24/2021		1129805	NY	87	F	3/3/2021	3/3/2021	Death; unconscious; in and out of consciousness; weak, very weak; blood pressure was very low; little light headed; A spontaneous report was received from consumer concerning a 88 years old female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced a little light headed/ dizziness, weak, very weak/asthenia, blood pressure was very low/ hypotension, in and out of consciousness/depressed level of consciousness, unconscious/ loss of consciousness and passed away. The patient's medical history was reported as heart issues. Concomitant medications taken by the patient included levothyroxine, isosorbide, acetylsalicylic acid, metoprolol, furosemide, warfarin, antibiotics. On 3 Mar 2021, prior to the onset of the event, the patient received their first of two planned doses of mRNA-1273 (Lot number: 015M20A) intramuscularly in the right arm for prophylaxis of COVID-19 infection. On 3 Mar 2021, when the patient got home the night, after getting the shot, patient was a little lightheaded, she seemed to be okay on 04 Mar 2021 and 05 Mar 2021. Patient had complained of being weak and her blood pressure was very low on 08 Mar 2021. She was progressively started getting weaker. On 09 Mar 2021, she was very weak and was in and out of consciousness. Patient was taken to the hospital, and she became unconscious and then passed away. Patient passed away on 09 Mar 2021. The patient died on 09 Mar 2021. The cause of death was unknown. Plans for an autopsy were unknown. Treatment activities for event was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of events, unconscious, a little light headed, weak, very weak, blood pressure was very low, in and out of consciousness was unknown. The outcome was considered fatal.; Reporter's Comments: This is a case of sudden death in a 88-year-old female patient with a history of heart issues, who died 6 days after receiving first dose of vaccine. Very limited information has been provided at this time.; Reported Cause(s) of Death: Unknown cause of death

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3/24/2021		1128052		83	M	3/3/2021	3/4/2021	Chest pain; felt really bad; Death; Vomited that night; Sore arm and pain in both arms; A spontaneous report was received from a consumer concerning a 83-years-old, male patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced sore arm and pain in both arm /pain in extremity, felt really bad/feeling abnormal, chest pain and the patient died. The patient's medical history was not provided. No relevant concomitant medications were reported. On 03 Mar 2021, 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 04 Mar 2021, patient experienced sore arm and felt bad. The patient vomited that night. On an unknown date patient reported chest pain and pain in both arms. On 05 Mar 2021, at 12:46pm the patient died. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on 05 Mar 2021. The cause of death was reported as unknown. Plans for an autopsy were unknown.; Reporter's Comments: This is a case of death in an 83-year-old male subject with unknown medical history, who died 2 days after receiving first dose of vaccine. Very limited information has been provided at this time. No follow up is possible.; Reported Cause(s) of Death: unknown cause of death
3/24/2021		1129005		84	F	3/13/2021	3/20/2021	death
3/24/2021		1129706	MN	78	M	2/25/2021	3/23/2021	Patient presented to SJMC in Brainerd by private car, 3/23/21 DOA. Family with patient wanted no resuscitation. Patient pronounced deceased 2:49 pm.
3/24/2021		1129427	OH	50	M	3/19/2021	3/22/2021	Pt received vaccine on Friday, March 19th. On Monday, March 23rd, t was hiking with boy scout troop, became short of breath, collapsed and went into full arrest. BLS done on scene, transported to local ER where pt was pronounced dead.
3/24/2021		1129413	AK	91	F	1/19/2021	3/19/2021	Death

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3/24/2021		1129117	AL	56	F	3/15/2021	3/23/2021	Patient passed away in her sleep 8 days after receiving 2nd dose of Moderna vaccine. Patient's family reports they believe it was a massive heart attack. They do not believe this was related to the vaccine.
3/24/2021		1129069	WI	67	M	3/11/2021	3/22/2021	Patient had no known immediate ill effects or complaints directly after receiving his second COVID-19 vaccination on 03/11/2021. However, on 03/22/2021, he suffered a fatal cardiac arrhythmia while exercising on his home elliptical machine.
3/24/2021		1131557	PA	89	M	2/23/2021	3/5/2021	COVID-19 disease, symptoms started 3/5/21, deceased of COVID-19 on 3/14/21
3/24/2021		1130148	MO		U			something wrong with the liver; A spontaneous report was received from a consumer concerning patients of unspecified age and gender who received Moderna's COVID-19 vaccine (mRNA-1273) and were dying after second shot and something wrong with the liver (liver disorder). The patients' medical histories were not provided. No relevant concomitant medications were reported. Dates of vaccination were not reported. The reported heard on the news that "people are dying after the second shot" and apparently one of the patients had something wrong with the liver after getting the shot. The reporter said the patients received Moderna's mRNA-vaccine. On an unknown date, the patient experienced the event(s) people are dying after second shot, No treatment information was provided. The action taken with the vaccine in response to the events was not applicable. The cause of death for "one of the patients was had something wrong with the liver".; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested; Reported Cause(s) of Death: liver disorder; death unknown cause
3/24/2021		1129801	WI	84	M	2/24/2021	3/9/2021	RECEIVED REPORT THAT TWO WEEKS AFTER HIS SECOND DOSE, HE DIED OF A MYOCARDIAL INFARCTION.
3/24/2021		1131606		70	M	3/15/2021	3/17/2021	death
3/24/2021		1131386	OR	69	M	3/20/2021	3/22/2021	death

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3/24/2021	1130250	TN	70	F	2/17/2021	3/16/2021	Patient tested positive for Covid on 3/12/21 per hospital admission notes. Patient was admitted to the hospital on 3/16/2021 with Covid pneumonia. She passed away on 3/22/21.
3/24/2021	1148803		73	M	2/10/2021		COVID-19/hospitalization/death Narrative: Patient received two doses of the Pfizer mRNA vaccine on 1/17/21 and 2/10/21. He was admitted on 3/5/21 with COVID-19 pneumonia which progressed to severe disease. Patient died on 3/21/21 attributed to COVID-19. Patient had underlying B cell follicular lymphoma, previously on chemotherapy. Reported does not feel patient's hospitalization or death was attributable to the vaccines, however following FDA Emergency Use Authorization, "The vaccination provider is responsible for mandatory reporting of the following to the Vaccine Adverse Event Reporting System (VAERS): vaccine administration errors whether or not associated with an adverse event, serious adverse events" (irrespective of attribution to vaccination), cases of Multisystem Inflammatory Syndrome (MIS) in adults and children, and cases of COVID-19 that result in hospitalization or death.~~
3/24/2021	1133750		70	M	1/6/2021	1/23/2021	Death Narrative: Pt was at rehab hospital where he rec his vaccine. No info for Lot or site. Was under Hospice for COPD, CHF, MDD. Passed at rehab center. No other info.
3/24/2021	1131617	SC	96	F	2/4/2021	2/4/2021	Pt c/o of left arm pain after injection and for several days after. Pt was in bed for 2 days after injection c/o generalized malaise and weakness. Pt c/o of feeling of funny heart rhythms and feeling of constant anxious feeling. Pt started having episodes of SOB and was very labored doing simple tasks such as using the toilet. Pt started using o2 for the first time and had to recover for any activity for several minutes. Different medications were tried to help control symptoms such as Morphine for SOB and ativan for anxious feelings. Symptoms were never well managed after vaccine. Pt eventually died from worsening symptoms on 3/20
3/24/2021	1131585		80	F	3/10/2021	3/22/2021	death

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3/24/2021		1131556	SC	69	F	2/23/2021	3/10/2021	Diagnosis?s with TTP on March 12. Passes away on March 19 2021
3/24/2021		1131328	MA	69	F	3/18/2021	3/19/2021	Severe GI symptoms followed by death
3/24/2021		1131280	CA	77	M	3/3/2021	3/22/2021	On 3/23/2021, Patient became ill, vomiting uncontrollably, throughout the day. On 3/24/2021, he continued his vomiting episodes, and developed a fever with chills. At about 2100 hrs, patient was extremely weak, he went to the bathroom, urinated, and attempted to crawl back to his bedroom, less than 10 steps away. His wife, called 911, and went down stairs to allow entry for the fire department, The fire department, found patient unresponsive, not breathing, and no pulse. He was pronounced dead in his home.
3/24/2021		1131274	WA	84	M	3/13/2021	3/16/2021	Patient had unexplained asystolic cardiac arrest 3 days after second Pfizer shot was administered. No recent illnesses or complaints, no fevers.
3/24/2021		1130340	PR	64	F	2/12/2021	2/25/2021	2/25/2021 She was taken to the hospital for aspiration. 03/09/2021 was discharged, but relatives were informed that she was unwell. 3/13/2021 When they went to take the rounds she was without signs, she was sleeping. He refers that the patient died of Aspiration Pneumonia and was tested at the Hospital with negative results. They certify death due to cardiovascular arrest
3/24/2021		1130251	PR	76	F	3/3/2021	3/5/2021	Sister reports that she was fine, the day before I took her to the dentist. Sister on 5/3/2021 called her and did not answer, so she goes to the nursing home where she resides. She finds her sister cold in the apartment's furniture. Massive heart attack
3/24/2021		1133749		70	M	3/21/2021		V-Fib, cardiac arrest Narrative: First COVID vaccine administered 2/25/21 with no noted reaction. Patient received his second COVID vaccine 3/21/21 at 1203. Notes in electronic medical record indicate in the morning of 3/22/21 he arrived at a hospital with ER this morning in V-Fib/cardiac arrest. Unclear of potential treatment that was administered at outside facility. Time of Death was about 1330 on 3/22/21.
3/24/2021		1131084	CA	71	F	3/23/2021	3/23/2021	My sister died in her sleep six days after receiving the J&J vaccine in her sleep.

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3/24/2021		1130327	GA	84	M	2/10/2021	2/12/2021	died in sleep
3/24/2021		1130306	PR	74	M	1/29/2021	2/3/2021	It began on 2/3/2021 to present low saturation, pressures rose and fell (unstable). They gave him therapy, since he could not breathe. On 02/04/2021, POC reports that caregivers took their rounds and he was without vital signs. Doctor certifies that it was due to respiratory failure.
3/24/2021		1130386	KY	51	M	2/24/2021	3/1/2021	syncopal event. 911 was then called. Once EMS arrived he was found unresponsive and was in V fib.; transferred to the cath lab where he was found to have a proximal LAD occlusion deceased 3/17/2021
3/24/2021		1130567	GA	87	M	2/11/2021	2/18/2021	received vaccine on 2/11/2021, stopped eating on 2/18/2021, expired on 03/06/2021
3/24/2021		1130616	MD	49	F	3/16/2021	3/17/2021	Community partner reported that they found her unresponsive on the 17th (so she may have died on the 16th) from what they believe was a heart attack. The family has requested an autopsy.
3/24/2021		1130720		68	M	3/19/2021	3/19/2021	Tiredness Death 03/19/2021 Cause of death: Ruptured Myocardial infarction
3/24/2021		1130777	NE	76	F	2/20/2021	2/24/2021	1st vaccine on 2/20 and reported feeling "lousy" afterwards. On the evening of 2/23 felt like she was going to pass out. Felt worse when she woke the next morning. Presented to the ER on 2/24 with chest pain and "indigestion". Found to be in A.Fib with RVR. Vomited in ER triage. On 2/25 developed altered mental status, hypotension, hypoxemia. She was intubated and transferred to the ICU with severe lactic acidosis/shock/multiorgan failure. Had Right lower lobe infiltrate and right pleural effusion. Diagnosed with pneumonia and possible ischemic bowel. Died on 2/26. Family requested autopsy.
3/24/2021		1130955	IL	74	M	2/11/2021	2/28/2021	Atrial fibrillation, respiratory distress, acute renal failure
3/23/2021		1126012	IL	62	F	2/10/2021	3/17/2021	Death within 60 days of vaccination
3/23/2021		1126281	MA	93	F	3/16/2021		unknown if related but resident Expired 3/18/21 48 hours after 2nd Covid vaccination Pfizer

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3/23/2021		1126060	ME	61	M	3/5/2021	3/5/2021	death 2 and half hours after receiving the first Moderna vaccine; A Spontaneous report was received from a health care professional concerning a 61 year old male patient,who received Moderna's COVID-19 vaccine (mRNA-1273) and reported death. The patient's medical history as provided by the reporter included diabetes, history of shortness of breath, cardiac history. Concomitant medications included metoprolol, metformin and glipizide. On 05 Mar 2021, prior to the onset of events the patient received his first dose of their two planned doses of mRNA-1273 (Batch N0: 030a21a) intramuscularly for prophylaxis of covid 19 infection. On 05 Mar 2021,it was reported that the patient died 2 and half hours after receiving the first Moderna vaccine. The patient had no symptoms during observation 15 minutes after receiving fist Moderna vaccine.The patient's PCP ordered an autopsy. Treatment information not included. Action taken with mRNA-1273 in response to the events was not applicable. On 05 Mar 2021, it was reported that the patient died.; Reporter's Comments: This is a case of sudden death in a 61-year-old male subject with hx of diabetes, history of shortness of breath and cardiac history, who died 2 1/2 hours after receiving first dose of vaccine. Very limited information has been provided at this time.; Reported Cause(s) of Death: unknown cause of death
3/23/2021		1126135	MS	67	F	2/18/2021	2/18/2021	I am writing this on behalf of my mother. She received the first round of the vaccine (Pfizer/EL9269) on 2/18/21. That evening she reported not feeling "right". Over the next two days after receiving the vaccine on Thursday she reported to family that she didnt feel well. She had no fever but muscle aches, an earache and sore throat (this was on Friday and Saturday). On Sunday her breathing became a bit labored. She still had previous symptoms reported and labored breathing -- she stated she thought she would have to go to the Dr the next day (Monday, Feb 22, 201) if she did not feel better. Sometime in the night of Feb 21st and Feb 22nd my mom passed away. My mom had many health problems. Heart disease, diabetic, she was on dialysis and had sleep apnea. However, she definitely seemed to be having some difficulty with the affects of the first vaccine. Please let her life be counted.

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3/23/2021	1126222	MI	60	F	3/4/2021	3/6/2021	Patient admitted to hospital on 3/6/21 with sudden onset right-sided hemiplegia and aphasia. CT showed acute intraparenchymal brain bleed. Family chose palliative care over neurosurgical intervention due to severe neurologic impairment and inability to communicate. Patient was discharged to home hospice on 3/9/21.
3/23/2021	1126015	MN	49	F	3/9/2021	3/13/2021	Unknown adverse event from vaccination. 3/14/21 Informed by caregiver that client was sent by ambulance to ER and diagnosed with bilat pneumonia. She developed difficulty breathing on 3/13/21. She was seen at Walk In on 3/12/21 for toenail eviscerated and INR, and had been giving tylenol for pain control for toe. 3/15/21 Informed by caregiver client was in ICU, septic, bilat pneumonia, and low oxygen levels. 3/16/21 Informed by caregiver client not doing well authorized indwelling cath due to low blood pressure and ventilator. Client transferred by med flight to ICU. 3/17/21 Informed by caregiver client death last night.
3/23/2021	1126293	MT	75	M	3/11/2021	3/21/2021	Death 10 days after receiving first moderna covid vaccination. Was not told by patients family cause of death, unclear if there is a link between vaccination or not.

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3/23/2021	1126550	PA	66	F	1/28/2021	3/9/2021	Death; A spontaneous report was received from a consumer concerning a 66-year-old, female patient, who received Moderna's covid-19 vaccine (mRNA-1273) and died. The patient's medical history included covid-19 infection on 04 Nov 2020. No relevant concomitant medications were mentioned. On 28 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (Batch number:unknown) intramuscularly for prophylaxis of COVID-19 infection. On 09 Mar 2021, the patient died. CT was done and did not find any atherosclerosis but found her lungs were whited out,heavily filled with fluid which he described could've been pulmonary edema. She had tested Covid positive back on 04 Nov 2020. Treatment information was not provided. Action taken with mRNA-1273 in response to the event was not applicable. The outcome of the event was fatal. The patient died on 09 Mar 2021 and the cause of death was unknown. An autopsy was planned on 11 Mar 2021.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/23/2021	1126619	CA	92	M	3/19/2021	3/19/2021	His vitals signs was stable after vaccine was administered, but the resident was expired in 85mins after given 1st dose of Covid Moderna vaccine.
3/23/2021	1126563	PA	83	F	2/28/2021	3/2/2021	Death; Kidney shutdown; This is a spontaneous report from a contactable consumer reporting for the mother. An 83-year-old female patient received bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), via an unspecified route of administration in arm, on 28Feb2021, as single dose, for COVID-19 immunisation. Medical history included unspecified ailments. Concomitant medications were not reported. The patient experienced kidney shutdown (medically significant) on 02Mar2021 with outcome of unknown and death (death, medically significant) on 14Mar2021. The cause of death was unknown. It was not reported if an autopsy was performed. The information on the lot/batch number has been requested.; Reported Cause(s) of Death: Death
3/23/2021	1126609	MS	62	M	3/17/2021	3/19/2021	CARDIOPULMONARY ARREST 2 DAYS AFTER RECIEVING SECOND MODERNA DOSE

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3/23/2021	1126004	KY	85	F	2/22/2021	3/13/2021	When attempting to schedule dose #2, was advised by the family that the patient passed away on 3/13/2021.
3/23/2021	1125079	MI		M	2/2/2021	3/3/2021	Patient passed away; Found him non-responsive; A spontaneous report was received from a consumer concerning a male patient of an unknown age who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced unresponsiveness to stimulus. The event was followed by his death. The patient's medical history included Covid-19 and experienced dehydration prior to testing positive for Covid-19. Concomitant product use was not provided by the reporter. The patient was diagnosed with COVID-19 at the skilled facility after becoming dehydrated. He was transported to Hospital on 23 Dec 2020 then discharged to skilled facility on 03 Jan 2021 for physical therapy. On 02 Feb 2021, the patient received their first of two planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 02 Mar 2021, the patient received their second of two planned doses of mRNA-1273 (Batch number: unknown) intramuscularly for prophylaxis of COVID-19 infection. The anatomical location were not reported. On 03 Mar 2021, the patient was found non-responsive and the staff at skilled rehabilitation tried to resuscitate. Death was the outcome. Treatment information was not provided. Action taken with mRNA-1273 in response to the event(s) was not applicable. The outcome of the event non responsive to stimuli was fatal. The patient died-on 03 Mar 2021 and the cause of death was not provided. It is not known whether autopsy done on this individual. No results were provided.; Reporter's Comments: This is a case of death in an unknown aged male subject with unknown medical history of recently recovered covid-19 infection before first dose, who died one day after receiving second dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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3/23/2021	1126560	NH		M			passed away; chest pain; trouble breathing; This is a spontaneous report from a contactable physician and from three non-contactable consumers from a Pfizer-sponsored program. A 66-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection; lot number and expiry date not reported), via an unspecified route of administration, on an unspecified date, as SINGLE DOSE for covid-19 immunisation. The patient had just taken the COVID-19 vaccine and he was hospitalized due to the effects. The patient was rushed to hospital with chest pains and was experiencing trouble breathing. The patient was in the ICU fighting the effects of the vaccine. The patient passed away four hours late on an unspecified date. The outcome of chest pains and trouble breathing was unknown. Cause of death was unknown. It was unknown if an autopsy was performed. Information on the lot/Batch number has been requested.; Sender's Comments: Based on temporal association, the causal relationship between BNT162B2 and the events death, chest pain and dyspnea cannot be excluded. The information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: passed away
3/23/2021	1125956	NY	60	M	3/3/2021	3/11/2021	Patient received 1st dose of Pfizer Covid vaccine on 3/3/2021 without any apparent problems; was monitored for 15 minutes and discharged. Patient was reportedly found lifeless in his apartment by his mother on 3/11/2021.

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3/23/2021	1125936	IN	86	M	3/20/2021	3/21/2021	3-21-21 at 5:35am - Intermittent coughing during HS. Afebrile. Upper lung fields noted congestion; clearing when coughing/turned repositioned per staff, Afebrile. 3-21-21 at 9:30am - In residents room repositioning him, resident vomited tube feeding. Turned him on his side and swept out his mouth. Tube feeding pump turned off. Breathing became labored. Second nurse placed non-rebreather mask on him. Called 911 to take resident to hospital. 3-21-21 9:45am EMS now at bedside. Pulse palpable, Cheyne Stokes respirations. O2 on per non-rebreather mask. EMS assessed resident- now in VT/VF CPR initiated. Code cart placed outside of door. 3-21-21 10:00am Resident transferred out to Rig with an organized heart rhythm. Dr. (on call for Dr.) notified of event and transport to hospital.
3/23/2021	1125903	ME	86	F	3/18/2021	3/21/2021	Patient stayed in health center under routine observation for 15-20 minutes after vaccine injection and showed no symptoms and was subsequently released to go home. A friend drove her home after her injection. On 3/19/21 at 09:09 a.m. a medical assistant from our facility called pt. to inform her of normal lab results. On 3/21/21 at approximately 05:43 p.m. the on call provider took a call from Deputy from the Sherriffs office informing us that pt. was found deceased in her bed on the afternoon of 3/21/21.
3/23/2021	1125891	OH	64	M	3/11/2021	3/19/2021	Patient died with an unknown cause. He was found on the kitchen floor with no blood present. We requested an autopsy but because the County Coroner said there was no foul play suspected, that they would not perform an autopsy on the body to determine the cause of death even though the family had requested an autopsy. The Funeral Home stated to us that it had the looks of a heart attack, but he was not qualified to make that determination. He stated that the way the blood had stopped and purpled in his neck, gave him the indication that the heart was unable to pump all the way.

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3/23/2021		1125778	MS	64	F	3/19/2021	3/20/2021	3/20/21 06:22 pm Resident c/o Nausea and feeling full- Tube feeding placed on Hold- Resident started vomiting- Zofran 4 mg given- Positive outcomes. 03/21/2021- 0430 Resident found unresponsive on morning rounds- w/ weak pulse, shallow breathing. O2 via NC increased to 5 L, NP, Family (Code Status DNR)- Power of attorney ordered to send out- MR notified- Upon arrival no rhythm detected- Death pronounced at 0445
3/23/2021		1125507	IL	65	F	2/12/2021	3/17/2021	Death within 60 days of vaccination
3/23/2021		1125494	UT	71	M	3/3/2021	3/10/2021	He was found deceased in his home 7 days after receiving the 2nd vaccine,
3/23/2021		1125469	TN	83	F	2/16/2021	2/28/2021	PER FAMILY PATIENT PASSED AWAY 2/28/2021
3/23/2021		1125377	NY	90	F	1/28/2021	2/1/2021	Patient began to complain about secretions on 2/1 and phlegm for days post vaccine. Following that she complained of upset stomach upset and large mucus. Loose stool followed on day 6 post vaccine, with continued large amounts of mucus.
3/23/2021		1125300	WI	93	M	2/19/2021	3/21/2021	Patient had no known ill effects or complaints directly after receiving his first COVID-19 vaccine on 02/19/2021. However, on 03/21/2021, he was found deceased on his bedroom floor due to a suspected cardiac arrhythmia. It is unknown if there is any correlation.
3/23/2021		1125144	WA	65	F	2/27/2021	3/14/2021	Death unknown. Patient caregiver reported that it may be related to broken heart syndrome due her family member's passing.

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3/23/2021		1125070	LA		M	1/21/2021	2/28/2021	He past away on 28Feb2021 from a heart attack; A spontaneous report was received from a consumer concerning a 80 year old male patient who received Moderna's COVID-19 vaccine and the patient died due to heart attack. The patient's medical history, as provided by the reporter, included diabetes, congestive heart failure, hypertension and high cholesterol. Concomitant product use was not provided by the reporter. The patient received their first of two planned doses of mRNA-1273 (Batch number: 025L20A) intramuscularly in the right arm on 21 Jan 2021. On 26 Feb 2021, the patient received their second of two planned doses of mRNA-1273 (Batch number: 024M20A) intramuscularly in the left arm for prophylaxis of COVID-19 infection. On 28 Feb 2021 the patient passed away due to heart attack. No treatment information was provided. The seriousness criteria for the event passed away from a heart attack were death and medically significant. Action taken with mRNA-1273 in response to the event was not applicable. The outcome for the event, he passed away from a heart attack was fatal.; Reporter's Comments: This case concerns a 80 year old, male patient. who died due to myocardial infarction. Very limited information regarding this event has been provided at this time. The patient's medical history of diabetes, congestive heart failure, hypertension and high cholesterol remains the risk factor for myocardial infarction. Further information has been requested. The cause of death is Myocardial infarction.; Reported Cause(s) of Death: Heart Attack
3/23/2021		1126724	IL	67	M	2/26/2021	3/15/2021	Death within 30 days of vaccination.
3/23/2021		1125283	IL	89	F	2/22/2021	3/9/2021	Systemic: Patient passed away-Severe, Additional Details: Patient passed away on 3/9/2021
3/23/2021		1127657	RI	76	F	3/22/2021	3/22/2021	Cardiopulmonary arrest at home @ 1 hour after vaccine administration. CPR by EMS to today hospital for asystolic cardiac arrest. Pt. Intubated then terminally extubated

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3/23/2021		1126639	LA	78	F	2/18/2021	2/19/2021	@ 6:50 pm- Resident lying in bed with signs of apnea also has o2 in progress per Nasal cannula. Call bell in reach. v/s 53/20, 12, 101.5, o2 is 92%. Family choice not to send out to hospital bc resident had HX of periods of apnea @ 9:30 pm- resident had no means of life, vitals wasn't reading at this time.
3/23/2021		1127866	NY	78	M	2/18/2021	2/18/2021	Patient died in his sleep the night of getting dose 1 COVID -19 he had a massive heart attack and died
3/23/2021		1127847	CA	67	M	1/15/2021	1/16/2021	Participant felt flushed, feverish, fatigued with general aches and dry cough over the weekend after receiving injection, took acetaminophen and cough syrup on Monday. He became short of breath on 1/20/2021 and was hypoxic on oximeter check, was sent to the ER. He was intubated in ER and went into respiratory failure with sepsis due to COVID19. He was treated with tocilizumab, became paralyzed and DVT in left lower extremity was found. HE required pressors and diuresis, he developed AKI and hyperkalemia. On 2/21 he was in multi-organ failure. His level of cognition decreased until he was no longer responsive and he died on 2/24/2021.
3/23/2021		1127653	IN	81	F	1/1/2021	1/20/2021	Death by Hemorrhagic Stroke
3/23/2021		1127472	CA	70	M	1/24/2021	1/24/2021	Fever, low oxygen saturation, severe encephalopathy, kidney failure, bilateral pulmonary infiltrates, sepsis, tachycardic, acidotic, intubated on ventilator since admission, paralyzed/sedated, ABG results showed high CO2 and O2 retention, edema, electrolyte imbalance, ARDS, low hemoglobin and hematocrit levels, blood transfusion needed
3/23/2021		1127468	WI	73	F	3/11/2021	3/11/2021	Severe lethargy after receiving the shot. Constant sleepiness and malaise, nausea, confusion, loss of appetite, dizziness, Blood vessels/clots formed in her eyes. Acute renal failure and eventually death on March 18, 2021.
3/23/2021		1127466	OH	63	M	3/11/2021	3/14/2021	Received call from his exwife that patient had passed away. Death Certificate states date of death as March 14, 2021. Causes of death are listed a. Cardiac Pulmonary Arrest. b. Myocardial Infarction

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3/23/2021	1127444	CA	65	F	3/12/2021	3/15/2021	Sudden onset of shortness of breath early morning 3/15/2021. EMS called, transported patient to Adventist to ER code blue in asystole. Asystole on arrival, no response to resuscitative efforts, pronounced dead in ER.
3/23/2021	1127402	IL	72	F	3/18/2021	3/23/2021	Pt recieved 1st Pfizer vaccine on 2/25/21 and her 2nd one on 3/18/21 Pt went to the ER on 3/23 via 911 in full cardiac arrest Per daughter, she c/o lightheaded this A< she came out of her room snad fell down, was vomitting and labored breathing paramedics were called, she went to Hospital and later died
3/23/2021	1127361	OR	67	M	3/19/2021	3/23/2021	Death on 3/23/2021 at 9 AM. Home Health Nurse who gave immunization on 3/19/21 verbalized pt was fine after injection, stayed in home for 1 hour after injection was given. Wife verbalized pt was very tired the following day and through out the weekend. Pt stopped eating one day prior to death. Respirations changed on the morning of 3/23/2021 and wife called EMS, pt died at home.
3/23/2021	1127245	OH	79	F	12/27/2020	12/28/2020	Vaccine given Dec 27th 2020, patient couldn't swallow eat or drink the next day, patients family notified Dec 29th 2020 and patient passed away on Dec 30, 2020 at 1 pm EST.
3/23/2021	1127175		50	F	3/3/2021	3/20/2021	Death
3/23/2021	1127157		72	F	2/5/2021	3/9/2021	Death
3/23/2021	1126683	IL	81	M	1/26/2021	3/2/2021	Death within 60 days of vaccination. Tested positive for COVID-19 2/8/2021, admitted outpatient to Hospital 2/8-2/10 readmitted 2/13-2/14 with transfer to Medical Center in with death on 3/2/2021.

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3/23/2021		1127860	VA	77	M	2/17/2021	2/19/2021	Not sure if covid vaccine caused this, but this is what happened - Received covid vaccine. two days later had violent shakes in the night. Immediately went to get a covid test out of precaution. Tested negative for covid, but positive for "flu b". Went home to treat flu with fluids and rest. Got no better. Went to heart doctor out of precaution, full work up...everything checked out great. Went home, got no better. Went to primary care physician, full work up...found a "spot" on left lung. Was given antibiotics and steroids, go home and in a few days will be getting better. 3 days later became incapacitated and had to be rushed to ER. Was admitted into hospital for 6 days to treat "pneumonia". Also possible UTI and sepsis. Also while in hospital found out that a mini stroke had happened. Treatment went well, oxygen levels were good. Was released with glowing reports. 24 hours later at home had to be rushed to ER again after becoming incapacitated.. Was admitted again 7 more days. During this time everything took a nose dive in succession. Lungs were failing, multiple unexplained strokes were happening (while on blood thinners, had been on blood thinner 15 years...after first stroke they changed to another blood thinner...only more strokes). After so many strokes and compounding of strokes, his neuro function started failing. He was put on life support. While on life support his organs started failing. He had to be put on comfort mode and was dead within 8 hours. A perfectly healthy 77 year old man who had never been sick a day in his life (literally) got his 2nd covid shot, two days later he fell ill. From that point on his health spiraled out of control until his death on March 19th. Every doctor (pulmonologist, cardiologist, neurologist, and all attending doctors said that it was "atypical and abnormal" what was happening. It should not have happened. 180 degrees from normal.
3/23/2021		1127148		85	M	1/21/2021	2/1/2021	Death
3/23/2021		1126643	IL	94	M	2/3/2021	3/4/2021	Death within 30 days of vaccination
3/23/2021		1126681	KY	64	M	1/20/2021	2/4/2021	Family notified facility of death when we contacted to confirm second dose appointment

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3/23/2021		1126721		65	F	3/18/2021	3/19/2021	Patient experienced severe vomiting and fatigue 24 hours after receiving vaccine. This occurred throughout 48 hours after and patient was found d/c on 03/20/2021.
3/23/2021		1126732	FL	66	M	3/16/2021	3/16/2021	The decedent had significant medical conditions. The wife stated, the appointment for the vaccine shot was made on-line. Dept. of Health visited their home on 3/16. The shot was administered into the decedent's left arm at 0930hrs. The decedent expressed no health complaints and had no visible indications of adverse affects. The decedent was found not breathing supine in bed at 2347hrs 3/16 (same day as vaccine shot).
3/23/2021		1126917		60	F	3/6/2021	3/7/2021	N/a
3/23/2021		1126834		78	F	1/13/2021	1/16/2021	vaccinated 1/13. presented for COVID screening on 1/14 due to a + exposure. Test was +. Patient came to ED on 1/16 with weakness, congestion, poor appetite, coughing. Previous headache and sweating had resolved by the time she presented. Discharged with isolation instructions. Returned to ED late on 1/22 with "right-sided chest pain described as sharp constant 6/10 nonradiating pain localized to the right side of upper chest, shortness of breath with exertion since this afternoon. She does endorse subjective fevers, with associated increased coughing which is productive in nature, shortness of breath." Admitted to ICU early 1/23, transferred to Medical Center on 2/4/21.

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3/23/2021		1126863	VA	85	F	3/8/2021	3/8/2021	Patient was vaccinated in her home (COVID J&J) on 3/8. Vaccinator obtained consent and confirmed throughout the process that patient as at baseline since patient was nonverbal and bedbound. Later that same day she experienced an emergency and was take to the hospital and subsequently admitted to ICU. She died on 3/10, family present, on comfort care. Per HPI, "Patient is a 85 y.o. female with advanced dementia (non verbal, wheelchair bound at baseline), chronic aspiration, recurrent UTIs, voiding dysfunction currently self-straight cathing, has suspicious bladder and gallbladder masses (being worked up), has right sided hydronephrosis, BIBEMS for acute hypoxemia, difficult to bag en route, ED had difficulty intubating and so performed cricothyroidotomy. Patient had brief PEA arrest due to hypoxia. ED provider noted "excessive pulmonary edema in airway, unfavorable anatomy, and airway swelling." Suspected insult stemming from J&J COVID vaccination reaction.
3/23/2021		1126876	SC	52	M	3/12/2021	3/13/2021	Patient passed away in the early morning of 3/13/21.
3/23/2021		1126882	VA	65	M	1/26/2021	1/27/2021	Patient's wife states that he reported a bad headache about 3 hours after vaccination, that had improved by the next morning. The afternoon of 1/27/21, within 24 hours of receiving the vaccine, patient suffered from a stroke.
3/23/2021		1126810	AZ	89	M	3/11/2021	3/12/2021	Patient suffered AMI within 24 hours after dose was administered.
3/23/2021		1127080	TX	78	M	1/25/2021	1/26/2021	He developed very labored breathing on Tuesday night. By Wednesday morning , upon waking it was severely worse. I would have taken him to the ER had I been home. When I returned home around 11am, he was having a very hard time breathing. I got him a rescue inhaler to use. He had a dailysis treatment that day, during the treatment they kept him on oxygen. I called Dr office to inform them, they ordered a new inhaler and told me if the symptoms did not decrease by 72 hours to inform them. His breathing did get somewhat better but he did not have his enegry levels that he had previously or his appeatite. 12 days after his 2nd dose of the Moderna vaccine he went into cardiac arrest in the home with myself and husband present.

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3/23/2021	1127528	CA	68	M	2/17/2021	3/3/2021	COVID Vaccine administered Feb 17, 2021. Patient died March 6, 2021. No other interventions during interim. No change in dose or frequency of medications. No new medicines introduced. Patient compliant with medications. No other procedures during the interim. Abdominal pain March 3 and again morning of March 6 though had abdominal pain radiating up to his chest on March 6. Took NTG morning of March 6 , fed dogs, went back to bed. Wife found him lifeless around noon of March 6, 2021. Did not seek medical attention on either of the occasions.
3/23/2021	1125527	MI	63	M	3/1/2021	3/1/2021	Death, reportedly occurred one week after receiving covid vaccine.
3/22/2021	1122741	MO	51	M	3/4/2021	3/8/2021	suspected pulmonary embolism; shock; cardiac arrest; This is a spontaneous report from a non-contactable consumer (patient's wife). A 51-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; Solution for injection, unknown lot number and expiration), via an unspecified route of administration on 04Mar2021 at 11:45 AM at a single dose for COVID-19 immunization. Medical history reported as none. The patient has no known allergies. The patient's concomitant medications were not reported. The patient experienced a suspected pulmonary embolism on Monday 08Mar2021 at 11:30 AM. Embolism led to shock and cardiac arrest. The patient did not have COVID prior to vaccination and was not tested for COVID post vaccination. The patient did not receive other vaccine in four weeks. The patient received unspecified treatment for the events. The patient died on 08Mar2021 at 11:30 AM. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: suspected pulmonary embolism; shock; cardiac arrest

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3/22/2021		1122742	TN	89	M	3/12/2021	3/12/2021	<p>He died around 5 o'clock; This is a spontaneous report from a contactable consumer (patient's wife). An 89-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), via an unspecified route of administration on 12Mar2021 13:00 at a single dose (lot number was reported as NEEU200, the reporter did not know if its 2 or Z) for COVID-19 immunization. Medical history allergic to Penicillin, has a long list of allergies, neck pain and sleep disorder (sleep aid). Concomitant medications included diphenhydramine hydrochloride (BENADRYL), clopidogrel bisulfate, calcitriol, melatonin (MELATONIN) taken for sleep aid, Phillips Laxative tablet Magnesium (not appropriately paraphrased and clarified, as reported), simvastatin, terazosin hydrochloride, tizanidine hydrochloride (TIZANIDINE HCL) for when he had the pain in neck (he didn't take that hardly ever), vitamin C [ascorbic acid] and Multivitamin one a day. On Friday 12Mar2021, the reporter and the patient went to get the Covid shot. Their appointment was at 12:30 but they were in line long time before they got the shot. They got the shot around 13:00 and then they have to wait 15 minutes before they could leave. They drove up, they were ready to shoot us with the needle and they asked the patient, asked was he allergic to anything and the reporter answered for him and said yes, Penicillin and other long list and then they gave him the shot. They never did go over his allergies. They got home about 13:30, so which would take us about that long to get home. The patient died around 5 o'clock and the reporter didn't know if this was connected or not with his death. The patient died on 12Mar2021. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: This case of death was provided with minimal details and autopsy results not available. However, drug causality cannot be completely excluded for BNT162B2 injection, only due to plausible chronological relation. Otherwise, information received was so limited to prevent a thorough medical assessment for patient death. The impact of this report on the benefit/risk profile of the Pfizer drugs 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</p>

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appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: He died around 5 o clock

3/22/2021	1122969	NH	82	M	2/18/2021	3/21/2021	Resident Expired at facility on Hospice services on 3/21/21
3/22/2021	1123065		85	M	1/5/2021	3/3/2021	CHF death
3/22/2021	1123066	WA	80	M	2/20/2021	3/5/2021	Death
3/22/2021	1123247	MI	67	F	3/22/2021	3/22/2021	Our agency was alerted that the patient passed away on 3/16/2021
3/22/2021	1123229	TN	89	M	2/5/2021	3/8/2021	Patient received Moderna Dose #1-01/08/2021 and Dose #2-02/05/2021. He was admitted to Medical Center on 03/08/2021 with confusion and decreased O2 sats; date of death was 03/12/2021.

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3/22/2021	1122714	FL	70	F		3/13/2021	illness and very very sick; Death; A spontaneous report was received from a lawyer concerning a 70 or 71-years-old, female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and who died following illness. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. The patient received their first of two planned doses of mRNA-1273 (Batch number not provided) on an unspecified date. On an unknown date, approximately 24 hours prior to the onset of the symptoms, the patient received their second of two planned doses of mRNA-1273 (Batch number not provided) via an unknown route for prophylaxis of COVID-19 infection. Within 24 hours, of vaccination the patient got very ill and sick and on the 4th day patient went to have a shower and found dead by patient's husband. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event, illness and very sick was unknown. The patient died on 13 Mar 2021. The cause of death was unknown. Plans for an autopsy were denied due to COVID-19 relation and are reporting to Moderna. Autopsy was not performed.; Reporter's Comments: This is a case of death in an 70/71-year-old male subject with unknown medical history, who was sick from day 1 and died on day 4 after receiving first dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/22/2021	1121695	CA	21	M	3/10/2021	3/10/2021	The patient, who has no significant past medical history including diabetes, presented with very severe diabetic ketoacidosis one week after receiving the vaccine. He developed severe metabolic encephalopathy, aspiration pneumonia, and was placed on mechanical ventilation. At the time of this reporting, he is brain death (awaiting apnea test confirmation). He is expected not to survive.

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3/22/2021	1123329	NY	70	M	3/21/2021	3/22/2021	Presented to Emergency department in cardiac arrest. Pt's family reports patient complaining of indigestion throughout the night. Awakened this morning but returned to bed. Family noted his breathing became loud and then stopped. EMS called. Patient in PEA arrest when they arrived. Patient's family reports he received COVID-19 vaccine day before via facility. I have notified the vaccine clinic and received the Lot number of the vaccine use when I called.
3/22/2021	1123165		69	M	3/15/2021	3/19/2021	generalized weakness respiratory failure
3/22/2021	1122643	MN	86	F	1/29/2021	1/30/2021	Massive Hemorrhagic stroke 24 hours after receiving first Pfizer vaccination. Suffered bleeding of kidney 6 days later, followed more brain bleeds and blood in stomach area. Vessels are leaking blood, Dr's were could find no reason for the bleedings, have not seen this before.
3/22/2021	1122640	MA	55	M	3/10/2021	3/11/2021	Death 3/11/21
3/22/2021	1122501	LA	89	M	3/18/2021	3/19/2021	Patient expired next day
3/22/2021	1122318		72	M	3/15/2021	3/18/2021	Received second dose of Pfizer Covid vaccine on 3-15 and he passed away 3 days later on 3/18/21

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3/22/2021	1122080	PA	46	F	3/12/2021	3/19/2021	<p>Patient's received 2nd dose of Moderna vaccine Friday 3/12. Her husband reported she had not unexpected fatigue, malaise, and fever for 1 day but better after that. On Monday she began complaining of shortness of breath. This progressively worsened and she started having presyncopal episodes. On Saturday she was unable to come down the stairs in the house so husband planned to take her to the hospital but she stood up and passed out and woke up quickly. He decided to call EMS. By the time she presented to our hospital she was cyanotic and agonal breathing. On moving her from EMS stretcher to ED bed she had PEA cardiac arrest. She underwent mechanical device CPR with only brief (<1 min) ROSC x1. She at some point did have a shockable rhythm. Cath lab was notified and she was taken emergently to the cath lab with ongoing mechanical device CPR. Peripheral VA ECMO was placed after about 1.5 hours. Pulmonary angiogram was done which showed massive saddle PE with near complete obliteration of the right pulmonary tree and some filling defects in the left tree as well. At that time she had severe mixed respiratory and metabolic acidosis with a lactate of 24. She also had no gag or corneal reflex, minimally responsive pupils, and no response to noxious stimuli. Mechanical thrombectomy was attempted with some result. She was transferred to the SICU with increasing pressor requirement, and DIC. Ultimately, the venous catheter of the ECMO circuit malfunctioned thought to be secondary propagating IVC thrombosis. Family decided to withdraw care and she passed away.</p>

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3/22/2021		1121847	NY	39	F			<p>Kidneys and liver shutting down; Kidneys and liver shutting down; Heart started racing 3 days later; Vomiting; A spontaneous report was received from a consumer concerning a 39-year-old, female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced heart racing, kidney failure, liver failure, vomiting and death. The patient's medical history included Sjogren's syndrome, Hashimoto's, inflammatory joint disease, osteoporosis, osteoarthritis. She has history of fractured tail bone and leg in three places. Concomitant medications included D3 2 pills a day, folic acid, B12, and calcium citrate. She was allergic to 15 different antibiotics two of which she had anaphylaxis; had huge autoimmune issues; had had reaction to Pneumovax vaccine. On an unown date ,prior to the onset of the events, the patient received their second of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. Approximately after three days of receiving second dose vaccine patient experienced heart racing and went to the emergency room .The patient started vomiting and developed a kidney and liver failure. And on the next day she died. Autopsy is doing and the results are not available at the time of report. Action taken with mRNA-1273 in response to the events was reported as not applicable. The events heart racing, kidney failure, liver failure and death were considered serious and medically significant. The outcome of the events renal failure, hepatic failure, palpitations and vomiting was considered as Fatal.; Reporter's Comments: This is a case of death in a 39year-old female subject with unknown medical history of anaphylactic reactions, allergic reactions to pneumovax vaccine, Sjogren's syndrome, Hashimoto's, inflammatory joint disease, osteoporosis, osteoarthritis, who died 4 days after receiving second dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Renal failure; Hepatic failure</p>

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3/22/2021	1121622			U			my friend just died after taking your shot; This is a spontaneous report from a Pfizer sponsored program. A non-contactable consumer reported a patient (friend) of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/Lot number was not reported), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. Medical history and concomitant medications were not reported. His/her friend just died after taking your shot (And he/she know of more.) He/she will just keep his/her immune system high. They didn't need a vaccine. The patient died on an unspecified date. 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: my friend just died after taking your shot
3/22/2021	1121585			F			died; A spontaneous report from was received from a Consumer concerning a female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and mentioned that a patient who had received the Moderna vaccine had died, and so they were concerned about getting the second dose. The patient's medical history was not provided. No relevant concomitant medications were reported. On unknown date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, The patient mentioned that a patient who had received the Moderna vaccine had died, and so they were concerned about getting the second dose. Laboratory details are not provided. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not reported. The outcome of the events was considered Fatal.; Reporter's Comments: This is a case of death of an unknown age female subject with unknown medical history, who died on an unknown day after receiving first dose of vaccine. Very limited information has been provided at this time. No follow up is possible.; Reported Cause(s) of Death: Unknown cause of death
3/22/2021	1123405	MA	80	F	3/2/2021	3/19/2021	None stated.

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3/22/2021	1123167	PA	90	F	3/11/2021	3/15/2021	Stroke
3/22/2021	1121906	PA	90	F	3/18/2021	3/19/2021	Site: Pain at Injection Site-Medium, Systemic: Dizziness / Lightheadness-Medium, Systemic: Nausea-Medium, Additional Details: Coroners Office contacted Pharmacy on 3/21/21 to report a patient who had recieved a dose of the covid vaccine on 3/18/21 and was founded deceased on 3/20/2021
3/22/2021	1124259	CO	89	F	3/17/2021	3/20/2021	No adverse reactions reported by family
3/22/2021	1123532	FL	101	F	3/20/2021	3/20/2021	Dose given at 1649hrs. At 2030hrs, complaints of headache and diarrhea. At 0100hrs on 03/21, family noticed patient unresponsive and not breathing. Fire rescue called out and pronounced her at 0210hrs.
3/22/2021	1124794	NY	31	M	3/17/2021	3/17/2021	Extreme head ache, chest pain, fever 101 F. Gave 1000 mg Tylenol, albuterol via nebulizer Q4hr. Died 3/20/2021 approx 11:00 am from Cardiac Arrest.
3/22/2021	1124688	MI	81	M	3/17/2021	3/20/2021	Sudden death March 20, 2021
3/22/2021	1124671	NJ	95	M	3/5/2021	3/8/2021	3 days after vaccination, person was somewhat disoriented. 4th day after vaccination, patient fell, hit head and developed subdural hematoma from which he subsequently died.

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3/22/2021		1124604	IL	65	M	3/9/2021	3/10/2021	Pt presented SOB several days prior to receiving vaccine. His sister reported he had severe COPD and was getting progressively worse. On the day pt was vaccinated, his sister picked him up for the appointment and pt refused a wheelchair. Pt walked into the clinic on his own and received his vaccine. Sister reported pt walked to the car after his vaccine and was winded. She dropped him off at his house and called him later to check up on him. Pt stated he was feeling fine but his arm was sore. Pt's sister called the next morning and reported that he sounded terrible. He was struggling to breathe and was SOB. His sister went over to his house to check on him and wanted to take him to the doctor's office or the hospital. Pt refused at that time. Pt agreed to make a doctor appointment for later in the afternoon. Sister left at noon. She stated her brother had made a doctor appointment for 4:00 at Family Practice. Upon arriving, pt started walking towards the entrance and became SOB. His significant other asked the doctor's office for a wheelchair and was denied. Pt coded in parking lot of Doctor's Office and passed away at 4:31 p.m.
3/22/2021		1124577	MI	70	M	3/2/2021	3/3/2021	My father received the first Covid shot 3/2; he woke up 3/3 with severe body aches and weakness, which we thought nothing of. However, every day, he got weaker and weaker. He has been treated for Liver cancer, he received his first infusion of Opdivo almost 4 weeks before the vaccination. About 7 days after the shot, he was having trouble swallowing so he went to the ER to get a CT scan. He was found to have greatly elevated troponins, the DR was baffled he wasn't having any chest pain; they were apparently not trending either., he has never had a heart attack or any other heart problems, takes Nadolol for high blood pressure. The CT scan showed significant growth of his tumors which had been stable for a year and the last CT scan was the end of January; liver enzymes were also significantly elevated whereas they were stable before. My father deteriorated rapidly, and died on 3/18/21. The day he got the shot just prior, he was hauling wood, shoveling snow and living a normal life feeling good. The day after the shot he could barely get out of bed he was so weak, until he finally died 16 days later.

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3/22/2021		1124383		75	M	1/14/2021	1/18/2021	DEATH Narrative: Events surrounding patient's death are unknown- nothing is documented in medical record regarding event. Causality of death is unknown. This event is being reported due to the timing of the death in relation to the receipt of vaccine (4 days).
3/22/2021		1124382		77	M	3/13/2021	3/13/2021	Death Narrative: Patient received first COVID vaccine does on 3/13/21 at 07:53 without complications. Home telehealth nurse informed by family member on 3/18/21 the patient passed away on 3/13/21 at approximately 1300. Per medical record documentation, "Patient had been at facility getting COVID vaccine that morning at 0800, came home and was taking out his garbage when he started to stumble and fell to his knee, a neighbor saw and assisted patient up and was walking with him back to the apartment when "...he stopped breathing and feel over, dead." Per medical record review, patient had several co-morbidities including hypertension, hyperlipidemia, chronic hyponatremia, alcohol abuse, alcoholic fatty liver, chronic thrombocytopenia, and GERD.
3/22/2021		1124363	HI	65	M	3/6/2021	3/20/2021	patient died at home. apparently he awoke in the middle of the night and asked for help, then collapsed. CPR failed. patient and family did not want an autopsy. suspect sudden cardiac death
3/22/2021		1124281	MA	79	M	2/3/2021	2/16/2021	79 yo with HFpEF, CKD, neurogenic bladder with chronic indwelling Foley admitted to Facility 01/21/21-01/28/21 with recurrent c. difficile/sepsis. Received COVID vaccine on 2/3/21 as outpatient. Readmitted to Facility on 02/16/21 with sepsis with E. coli BSI from GU source, recurrent/persistent c. difficile colitis. Worsening sepsis. Family transitioned goals from full code to DNR/DNI and then to CMO. Patient expired 02/18/2021.
3/22/2021		1123078		87	F	1/20/2021	2/2/2021	mass on right lung fall, arm fracture arm pain leg pain death
3/22/2021		1123737	MO	86	F	2/25/2021	3/20/2021	PATIENT PASSED AWAY ON 3.20.2021
3/22/2021		1123768	MO	82	M	2/25/2021	3/19/2021	PATIENT DIED AT HOME ON 03/19/2021

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3/22/2021	1123805	TX	75	F	2/12/2021	2/17/2021	Admitted on 2/17/2021 with acute respiratory failure with marked hypoxia. Noted to have fever & chills, weakness and acute confusion ~ 3 days prior to admission. Placed on NIPPV, steroids, convalescent plasma and antibiotics. Patient died 2/24/2021
3/22/2021	1124307	AK	74	M	3/10/2021	3/18/2021	The patient was found dead in his home on 3/18/2021, 8 days after vaccination. Due to the remoteness of where the individual lives and his lack of housemate, it is unknown how long he had been dead, but it is not believe that he was dead for more than 1-2 days. He had no adverse reactions in the 15-30 minutes that he was observed post-injection. He also reported only a sore arm to the public health nurse in an email a few days after his vaccination.
3/22/2021	1123847	CA	59	M	3/15/2021	3/16/2021	Patient had no reactions to first vaccine post dialysis. The morning after the patient received the vaccine, patient expired at home. Police stated that the death was vaccine related.
3/22/2021	1124195	NE	86	F	3/17/2021	3/17/2021	Abdominal pain, nausea, diarrhea, headache, muscle aches, and fatigue 1-2 days after vaccination prompting transport via EMS to ER from home. Had cardiac arrest while in the ER x2, subsequent anoxic brain injury and death following removal of ventilator support.
3/22/2021	1123927		59	F	2/22/2021	3/16/2021	NA CAD, Chronic Abd pain with Opioid treatment - Chronic Pancreatitis

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3/22/2021	1123977	MI	94	F	3/13/2021	3/14/2021	Not even 20 hrs after she received the vaccine she couldn?t breathe, she?s been fine nothing wrong at all. 7am she was awake sitting up in bed doing crosswords told her great granddaughter to have a good day at work and would see her shortly . 739 I walked out the room to take my kid to work was gone till 751 not even 12 minutes and I came in and my gram couldn?t breathe was yelling for me saying she couldn?t breathe. It sounded like my gram had come over with upper respiratory problems in a matter of 10 minutes she was gasping for air called 911 spoke to operator my gram was talking saying she couldn?t breathe she was trying to breathe, my grams last words were if they don?t hurry I?m going to die I?m 100% sure my gram was dead in my arms before EMS arrived. Yes she was 95 but she is a healthy lady have had no issues of health problems lately. We?ve done everything to keep her save from the virus and then she gets her 2nd moderna shot and she?s dead 20 hrs later there?s a huge problem old age or not
3/22/2021	1124100		103	F	1/26/2021	3/16/2021	NA - Reaction Age 103.dementia
3/22/2021	1124121	FL	62	M	3/19/2021	3/21/2021	DECEDENT WAS NOTED TO BE COUGHING FOLLOWING THE ADMINISTERING OF THE VACCINE. FAMILY INTERVIEWED COULD NOT RECALL WHETHER THE DECEDENT WAS COUGHING PRIOR TO RECEIVING THE VACCINE.
3/22/2021	1124826	IL	83	M	2/26/2021	2/27/2021	Patient had a mini stroke (TIA) approximately 14 hours after the 1st Moderna COVID vaccine which is when the doctors put him on Plavix, the blood thinner and an aspirin. The patient had a massive stroke with brain hemorrhage within 24 hours of the 2nd Moderna COVID vaccine which resulted in his death.
3/21/2021	1120756	CA	66	M	3/18/2021	3/19/2021	On Friday night, 3/19/21, patient spiked a fever, had shortness of breath, and had blood coming out of his nose and mouth per patient's daughter-in law. 9-1-1 was called, paramedics arrived at the home at 5AM on Saturday, 3/20/21 per patient's daughter. Patient died.

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3/21/2021		1119393	MA	67	M	3/6/2021	3/6/2021	Systemic: Death. Unknow cause as of reporting date. - Severe, Additional Details: PT caregiver called to report that the Pt passed away on 3/8/21 2 days post vaccine, Caregiver was distrot and not very able to provided more details due to reccent nature of report.
3/21/2021		1120493	CA	66	M	3/6/2021	3/10/2021	Cardiac arrest five days after administration of the 2nd dose at 9pm, ambulance was called and EMTs attempted resuscitation, but no pulse was detected after 1 hour of compressions and CPR; time of death was recorded at 10:06pm
3/21/2021		1120523	KY	71	M	2/11/2021	2/27/2021	Hemorrhage/Bleeding
3/21/2021		1120842	AL	72	M	2/1/2021	2/1/2021	this is all per family, 4 to 5 days after 2nd COVID vaccine he was acting unusual and was taken to the hospital. He had a clot in his brain and underwent brain surgery. He experienced seizures after the surgery, but it was ultimately reported the surgery went well. He remained intubated and on a ventilator after surgery. He developed complications of his lungs and kidneys while on the ventilator. Ventilator was removed 3/16/2021 and he passed away that day. The hospital providers thought the clot in the brain may have been from hitting his head over a month ago. From my understanding he was A&O, independent with ADLs, and lived in his private residence prior to these complications.
3/21/2021		1120952	VA	66	F	3/19/2021	3/20/2021	NOTHING LOCALLY AT TIME OF IMMUNIZATION. NO PROBLEM 15-30MINUTES LATER. WAS INFORMED SHE WAS FOUND DEAD THE NEXT MORNING.
3/21/2021		1120979	VA	81	M	3/19/2021	3/20/2021	NO IMMEDIATE LOCAL REACTION, NO REACTION 30MINUTES LATER. FOUND FOAMING AT THE MOUTH NEXT MORNING. PRONOUNCED DEAD AT HOSPITAL.
3/21/2021		1120816	MD	71	M	3/11/2021	3/12/2021	Death. No autopsy performed.
3/20/2021		1119002	IN	81	M	2/11/2021	2/12/2021	Day 1-Confusion and weakness Day2-Increase in weakness, inability to swallow, confusion, fatigue Day 3- Weakness, confusion, incontinence, hospitalized for hypoxia, pneumonia Day 20- Deceased

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3/20/2021	1118314	PA	50	F	3/10/2021	3/10/2021	She received the Johnson and Johnson vaccine on Wednesday and died on Sunday 3/14/2021. Her autopsy is pending.
3/20/2021	1118229	WA	69	M	3/3/2021	3/13/2021	Sudden Death
3/19/2021	1115581	MO	75	F	2/10/2021	2/15/2021	Unattended Death, symptoms and timeframe unknown, death occurred approximately 1 week post vaccination
3/19/2021	1114885	KS	90	M	2/6/2021	2/11/2021	Asthenia; Nausea; Vomiting; A spontaneous report was received from a Pharmaceutical Company concerning a 90 Years-old male patient who received Moderna' s COVID-19 vaccine (mRNA-1273) and experienced nausea, vomiting, generalized weakness with a fatal outcome. The patient's medical history is aortic aneurysm, aortic stenosis, coronary artery disease, hypertension, cardiac heart failure, atrial fibrillation, HLD, ischemic heart failure, pacemaker, ventricular fibrillation, peripheral vascular shunt, palpitations, hypotension, and small bowel obstruction. No concomitant medications were provided. On 06 FEB 2021, prior to the onset of the events, the patient received his first of two planned doses of mRNA-1273 (Lot number: unknown) intramuscularly in an unknown arm for prophylaxis of COVID-19 infection. On 11 FEB 2021, the patient experienced the events, nausea, vomiting, generalized weakness. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 12 FEB 2021. The cause of death was unknown. Plans for an autopsy were unknown.; Reporter's Comments: Very limited information regarding this events has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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3/19/2021	1114894	MA		U			Thrombocytopenia; Vaccinators are vaccinating very high up on the shoulder; A spontaneous report was received from a nurse concerning a patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced Vaccinators are vaccinating very high up on the shoulder, thrombocytopenia. The patient's medical history, was not provided by the reporter.No Concomitant medications were reported. On an unknown date, the patient received their planned dose of mRNA-1273 (Lot number: unknown) for prophylaxis of COVID-19 infection. The reporter stated that Vaccinators are vaccinating very high up on the shoulder. They need to go down on the deltoid. She also reported the event of thrombocytopenia of which one involved a doctor who died. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event, vaccinators are vaccinating very high up on the shoulder was resolved . The outcome of the events thrombocytopenia is fatal.; Reporter's Comments: This report refers to a patient who experienced non-serious of vaccinating very high up on the shoulder, (Vaccine administered at inappropriate site). There were no reported AEs associated with this case of vaccine administered at inappropriate site.; Reported Cause(s) of Death: Thrombocytopenia

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3/19/2021	1115045	AZ	57	M	3/2/2021	3/2/2021	Death; A spontaneous report was received from a consumer concerning a 57 years old male patient who received mRNA-1273 for prophylaxis of COVID-19 infection and had died (death). The patient's medical history was not provided. Concomitant product use was not provided by the reporter. On 2 Mar 2021, approximately three hours prior to the onset of the symptoms, the patient received hia second of two planned doses of mRNA-1273 for prophylaxis of COVID-19 infection. It was reported that the patient died three hours after receiving the 2nd dose in the ER. Treatment information was not provided. The cause of death was unknown. Plans for an autopsy were unknown. Action taken with mRNA-1273 in response to the event was not applicable. The outcome of the event of death was considered as fatal.; Reporter's Comments: This is a case of sudden concerning a 57 year old male who died three hours after receiving the second dose of the vaccine. Very limited information regarding this event has been provided at this time.; Reported Cause(s) of Death: unknown cause of Death
3/19/2021	1115126	FL	77	M	2/12/2021	3/9/2021	His breathing problem worsened on 02/23/2021, short of breath and tired. He died of a pulmonary embolism and heart attack in the hospital on 3/9/21 after being there for 9 days.
3/19/2021	1115216		91	M	1/28/2021	3/11/2021	NA Patient hx COPD,CAD,
3/19/2021	1114822	LA	51	F	12/30/2020	12/31/2020	Diagnosed with COVID (confirmed with a positive COVID test) the say after her vaccine. Eventually died from complications of COVID. Because vaccine was administered prior to her illness, I am putting this in the VAERS system. Symptoms included SOB, coughing, muscle aches. headache, fever.
3/19/2021	1115451		67	M	2/24/2021	3/3/2021	Home care treatment History of COPD

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3/19/2021		1114496	PR	77	M	1/29/2021	1/30/2021	Impaired emotional state, the abdomen began to inflate, 8/2/2021 is taken by ambulance to the hospital where corresponding studies were carried out. He was having complications from cirrhosis. Then you are discharged on the same day 8/2/2021. On 2/18/2021 he was complaining of generalized pain, they call hospice to be evaluated, caregivers when they proceed to take vitals he was without vital signs.
3/19/2021		1115715	IL	93	M	2/23/2021	3/1/2021	Family, daughter, reports that patient felt "a little sick" on 2/24/21 and "sick" on 2/25/21. She reports that approximately 1 week later her father had weakness and and frequent falls, was evaluated in the E.D. and ultimately admitted to hospital (3/4-3/15) Patient was discharged to nursing home where he died on 3/16/21.
3/19/2021		1115756		90	M	2/25/2021	3/6/2021	NA 90 year old Heart Disease
3/19/2021		1115838		79	M	2/18/2021	3/8/2021	NA History - CAD,CKD-Stage 3 DMII HTN
3/19/2021		1115348	NC		F	3/5/2021	3/6/2021	death; A spontaneous report was received from a HCP concerning about a 86 years old female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and died. The patient's medical history was not reported. Concomitant medications were not reported. On 05 Mar 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (Batch number: 026A21A) via intramuscular in left deltoid for prophylaxis of COVID-19 infection. On 06 Mar 2021 the patient died next day after vaccination, who left quite well after vaccination from the facility, the reason for death is not known. Treatment information was not provided. Action taken with mRNA-1273 in response to the event is not applicable. The outcomes of all the event is not applicable.; Reporter's Comments: This is a case of death in a 86 years old female patient, with unknown past medical hx or current co morbid conditions and concomitant medications, who died one day after receiving first dose of vaccine. Very limited information has been provided at this time.; Reported Cause(s) of Death: unknown cause of death

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3/19/2021	1114806	VA	45	F	3/6/2021	3/12/2021	Diagnosis: Cortical vein thrombosis, massive intracerebral hemorrhage with tentorial herniation, thrombocytopenia. Clinical Presentation and Course: 1 week after receiving Janssen COVID19 vaccination, patient developed gradually worsening headache. On March 17th, patient presented to Hospital with dry heaving, sudden worsening of headache and L sided weakness. Evaluation with head CT revealed a large R temporoparietal intraparenchymal hemorrhage with 1.3cm midline shift. She ended up getting intubated for worsening mental status. On evaluation at arrival in Medical Center, she was noted to have extensor posturing. Repeat imaging revealed worsening midline shift to 1.6cm. CTA showed cortical vein thrombosis involving the right transverse and sigmoid sinus with tentorial herniation. Patient developed brain herniation and brain death was pronounced on March 18th, 2021.
3/19/2021	1114752	KY	89	M	12/30/2020	1/17/2021	12/31/2020: vaccine given 1/17/2021: symptom onset and subsequent hospital course: dyspnea, hypoxic, tachypnea, afib w/RVR, septic, NSTEMI
3/19/2021	1114511	PR	83	M	1/29/2021	2/13/2021	Chills, presenting discomfort . Then they give him a bath. When they went to report to the nurse of each of the residents, they found him without vital signs.
3/19/2021	1114454	PR	84	M	1/18/2021	2/1/2021	On 2/1/2021 he vomited and his pulse began to drop. A doctor from the hospice visited him days before and found him in good health and pressure. Patient was in the Home Care hospice.
3/19/2021	1114448	PR	84	M	1/25/2021	2/18/2021	He was sent to the hospital two weeks earlier for Pulmonary Edema, he was discharged and sent to hospice. When the caregiver takes her rounds, she finds the resident without vital signs, prior to that he had not manifested any symptoms. Certification of cardio-respiratory failure secondary to Alzheimer's disease

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3/19/2021	1114383			F			The patient had liver problems and died; This is a spontaneous report from a contactable consumer. A 39-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient had liver problems and died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: The patient had liver problems and died

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3/19/2021	1114382	TX		U	2/20/2021	2/24/2021	<p>Baby stop growing 3 days later (7 weeks 3 days per sono); Baby stop growing 3 days later (7 weeks 3 days per sono); This is a spontaneous report from a contactable Other HCP. This Other HCP reported events for herself and fetus. This is a fetus report. A 40-year-old mother received bnt162b2 (BNT162B2), dose 2 administered in Arm Left on 20Feb2021 (Batch/Lot Number: EI9266) as SINGLE DOSE, dose 1 administered in Arm Left on 27Jan2021 (Batch/Lot Number: EI3248) as SINGLE DOSE for covid-19 immunisation. The mother medical history included allergies: Shellfish. No other vaccine in four weeks. No COVID prior vaccination. Concomitant medication included ascorbic acid, betacarotene, calcium sulfate, colecalciferol, cyanocobalamin, ferrous fumarate, folic acid, nicotinamide, pyridoxine hydrochloride, retinol acetate, riboflavin, thiamine mononitrate, tocopheryl acetate, zinc oxide (PRENATAL VITAMINS). The mother was pregnant. Last menstrual date: 04Jan2021. Due Date: 11Oct2021. The mother was 7 weeks pregnant at time of 2nd vaccine. Baby stop growing 3 days later (7 weeks 3 days per sono) on 24Feb2021 08:00 AM. AE resulted in: Doctor or other healthcare professional office/clinic visit, Emergency room/department or urgent care. The patient died on 24Feb2021 08:00 AM. It was not reported if an autopsy was performed.; Sender's Comments: Based on provided information and temporal association the reported events causal relationship with the suspect drug cannot be excluded. However there is very limited information provided in this report. Additional information is needed to better assess the case, including complete medical history and diagnostics workup. This case will be reassessed upon receipt of follow-up information. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate..Linked Report(s) : US-PFIZER INC-2021277400 Same reporter/drug, different patient /event (mother case); Reported Cause(s) of Death: Baby stop growing 3 days later (7 weeks 3 days per sono); Baby stop growing 3</p>

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								days later (7 weeks 3 days per sono)
3/19/2021		1114257	IL		M	1/28/2021	3/6/2021	fever; chills; headaches; excruciating generalized body aches like he had just be ran over by a truck; nausea; patient has passed away; A spontaneous report from was received from a Consumer concerning a 74 Years-old male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced nausea, headaches, chills, fever, excruciating generalized body aches like he had just be ran over by a truck, patient has passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. On 23-02-2021, prior to the onset of the events, the patient received the second of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, The patient experienced nausea, headaches, chills, fever, excruciating generalized body aches like he had just be ran over by a truck. The patient had a cardiac angiography on 24-02-2021. The result was unknown. The patient was found dead on 06-03-2021. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the events nausea, headaches, chills, fever, excruciating generalized body aches like he had just be ran over by a truck was recovering. The patient died on 06-03-2021. The information about the autopsy was unknown. The cause of the death was unknown.; Reporter's Comments: Very limited information regarding this events has been provided at this time. The patient must have been in some form of cardiac issues before death, that's reason why cardiac angiography was done. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/19/2021	1114256	FL		M			<p>Aneurysm; red splotches on arm skin; A spontaneous report was received from a Consumer concerning a HCP, male patient of unknown age who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced developed red splotches on his arm skin and patient died from an aneurysm. The patient's medical history was not provided. No concomitant medications were reported. On an unknown date, prior to the onset of the events, the patient received their unknown of the two planned doses of mRNA-1273 (lot/batch: unknown) via unknown route for prophylaxis of COVID-19 infection. On an unspecified date, after vaccination the patient had a reaction and developed red splotches on his arm skin. Then four to five days, later in the hospital the patient died from an aneurysm (Seriousness criteria: death). The cause of death was aneurysm. No autopsy details reported. No Laboratory investigations were provided. No Treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of aneurysm was fatal and for erythema was unknown.; Reporter's Comments: Very limited information regarding these events has been provided at this time. Further information has been requested; Reported Cause(s) of Death: Aneurysm</p>

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3/19/2021		1113713	FL	83	F	2/1/2021	2/1/2021	My mother called me when she was going to get her second vaccination. She was alive and well and living independently at her home. She could walk, talk, make her own food, wash and dry her own clothes and take her own baths. After taking the second vaccination she went down hill. She became sicker and sicker and eventually she started coughing up blood. She decided to go to the hospital, another Hospital of facility. I don't know what the treatment was at that hospital but she was soon transferred to facility and that is where I was notified she was in the hospital and visited her there. After arriving they intubated her and said she had blood clots in her brain and heart. When I saw her after she transferred from Hospital to the Hospital I noticed one arm was swollen. Her legs were as they have been for the last 20 years and looked okay to me--no discoloration other than her regular discoloring at one right ankle and the same old same old slight swelling in the left ankle. The doctors and nurses were putting the blame on her legs but you could tell things were happening else where. But as she got worse and worse at the hospital her right arm become more and more swollen with dark bruises appearing--the hospital staff took pictures. The left arm continued to swell and did not look normal at all. She apparently had bleeding in her left lung from a blood clot. She had three areas of her brain that add clots and some bleeding. She was constipated and gaseous when they cleaned her. They didn't treat her constipation which made being intubated worse because I feel that caused her intestines to swell, thus she also had bleeding in her intestines. My mother died on March 17, 2021 at hospital in ICU. I was told they could not treat the blood clots because of the bleeding in her lung, intestines and brain.
3/19/2021		1113647	CA	81	M	3/1/2021	3/18/2021	Patient died 3 days after vaccination
3/19/2021		1122172	ME	86	M	3/5/2021	3/5/2021	Moderna COVID-19 (mRNA-1273) vaccine treatment under Emergency Use Authorization(EUA): The decedent received the shot at 4:30pm and was found deceased at 10pm the same day.

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3/19/2021	1115944	NC	55	M	3/18/2021	3/18/2021	1-2 hours after receiving Moderna vaccination patient began complaining of chest pain to family members but refused to seek medical attention. He was found deceased this morning (03/19/21) by his family. Medical Examiner determined time of death was around 8:40pm on 03/18/21.
3/19/2021	1114735	IL	82	M	1/27/2021	2/18/2021	Acute mesenteric ischemia; shock secondary to necrotic bowel.
3/19/2021	1122392		71	M	1/20/2021	2/10/2021	Patient passed away related to covid vaccination Narrative: The patient had CHF, cardiomyopathy, A-fib and COPD. Patient received his first dose of Moderna on 1/20. No adverse reaction was reported. Patient was found unresponsive and confirmed dead by Sheriff on 2/10. Cardiologist was notified of his death and suspect patient's death is related to ventricular arrhythmia. He also has a history of noncompliance. Cause of death is not related to COVID 19 vaccination.
3/19/2021	1117431		92	F	3/10/2021	3/12/2021	Found in chair lethargic less than 48 hours after her first covid vaccine by facility staff where she lives in an independent living facility. Nursing staff felt she had a stroke with right sided weakness. Slurred speech, weak, unable to walk without two person assistance. Patient was under hospice care so hospitalization was given.
3/19/2021	1115994	MI	84	F	3/8/2021	3/8/2021	03/02/21 the patient was visited by nurse. No signs of distress. Normal vitals. No GI concerns according to staff. Her appetite was her usual described as fair. She received her 2nd Moderna vaccination on 03/08/21. Within hour she became very ill according to facility staff. She began to vomit up to 5 times. Her stools became loose. She became more lethargic. She was started on compazine for the vomiting. Her oral intake was minimal. Her symptoms did not resolve and she was visited by the nurse again on 03/11/2021 where she was not very responsive. Her vitals included an irregular pulse and apnea noted in her breathing up to 15 seconds. She died on 03/12/21

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3/19/2021		1122468		85	M	2/1/2021	2/5/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had prostate cancer, Merkle cell carcinoma and clear cell carcinoma of kidney. Patient has been placed on hospice care. Patient received the first dose of Pfizer on 2/1 and no adverse reaction was reported. Patient passed away on 2/5. No indication that death was related to COVID 19 vaccination.
3/19/2021		1122441		57	M	2/18/2021	3/8/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had with a history of ischemic cardiomyopathy and multiple PCI's, CABG history of acute renal failure and hypokalemia and decompensated heart failure. Patient received his first dose of Pfizer dose on 2/18. Patient passed away on 3/8 due to cardiac arrest upon arrival to ER. Cause of death is not related to COVID-19 vaccination.
3/19/2021		1122393		66	M	3/3/2021	3/18/2021	Death Narrative: Around the end of January 2021, patient was admitted to a home hospice program due to worsening of patient's Parkinson's Disease and Dementia. It was noted on the hospice programs Plan of Care that patient had severe, progressive dysphagia due to disease. Patient lost 20 pounds over the last 2 months prior to admission to hospice program. Patient had severe tremors, dystonia, and was dyspneic with minimal exertion. Patient received Moderna's Covid vaccine on 3/3/21. On 3/13/21, patient got progressively worse. He stopped eating and drinking and started to exhibit Cheyne-Stokes breathing. Hospice nurse noted that patient only had a few days remaining. On 3/18/21, patient passed away.
3/19/2021		1118968		75	M	1/21/2021	2/1/2021	Patient passed away due to cardiac arrest Narrative: The patient had with PMH of CAD and multiple PCI, HFpEF, HTN. DM2, ESRD on HD, COPD and home O2 and other co-morbidities. Patient received his first dose of Pfizer vaccine on 1/21 and no adverse reaction was reported. Patient had a cardiac arrest on 2/1 and he was admitted to hospital. Patient passed away naturally on 2/1. Cause of death is not related to COVID 19 vaccination.
3/19/2021		1117316	OH	69	M	3/18/2021	3/19/2021	Sister in law called on 3-19-2021 to report that had died a day after receiving his Moderna vaccine. She stated he was found in his driveway and was unable to be resuscitated after being rushed to the hospital.

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3/19/2021		1117213	KY	78	M	2/3/2021	3/10/2021	Case tested positive for COVID-19 on 3/1/2021 by rapid antigen and then again on 3/3/2021 by PCR. Case was admitted to hospital on 3/3/2021 for shortness of breath and occult infection. Case was previously admitted and discharged from hospital on 2/22/2021 after a lumbar compression fracture. Case had monoclonal antibody infusions; was afebrile and denied chills, but had a dry cough. Case was a previous smoker, quit 2 years prior. Case developed pneumonia. Case required supplemental oxygen.
3/19/2021		1117078	CA	89	F	3/11/2021	3/11/2021	Patient died approx. 5 hours after shot was administered. Cause of death reported is Atherosclerotic Cardiovascular Disease. The death certificate was signed by the county coroner without autopsy, based on the report by the onsite deputy coroner. No doctors or hospitals were involved. This report is FYI only; there has been no direct connection made between my mother's death and the vaccine other than one followed shortly after the other.
3/19/2021		1116808		39	F	3/13/2021	3/13/2021	No symptoms reported. Found dead seated on couch the day after vaccination (3/14/2021). Autopsy performed on 3/15/2021 showed no evidence of anaphylaxis. Cause of death = Cardiomyopathy of Obesity.
3/19/2021		1116803		66	M	2/15/2021	2/15/2021	Appeared unwell after vaccination. After returning home, sat down in chair and became unresponsive. Resuscitation unsuccessful. Autopsy performed 2/17/2021 showed severe hypertensive and coronary heart disease with congestive heart failure and no signs of anaphylaxis (postmortem serum tryptase = 9.2 mcg/L; RR <= 10.9).
3/19/2021		1116594	GA	72	F	3/4/2021	3/4/2021	Patient called EMS from for respiratory distress. EMS arrived, noted severe distress and hypoxia. Patient transported to Hospital Emergency Dept. Patient deteriorated to respiratory arrest and cardiac arrest. Per ED note, after 30 minutes of aggressive resuscitation (including approximately 19 minutes in the ED), no ROSC was achieved. Patient expired
3/19/2021		1116353	MN	77	F	2/20/2021	3/18/2021	Patient passed away within 60 days of receiving the COVID vaccine series

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3/19/2021	1116006	MN	94	F	2/25/2021	3/9/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/19/2021	1116073	MN	91	M	1/19/2021	2/28/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/19/2021	1122394		86	M	2/4/2021	3/9/2021	Patient passed away unrelated to covid vaccination Narrative: The patient with PMHx significant for afib s/p failed ablation, chronic hep B, heart failure and skin cancer. Patient received his first dose of Pfizer on 1/14 and second dose of Pfizer on 2/4. Patient's wife notified facility that patient had passed away at his residence on 3/9 due to metastasized cancer. Cause of death is not related to COVID 19 vaccination.
3/19/2021	1116540	TN	65	F	3/15/2021	3/18/2021	DEATH- PHARMACY NOTIFIED 3/19/21 OF PATIENT DEATH ON 3/18/21, NO OTHER DETAILS KNOWN
3/19/2021	1116236		60	F	2/10/2021	3/11/2021	Hospice patient passed away within 60 days of receiving a COVID vaccine

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3/19/2021	1116259	CA		M	1/21/2021	1/21/2021	Death; not able to stand up or walk; extreme weakness; he did not feel well; not able to stand up or walk; A spontaneous report was received from the patient's wife concerning a male (age not provided) who experienced extreme weakness/asthenia, did not feel well/malaise, unable to walk/gait inability, and unable to stand/dysstasia. The patient's medical history included lung disease which required oxygen support. Per patient's wife, no concomitant products were in use within two weeks of the event. The patient's wife also stated he does not take any daily medications. On 21 Jan 2021, prior to the onset of events, the patient received the first of two planned doses of mRNA-1273 (Batch number 029L20A) by injection into his left arm for prophylaxis of Covid-19 infection. After receiving the vaccine, the patient's wife stated he did not feel well. He experienced extreme weakness. He was not able to stand up or walk for the first few days after getting the shot. "He could not walk even 3 steps and get in the car". On 09 Feb 2021, the patient felt a little bit better and could walk from one bedroom to another. No Medications were used to treat the patient's symptoms. No relevant medical tests were provided. The patient had an appointment with his healthcare provider (date and time not provided) and was told he could not get the second dose of vaccine unless he got better. The patient's wife stated she is not blaming the vaccine because her husband had a lung disease prior to getting the vaccine. His doctor said, (per his wife) this lung disease had weakened him to the point he could not drive his car anymore. His brain was fine before the vaccine. On 03 Mar 2021, the patient's wife called to say that the patient had finally passed away on 13 Feb 2021. The second dose of mRNA-1273 was withheld in response to the events while waiting for the patient's condition to improve however; it was never given due to the patient's death. The events of did not feel well, extreme weakness, unable to walk, and unable to stand were not resolved (presumably) prior to the patient's death. The patient died on 13 Feb 2021. The cause of death was not provided. Plans for an autopsy were not provided. Company Comment: The reported events, death, malaise, asthenia, gait inability, and dysstasia were considered possibly related to mRNA-1273.; Reporter's Comments: This is a case of death in a male subject with a hx of lung disease requiring

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3/19/2021	1116373		88	F			<p>oxygen, who died 23 days after receiving first dose of vaccine. Very limited information is available and based on the reporter's causality assessment the event is considered unlikely related to the vaccine"; Reported Cause(s) of Death: cause of death unknown</p> <p>Passed away; so weak she was no longer able to use her walker and declined steadily each day thereafter; A spontaneous report was received from a consumer concerning a 88-year-old female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced being so weak she was no longer able to use her walker and declined steadily each day thereafter (asthenia) and passed away (death). The patient's medical history was not provided. Concomitant product use was not provided by the reporter. The patient received their first of two planned doses of mRNA-1273 (Batch number not provided) on an unspecified date. On an unspecified date, approximately 15 days prior to the onset of the symptoms, the patient received their second of two planned doses of mRNA-1273 (Batch number not provided) intramuscularly for prophylaxis of COVID-19 infection. On an unspecified date, two days after their second dose of the vaccine, the patient was so weak that she was no longer able to use her walker and declined steadily each day thereafter. On an unspecified date, 17 days after their second dose of the vaccine, the patient passed away. Treatment information was not provided. The outcome of the event, asthenia, was unknown. The outcome of the event, passed away (death), was fatal. The cause of death was reported as unknown. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding this event/s has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death</p>
3/19/2021	1116400	MN	80	M	1/25/2021	3/17/2021	Patient passed away within 60 days of receiving the COVID vaccine series
3/19/2021	1116436	MN	90	F	1/27/2021	3/16/2021	Patient passed away within 60 days of receiving the COVID vaccine series

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3/19/2021	1116408	AL	75	F	2/2/2021	2/10/2021	severe internal bleeding fluid build up around lungs/heart high heart rate low blood pressure low oxygen liver failure death
3/19/2021	1116377	PA	91	M	3/1/2021	3/2/2021	91 yo father received vaccine, was mobile and alert before first shot, but required wheelchair by second vaccination due to being weak. After second vaccination, was not able to stand or move after 36 hrs, at which point he was taken to the hospital. At hospital, all vital signs were good except an MRI showed cancer in spine. Shot was given 3/1 and my father passed on 3/18. Obviously this shot did not cause metastatic cancer, but I believe it did induce an inflammatory response of some kind that caused it to progress extremely quickly.
3/19/2021	1116386	CO	68	M	3/12/2021	3/14/2021	Patient developed nausea and vomiting 3/14/21. was seen at clinic by this provider 3/16/21 and reported at that time continued fatigue but overall symptom improvement. Vital signs were stable. pt was advised to orally hydrate and routinely monitor blood sugars and f/u as needed. On 3/18/21 patient was found down in his motel room by shelter staff unresponsive. 911 was called. pt transported to hospital by EMS receiving BLS. Clinic staff was advised by family that patient was pronounced dead that date.
3/19/2021	1116407	KS	59	M	2/26/2021	2/27/2021	Patient got sick over the weekend. Went to facility on 03/02/2021 and then passed on 03/18/2021
3/18/2021	1111574	FL	68	F	3/8/2021	3/11/2021	Passed away 4 days after second dose, complained of not being able to breathe in the middle of the night, and passed minutes later.

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3/18/2021	1111546	OH	77	F	3/2/2021	3/9/2021	One week post vaccine, caller's mother started to feel "phlegm-y", coughing up clear phlegm. The next day she was more lethargic, coughing. Called her PCP, recommended Robitussin and Mucinex which she took. Continued to feel worse. No fever although she had cold sweats. She felt a lot of GI pain, fullness, could not eat/drink. Called PCP again by the 4th day of feeling bad. Recommended Augmentin and she took 2 doses. On 3/12 and 3/13, had difficulty breathing, coughing. Called EMS on 3/14 and taken to hospital where she was treated for dehydration and pneumonia with a broad spectrum antibiotic and vancomycin, IV. Given morphine for pain. She tried to take a GI cocktail which she felt like she was choking on. That evening on her BP bottomed out. They continued to give IVFs to raise BP as fast as possible. She was unable to receive chest compressions due to aorta issue and her heart gave out and she stopped breathing on 3/14.

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3/18/2021	1111300	PA	92	M	1/6/2021	1/22/2021	patient died of complications of pneumonia related to COVID-19; patient died of complications of pneumonia related to COVID-19; This is a spontaneous report from a contactable consumer. A 92-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN), via an unspecified route of administration on 06Jan2021 at 13:00 (at the age of 92-years-old) as a single dose for COVID-19 immunization. Medical history included melanoma, chronic obstructive pulmonary disease, diabetes mellitus, and diminished kidney function; all from unknown dates and unknown if ongoing. Prior to the vaccination, the patient was not diagnosed with COVID-19. The patient was taking unspecified concomitant medications. The patient did not receive any other vaccines within four weeks prior to the vaccination. The patient was vaccinated on 06Jan2021 during an existing hospitalization. On 22Jan2021, the patient developed pneumonia related to COVID-19. The patient did not receive any treatment. On 03Feb2021, the patient died of complications of pneumonia related to COVID-19. It was not reported if an autopsy was performed. The events were serious for hospitalization prolongation, being life-threatening and death. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow up.; Reported Cause(s) of Death: patient died of complications of pneumonia related to COVID-19
3/18/2021	1111389	NC	80	M	2/24/2021	3/5/2021	Cough started on 3/5. Hospitalization on 3/7, Expired 3/16. Doctor's Death Diagnosis: acute on chronic respiratory failure.
3/18/2021	1111006	TX	73	F	2/1/2021	2/1/2021	On 03/08/2021, patient began not feeling well. She complained of nausea, vomiting and diarrhea. Her husband reported that she received the first vaccine in 02/2021 and complained of not feeling well. Patient died on 3/12/2021.
3/18/2021	1111624	KY	88	U	1/27/2021	2/9/2021	expired on 02/09/2021
3/18/2021	1112104		90	F	2/26/2021	3/9/2021	Patient passed away within 60 days of receiving a COVID vaccine

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3/18/2021		1111042	IN	71	M	3/10/2021	3/15/2021	RHC 3/15/21. No significant reaction from vaccine. Had sore arm.
3/18/2021		1111039	MN	77	F	2/3/2021	2/21/2021	patient passed away within 60 days of receiving a COVID vaccine
3/18/2021		1111406	MD	85	F	2/28/2021	2/28/2021	02/28/2021 @ 12:00 PM - sore arm, more than normal, at sight of injection; not feeling right 03/01/2021 @ AM - arm so sore that she could hardly move whole arm to hold stair rail; fatigued; not feeling right 03/04/2021 - diarrhea 6 x; fatigued; not feeling right 03/05/2021 - still had diarrhea; fatigued 03/06/2021 - 1/6 cup of urine only when she woke up in the morning; fatigued; diarrhea during AM; seemed to stop diarrhea PM and urinated maybe 2/3 cup urine more; found an almost unnoticeable bulge between the 2 collar bones above the sternum, still not feeling right 03/07/2021 - after waking up to go to the bathroom approximately 6:00 AM, incontinent wit BM, vomited
3/18/2021		1111645	IL	94	F	2/10/2021	3/18/2021	Patient was a resident on a LTC wing. Received Covid-19 vaccine on 1/13/21 & 2/10/21. Pt stated she felt phlegm in her throat 3/14/21. On 3/15/21 patient started having trouble swallowing, and started needing supplemental oxygen for low oxygen saturation and needing suctioned for c/o being unable to swallow.. ST eval showed no gag reflex and inability to swallow effectively or safely. Pt needed 5L/O2 and unable to hold saturations above 90%. Patient became ?comfort care?, and passed away 3/18/21.
3/18/2021		1111683	AR	73	M	3/15/2021	3/16/2021	Patient's niece reported that the patient's arm became sore, had stomach upset, fever the day after the vaccine. The following day the patient died.
3/18/2021		1111699	MO	69	M	3/3/2021	3/13/2021	Patient developed symptomatic COVID infection with symptoms starting 3/13, was admitted to the hospital for respiratory failure on 3/16 and expired on 3/18/21
3/18/2021		1111726	WA	85	F	2/25/2021	3/12/2021	Patient was reported by adult care home to have passed away 3/12/21
3/18/2021		1111957	MD	71	F	3/3/2021	3/7/2021	Received vaccine on 3/3/2021 then was found dead in bed by her husband on 3/7/2021.

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3/18/2021	1112117	UT	88	M	3/9/2021	3/9/2021	Patient was a patient on hospice, had terminal dx of frontal lobe dementia. NP visited with patient on 03/10/2021, notable decline/flank pain, fever 101. Patient passed away on 03/12/21, Medical Director wanted this reported to VAERS d/t the vaccination was within 72hrs of the pts death.
3/18/2021	1110978	TX	54	M	2/12/2021	2/12/2021	Unknown information regarding side effects from first Moderna Covid vaccine. Second Covid vaccine on 2/12/2021 and there were no issues. Patient died on 31/10/2021. Postmortem Covid test is negative for SARS-CoV2 RNA.
3/18/2021	1110329		63	F	1/29/2021	3/4/2021	Patient passed away within 60 days of receiving the COVID vaccine series
3/18/2021	1112122	CA	43	M	3/13/2021	3/15/2021	Patient was admitted for Multi drug resistant UTI (for which he has been admitted many times before). Was hospitalized for 3 days while awaiting cultures, hemodynamically stable, with no lab abnormalities. On the day of discharge (sensitivities to UTI came back, pt to be discharged on cefepime, had PICC line) pt got up from bed, sat on the edge of the bed and was being given belongings by the nurse, alert and oriented and in a pleasant mood, when suddenly pt grabbed at his chest and stated "I can't breathe" and became combative and altered when O2 was attempted to be placed on pt's face; then pt had PEA arrest x3 and unable to achieve ROSC.

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3/18/2021	1112123	UT	77	M	3/11/2021	3/12/2021	This patient was on hospice, we are reporting this to VAERS at the Medical Directors request d/t patient's death within 48 hours of the second dose vaccine. The death occurred the morning following his second dose of the Moderna COVID-19 Vaccination, vaccine received on 03/11/21 and patient date of death 03/12/21 at 9:41 am. This was a hospice patient with a terminal dx of CKD. This is being reported at the request of the Medical Director for the hospice team, d/t the patient's death occurred within 48 hours of receiving the second dose of this vaccine. The nurse case manager stated the pt was declining as they were on hospice for a terminal condition and had co-morbidities, Pt did show more decline after receiving COVID-19 vaccination and patient passed away within 48 hours of receiving second vaccination dose.
3/18/2021	1111924	MT	70	F	3/16/2021	3/17/2021	Patient found demised at home on 3/17/2021
3/18/2021	1110537	NE	79	M	3/12/2021	3/15/2021	Pt was found to be having stroke like symptoms 3/15 in the morning at nursing home. he was evaluated and was transported by ambulance from one hospital to another hospital as the CT scanner was down. patient had an injury on march 1 with a cabinet falling on him breaking his femur and family not sure if at that time he had hit his head. Patient was intubated in the ER CT scan showed a massive cerebral bleed with midline shift and transtentorial herniation
3/18/2021	1112136	MN	97	F	2/3/2021	2/11/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/18/2021	1118959		87	M	2/9/2021	3/8/2021	Death Narrative:
3/18/2021	1110099	FL	69	M	3/10/2021	3/12/2021	3/12/21 Sudden cardiac arrest at home; unable to be resuscitated at scene (Brother) Caller is a family friend who was asked by family to call and report incident. If f/u is needed, please contact him first. Current Medical History: unknown by caller Current Medications: unknown by caller

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3/18/2021	1110152	PA	60	F	3/11/2021	3/13/2021	This is a 60 year old female was brought into emergency department as cardiac arrest. Patient was seen at care now urgent care with the complain of epigastric pain associated with nausea vomiting and intermittent diarrhea. Patient received her initial COVID vaccine 2 days ago. History is obtained from urgent care chart. As per notes patient started nausea vomiting 6 hours post COVID vaccine administration. Patient was seen in urgent care for epigastric pain and nausea vomiting. Patient was found unresponsive at 0902 by tech. No carotid pulses palpated. CPR was started. Patient was brought into the emergency department with Lucas on. Patient was given 5 epinephrine prior to arrival. CPR was in progress. Patient was asystole. Resuscitation was continued in the ED. Patient was intubated in the ED by physician assistant 5 epinephrine 2 bicarb and 1 calcium chloride was given in the ED. Cardiac Ultrasound didn't show any cardiac activity. Asystole on the monitor. No corneal reflex people are fixed and dilated. Patient was pronounced at 1007 am
3/18/2021	1110160	GA	78	M	2/27/2021	3/10/2021	Phone call from patient' s 2 daughters on 3/10/2021. Patient was found dead in bed with a remote in his hand. He had not been sick. He had received Moderna SARS vaccine 2/27/2021= 11 days earlier, but did not have any adverse reactions. He had recovered from lumbar spine surgery several months earlier. He was pronounced dead by the fire chief.
3/18/2021	1110232	CA	79	M	3/1/2021	3/4/2021	DizzineS, sweating,weak, chilling, diarrhea, shortness of breath, death
3/18/2021	1110311	MN	91	M	2/9/2021	3/4/2021	patient passed away within 60 days of receiving a COVID vaccine
3/18/2021	1110388	PR	60	F	2/1/2021	2/2/2021	On 2/1/2021 they performed CBC, the result was aseptic bacteria so it came out and she was taken to the hospital. They removed the tube in the hospital, (she remained in the hospital) First she was hospitalized and then she was transferred to the Medical Center Hospital to auscultate bleeding in the stool and to be evaluated by the Gastroenterologist. This specialist performs the necessary studies, they do not give a diagnosis and in the process she dies. The hospital indicated that she had a blood drain and heart failure.

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3/18/2021		1110437	PR	76	F	1/30/2021	2/9/2021	Since the vaccine was administered on 1/30/2021 the resident was complaining of tiredness. On 2/9/2021 she complains more than usual with fatigue, a lot of fatigue so they make the decision to transfer her to the hospital. In the hospital she was informed that the pain was from a gallbladder stone, also that she has a lung condition and a compromised kidney. A Dr. from Hospital tells POC that the patient was not responding to treatments and was compromised thus prolonging the hospital stay.
3/18/2021		1110462	MN	84	F	1/21/2021	1/28/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/18/2021		1110878	KY	91	M	1/5/2021	1/20/2021	Only received 1st round dosage of COVID vaccination, he seemed to handle vaccination okay. On January 17, 2021, he tested COVID positive on a resident screening test done in response to an employee positive case in days previous to the residents testing. Fifteen days after his first inoculation, his AM nurse found him non-responsive on early vital checks. Vitals at that time were normal range. The facility physician was contacted and advised that he should be taken to Emergency Room at local hospital for further evaluation. Blood work was taken and ER DR diagnosed Heart enzymes elevated indicating a heart attack. Advised additional testing should be done, and that monoclonal antibody treatment wasn't an option due to time lapse since diagnosis of COVID, The option of comfort care was chosen as the treatment plan.
3/18/2021		1110581	IL	94	F	2/13/2021	2/15/2021	Withing 24 hours of vaccine admin developed nausea, chills, aches, dyspnea, elevated heart rate. Saw PCP on 2/15 and was sent to ER and then admitted to hospital for 5 days-continued extreme nausea and atrial fibrillation after diuresis for CHF. HR 120s had to be put on multiple meds to bring ratedown. Discharged on 2/19. Cont worsening nauaea/chills/aches. Passed away on 2/23
3/18/2021		1110641		83	F	1/12/2021	2/23/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/18/2021		1110654		77	F	2/1/2021	2/25/2021	Constipation Shortness of Breath Death
3/18/2021		1110673		83	M	1/28/2021	2/11/2021	shoulder injury death

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3/18/2021	1110693		79	M	2/5/2021	3/17/2021	death
3/18/2021	1110696	MN	76	F	1/22/2021	2/13/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/18/2021	1110712		93	F	2/27/2021	3/12/2021	death
3/18/2021	1110732		66	F	1/20/2021	2/8/2021	death
3/18/2021	1110439	RI	94	M	3/10/2021	3/10/2021	Tolerated Well without complications
3/18/2021	1118960		87	M	2/12/2021	3/11/2021	Death Narrative:
3/18/2021	1116103		80	M	1/6/2021	2/17/2021	Death Narrative:
3/18/2021	1116104		86	M	1/20/2021	2/19/2021	Death Narrative:
3/18/2021	1116105		94	M	1/20/2021	2/11/2021	Death Narrative:
3/18/2021	1116106		79	M		2/11/2021	Death Narrative:
3/18/2021	1116107		96	M	1/27/2021	2/6/2021	Death Narrative:
3/18/2021	1116108		82	M	1/21/2021	2/21/2021	Death Narrative: Patient received dose 1 of COVID vaccine on 1/27/21. Was observed x15 minutes, no reactions noted. Later that day patient's spouse reports patient has been acting out (reports behaviors the night before) and that she cannot care for him any longer. Patient falls sometime in the 48 hours after vaccine and is admitted to the hospital with an unknown diagnosis. Not certain of patient's history after this hospitalization until 2/9 when patient is admitted again to the hospital with hepatic encephalopathy. Patient is switched to hospice status by 2/12, and passes on 2/21/21.
3/18/2021	1118953		84	M	2/16/2021	2/24/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had end stage COPD and placed in hospice care. Patient received first dose of Moderna vaccine on 1/20 and second dose of Moderna vaccine on 2/16. No adverse reaction was reported. Patient passed away at home on 2/24/2021. Cause of death not documented. No indication that death was related to COVID 19 vaccination.

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3/18/2021		1118954		88	M	1/28/2021	2/21/2021	Patient passed away unrelated to covid vaccine Narrative: 87 YO male has relapse lung cancer and was on radiation therapy and chemotherapy in hospital. Patient received his first dose of Pfizer vaccine on 1/28/2021 (as advised 1.5 weeks after administration of chemotherapy in between cycle) and no adverse reaction was reported. Cause of death not documented. No indication that death was related to COVID 19 vaccination.
3/18/2021		1116102		83	M	2/11/2021	2/25/2021	Death Narrative:
3/18/2021		1118958		92	M	2/8/2021	3/15/2021	Death Narrative:
3/18/2021		1118955		85	M	2/2/2021	3/8/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had Alzheimer dementia and acute on chronic renal failure. Patient received first dose of Pfizer vaccine on 1/13/2021 and second Pfizer vaccine on 2/2/2021. No adverse reaction was reported. Patient was recently admitted for LE edema and increasing SOB. Patient passed away on 3/8/2021 in hospital. No indication that death was related to COVID 19 vaccination.
3/18/2021		1118961		78	M	2/13/2021	3/10/2021	Death Narrative:
3/18/2021		1118962		95	M	2/10/2021	2/25/2021	Death Narrative:
3/18/2021		1118963		61	M	2/5/2021	3/8/2021	Death Narrative:
3/18/2021		1118964		89	F	2/26/2021	3/3/2021	Death Narrative:
3/18/2021		1118965		78	M	1/19/2021	1/31/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had new onset of CHF,A.fib and hx f COPD. Patient was admitted to hospital on 1/21 and Patient discharge against medical advise on 1/22. Patient aware of risk including early death and increased morbidity but patient still wanted to leave. Patient received the first dose of Pfizer vaccine on 1/19 and no adverse reaction was reported. Patient presented to ER for shortness of breath and chest pain and was admitted on 1/29. Patient passed away on 1/31. No indication that death was related to COVID 19 vaccination.

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3/18/2021	1118966		87	M	1/11/2021	1/27/2021	Patient passed away unrelated to covid vaccination Narrative: The patient had hx of chronic heart failure on palliative milrinone with hospice. Patient received his first dose of Moderna on 1/11 and patient had a prior positive PCR on 1/12/2021. Patient passed away on 1/27/2021. Family member stated patient didn't seem to be struggling for breath, any pain or other discomfort. Cause of death is not related to COVID 19 vaccination.
3/18/2021	1112164	MN	46	M	3/4/2021	3/6/2021	Individual Suddenly passed away on 3/7/21.....His Psychiatrist stated that there could be an adverse effect with COVID, the COVID Vaccination and medications, with an emphasis on Clozapine
3/18/2021	1118957		77	M	1/23/2021	2/19/2021	DEATH Narrative: Patient passed away approximately 1 month after receiving first COVID-19 vaccination. No report of a significant reaction to this vaccine, so unlikely a correlation.
3/18/2021	1118956		94	M	1/11/2021	2/4/2021	Patient passed away unrelated to COVID vaccine Narrative: The patient has COPD and congestive heart failure. Patient received first dose of Moderna vaccine on 1/11/2021 and no adverse reaction was reported. Patient's son reported patient had a minor car accident and was taken to ER where he was tested positive for COVID pneumonia and he passed away in his sleep on the morning of 2/4/2021. Patient's son stated due to his COPD, he was not able to survive the COVID pneumonia. No indication that death was related to COVID 19 vaccination.
3/18/2021	1112370	NJ	69	M	3/2/2021	3/3/2021	The patient got the Moderna vaccine on 3/2/2021. On 3/3/2021 he suffered a dissection of the ascending thoracic aorta and died.
3/18/2021	1112185	MN	86	F	2/4/2021	3/4/2021	Patient passed away within 60 days of receiving the COVID vaccine series
3/18/2021	1112223	MN	83	F	1/21/2021	3/5/2021	Patient passed away within 60 days of receiving a COVID vaccine

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3/18/2021	1118967		91	M	2/9/2021	3/3/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had worsening COPD and cognitive deficits. Patient's last hospital visit is 2/2021 for COPD exacerbation. Patient received his first dose of Moderna on 1/13 and second dose of Moderna on 2/9. Patient passed away at home on 3/3. No indication that death was related to COVID 19 vaccination.
3/18/2021	1112264	ND	88	M	1/21/2021	1/22/2021	death
3/18/2021	1116101		91	M	2/11/2021	3/2/2021	Death Narrative:
3/18/2021	1112420	MI	92	F	2/18/2021	3/4/2021	Patient was contacted about coming in to receive second dose and family member had informed us that she had passed away from COVID two weeks after vaccine was given.
3/18/2021	1112517	TX	88	F	3/5/2021	3/7/2021	My mother died of a brain hemorrhage 5 days after receiving the vaccine.
3/18/2021	1112585	AZ	72	M	1/28/2021	2/18/2021	patient diagnosed with covid on 2.18.2021 and died of covid 3.6.2021
3/18/2021	1112701	TN	72	M	3/12/2021	3/15/2021	Pt received COVID19 shot on 3/12/2021. Pt passed away on 3/15/2021. Dr called us to inform us that our patient had passed away but he did not believe it was caused by the vaccination at this time.
3/18/2021	1112743	FL	85	F	3/12/2021	3/14/2021	PATIENT PASSED AWAY ON 3/14/2021 @ 6:10 PM

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3/18/2021	1112773	CA	56	F	3/11/2021	3/12/2021	Moderna #1 vaccine given at 130pm March 11th 2021. Pt had history of asthma and frequent nebulizer use and had it in car with her for drive-thru vaccine clinic we did at location, which has a large parking lot. We gave 80 doses. Pt checked off anaphylaxis on the intake form so Dr spoke to her and she changed it to no history of anaphylaxis and only has history of asthma. So we gave her the vaccine. About 5 minutes later in car parking lot she started to use her personal nebulizer. I saw her in passenger side of car using a personal nebulizer so I talked to her and her daughter to find out what was going on. They said she has exacerbations all the time and this was not out of ordinary for her. I checked pulse ox and did a lung exam, etc, and she was stable. She seemed baseline according to history by her and her daughter. As she seemed at baseline and clinically was comfortable and conversant whole time, and she felt better after her nebulizer, I told them to have a low threshold for going to ER or calling 911 if her asthma was worse or different than her usual symptoms. They agreed. According to daughter, she did well until about 24 hours the next day. The daughter said she was fine and she went to store and when she returned EMTs were intubating patient and apparently the patient used her epipen and called 911 herself. Approximate time of expiration was 230pm on March 12th 2021.
3/18/2021	1116097		95	M	1/7/2021	1/21/2021	Death Narrative:
3/18/2021	1116099		54	M	3/13/2021	3/16/2021	Cardiac Arrest Narrative: Patient received vaccine at 1209 on 3/13/2021, observed for 15min no reaction noted. Later that evening patient was not feeling well presented to ER where he was admitted. Had cardiac arrest during hospitalization on 3/16/2021 where patient passed away. Had a Hx of CHF, A-Fib, had a cardiac stent placement in 2020..
3/18/2021	1116098		63	M	1/12/2021	1/28/2021	Death Narrative:
3/18/2021	1116096		95	M	1/13/2021	1/29/2021	Death Narrative:

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3/18/2021	1116095		86	M	1/12/2021	1/17/2021	Patient passed away unrelated to covid vaccination Narrative: The patient had rectal cancer with metastases and stage 4 chronic kidney disease. Has been placed on palliative care. Patient received his first dose of Pfizer vaccine on 12/22 and second dose of Pfizer on 1/12. No adverse reaction related to vaccination was reported. Patient passed away on 1/17. Patient's daughter had concern that his rapid decline over the past few days may have been related to COVID vaccine. Attending explained that patient's clinical changes are more consistent with decline due to an end of life status. No indication that death was related to COVID 19 vaccination.
3/18/2021	1116094		93	M	3/11/2021	3/13/2021	Attempted Suicide Narrative: 93 year old received his 2nd dose of moderna vaccine on 3/11/21 in his home (nurse went there to give it). He attempted to take his life via gunshot wound to the head on 3/13/21. Sent to an outside hospital and passed away 3/16/21. He recently was diagnosed with cancer. Had an appointment with oncologist on 3/11/21 and found out cancer was limited to lung only and discussed treatment options. No Mental Health issues in the past. Cancer diagnosis and covid vaccine timing may have contributed.
3/18/2021	1113563	CA	70	M	2/24/2021	2/25/2021	2/25/21 - sore arm, profound fatigue 2/26/21 - chills, fatigue, runny nose (cold-like sx) 2/27/21 - dry throat 3/02/21 - lost voice 3/03/21 - 3/04/21 - chest congestion, difficulty breathing, sounded like water in lungs 3/05/21 - became pale, eyes rolled back, shaking, immobile, caregiver called ambulance, taken to Hospital ER 3/06/21 - death, Hospital dx him with "pneumonia" but I believe that hospital medical staff were unaware of his sx following the COVID vaccine #2 shot.
3/18/2021	1112825	AR		U			Received vaccine on afternoon of 3/15/2021 and began experiencing nausea and vomiting, left arm and shoulder pain, fever, body aches, fatigue, and abdominal pain the morning of 3/16/20. He notified the pharmacy that administered the vaccine to him and they told him that some people have those symptoms with it. On 3/16/21 he went to bed around 11:30 PM feeling terrible and was found dead in his bed the next day (3/17/21) with dried blood coming out of his nose and mouth.

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3/18/2021		1116100		73	M	2/12/2021	3/12/2021	extreme fatigue then patient passed away while asleep Narrative: Unclear if the vaccine is connected to his death. Chart reviewed. He has medical conditions which could have caused his death. Unclear who completed his death certificate. Death was close to a month ago. Whether he had an autopsy or not is unclear. We can report as a suspicious death after vaccination.
3/18/2021		1112545	CA	89	M	3/10/2021	3/10/2021	Information not known to me. Information learned as Dr. provided Complication from COVID Vaccination as Cause of Death on Death Certificate. Decedent died at home and he went to the funeral home. He did not come to Coroner. However, cause of death reported to Coroner and how we learned. I am reporting it but have no particular information specific to vaccination.
3/17/2021		1108470		89	M	3/15/2021	2/12/2021	Pulmonary Embolism Narrative: Patient was hospitalized with acute pulmonary embolis on 2/12/2021. Was started on Eloquis and discharged on 2/15/2021, with primary diagnosis of acute PE and BLE DVT. Secondary diagnosis of acute systolic heart failure with bilateral pleural effusions. On 2/17 we got notification that patient was placed on hospital.
3/17/2021		1107735	OH	90	M	2/19/2021	3/7/2021	Death on March 8 due to a large blood clot at the base of his brain. This was 16 days after inoculation.
3/17/2021		1108262		85	M	1/15/2021	2/6/2021	Patient passed away unrelated to covid vaccine Narrative: The patient had hypertension, diabetes, hyperlipidemia and sleep apnea. Patient received first dose of Moderna vaccine 1/15/2021 and no adverse reaction was recorded. Clinical staff called to review patient's intent for second dose, patient is not interested and has elected to not receive second dose following clinical discussion of the risks and benefits of the COVID-19 vaccination. Patient was called on 2/17/2021 and his son stated patient passed away on 2/6/2021.Cause of death not documented. No indication that death was related to COVID 19 vaccination.

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3/17/2021	1108469		78	F	1/6/2021	1/25/2021	Deceased Narrative: This was a 77 yo F with h/o HFpEF, afib (warfarin), COPD, obesity hypoventilation syndrome, OSA on BiPAP, T2DM, RA, L-sided follicular bronchitis and newly diagnosed probably malignant pulmonary process. Patient was admitted to facility 9/26-10/15 for acute on chronic hypercarbic respiratory failure with persistent O2 requirement despite treatment for CAP, COPD and CHF exacerbation. Patient then underwent high dose steroid taper per Rheum. Patient presented an overall poor state of health and was at high risk of complications with any procedures and was not a candidate for systemic therapy for a malignancy based on functional status. Patient was accepting of terminal diagnosis and transitioned to comfort measures at home.
3/17/2021	1108471		77	M	2/12/2021	2/20/2021	death Narrative: Pt received 1st moderna covid vaccine 2/12/2021 and passed away of unknown causes 2/12/2021 Pt 76 year old with AAA,HTN,CKD,COPD
3/17/2021	1108365	FL	78	F	3/8/2021	3/9/2021	She had breathing problems, bowel movement problems, sharp pain -site unknown No appetite and nausea. Went to the Doctor on wednesday and they gave her a prescription for nausea (promethazine) 12.5mg She Passed away 03/12/2021 at 8:54pm waiting to be picked up by a friend that was going to take her to the emergency room/hospital.
3/17/2021	1108312	NH	68	F	3/7/2021	3/9/2021	Severe exacerbation of idiopathic capillary leak syndrome 48 hours following administration of Janssen vaccine leading to profound vasodilatory shock, renal failure and DIC and death
3/17/2021	1108279		70	M	1/6/2021	2/10/2021	deceased Narrative: Patient was a 68M with advanced ALS, long-term need for mechanical ventilation, total care, TF, who developed worsening respiratory failure increasing difficulty with mech ventilation, unresponsive to COPD exacerbation treatment, in the setting of persistently abnormal CXR findings concerning for malignancy or other processes. After discussion with family, they did not want to patient to suffer any more and asked for mechanical ventilation be stopped after adequate comfort medications were administered. Patient was allowed to pass away naturally from his underlying advanced ALS.

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3/17/2021	1108267		81	M	12/17/2020	12/22/2020	Deceased Narrative: Patient was a 79 yo male with a hx of HTN, ETOH and tobacco use, PVD, HLD with no contact with health care since 2014. Patient presented to facility on 9/30 with worsening bilateral leg pain and SOB. During that hospitalization he dx with severe decompensated HF (EF 20-25%) and cardiomyopathy. Cardiac cath with severe CAD, however unable to perform interventions. Upon goals of care discussion, patient no longer wished to go to facility or aggressive medical management. Patient was transitioned to hospice for comfort care.
3/17/2021	1108261		81	M	3/8/2021	3/9/2021	death Narrative: Patient received 1st dose of Moderna COVID-19 vaccine on 03/08/2021. Patient died 03/09/2021. Medical examiner received report that patient was alert before a fall on the night of 03/08/2021. Death certificate will report death likely due to arrhythmia due to underlying CHF. Contributing factors include diabetes.
3/17/2021	1107923	MN	83	M	1/28/2021	2/6/2021	Patient died 2/6/21

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3/17/2021	1107265	TN	52	M	3/2/2021	3/5/2021	white blood cell count was very high; death; This is a spontaneous report from a contactable consumer (ex-spouse) via medical information team. A 52-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number and expiration date were not reported), via an unspecified route of administration on 02Mar2021 at a single dose (at the age of 52-years-old) for COVID-19 immunisation. Medical history included back pain: At some point before the vaccine was administered, he had a telehealth visit for reported back pain. Concomitant medications were not reported. The patient died on 05Mar2021 at his home. The patient received the first dose of COVID vaccine at a hospital on 02Mar2021. The patient was a fairly healthy active 52-year-old. At some point before the vaccine was administered, he had a telehealth visit for reported back pain. He was instructed to get blood work/labs done. A letter was received the day of his death that states his white blood cell count was very high and with it a recommendation that he seek medical attention. She (ex-spouse) reports the autopsy results won't be complete for a few months. The cause of death is unknown. The outcome of white blood cell count was very high was unknown. Information on the lot/ batch number has been requested.; Reported Cause(s) of Death: Death
3/17/2021	1107885	IA	82	M	2/24/2021	3/2/2021	Patient presented to the ER on 3/2 for urinary frequency and lower abdominal pain. He was hospitalized at Medical Center- on 3/2/2021 for small bowel obstruction and acute kidney injury. Patient passed on 3/2/2021.
3/17/2021	1108472		59	M	3/6/2021	3/13/2021	cardiac arrest Narrative: Per medics, Patient was gardening when he stated he felt dizzy and collapsed. Wife started CPR until medics arrived. Patient arrived at the hospital after 20min of pulseless V tach and 10 min of PEA.
3/17/2021	1107656	MI	69	M	3/3/2021	3/15/2021	Patient was found dead on 3/15/2021
3/17/2021	1107648	IL	89	M	2/1/2021	3/8/2021	Developed leukemia and kidney failure. Died in 6 days.
3/17/2021	1107445	CA	89	M	2/12/2021	2/16/2021	Site: Pain at Injection Site-Mild

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3/17/2021	1108609	NY	66	F	3/13/2021	3/14/2021	Patient was found unresponsive the morning of March 14, 2021. She was pronounced dead at 5:33 AM. The medical examiner quoted natural cause of death.
3/17/2021	1107188	MO		F			death after second dose; A spontaneous report was received from a consumer concerning a female patient of unknown age, who experienced severe symptoms post first dose of Moderna's Covid-19 vaccine (mRNA-1273) and death shortly after her second dose. The patient's medical history was not provided. Concomitant medication was not provided by the reporter. No lab data was not provided. On unspecified date, the patient received her second of two planned doses of mRNA-1273 (Batch number not provided) intramuscularly for prophylaxis of COVID-19 infection. It was reported that shortly after receiving the second dose of mRNA-1273, the patient died. Treatment information was not provided/unknown. Action taken with the drug in response to the events is not applicable. The patient died on an unknown date. Plans for an autopsy were not reported; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: death
3/17/2021	1107898	NY	88	F	2/27/2021	3/4/2021	5 days post-vaccination (1st dose of Moderna), patient started developing lethargy, and difficulty swallowing. 7 days post-vaccination patient looked "ashen". 12 days after vaccination patient was improving, but 14 days after vaccination patient was found to have (on lab work) critical hypernatremia (sodium level of 180 mmol/L), patient was re-referred back to hospice, and 17 days post-vaccination patient died.
3/17/2021	1109578	KY	92	M	1/28/2021	3/17/2021	Patient died at nursing home.

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3/17/2021	1108588	IL	80	F	3/4/2021	3/5/2021	After vaccine (2nd dose) on 3/04, patient resumed normal activities, running errands, etc. In the evening of 3/05, patient complained of extremely sore arms (not alleviated by painkillers) and nausea. Additionally, patient felt extremely cold. She went to bed early, at 7:00 pm, and was found dead the next morning 3/06 at 7:30 am. She had vomited. The coroner (not a medical examiner) declared cause of death as 1) cardiac arrest 2) hypertension and 3)hypercholesterolemia, based solely on medical records. There was no autopsy. Due to or despite medications, patient's blood pressure readings were typically low (last one 118/70), pulse normal (89), BMI 25.29, cholesterol levels normal (166/LDL 82), blood sugar 95.
3/17/2021	1108475		79	M	1/6/2021	1/23/2021	death Narrative: Patient received COVID vaccine # 1 on 1/6/2021, on 1/23/21 his wife reported to the facility that he passed away. Notes in database do not mention cause of death or where death occurred. There are no scanned records in database with any detail either.
3/17/2021	1109696	NY	64	M	12/31/2020	1/4/2021	Pt presented to the ER on 1/4 2021 with worsening SOB, found to have acute ST elevation MI and new rapid atrial fib with RVR. He tested positive for covid 19 requiring new oxygen and received his first pfizer vaccine on 12/31. He was acutely transferred to rochester general hospital. He progressed to multiorgan failure, sepsis, mrsa bacteremia and died on 1/14/2021

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3/17/2021		1109552	OR	82	F	3/6/2021	3/6/2021	Family call Clinical Lead to car for elderly woman in backseat of car who had become unresponsive. Patient lying on side. Wearing portable NC o2. Unresponsive to verbal/sternal rub. No pulse, No resps. Called AMR to car side who called 911. Transferred patient to a gurney and began CPR as we transferred to AMR rig. EKG - showed PEA - CPR continued - patient intubated by AMR - epi is given. Pt transported by AMR/Fire to hospital. Pt was a full code on Hospice - she passed away 3/11/21 with the following cause of death: 1.Acute-on-chronic hypoxemic/hypercarbic respiratory failure, multifactorial in origin. 2. Possible aspiration pneumonia, present on admission. 3. Bronchiectasis, chronic, secondary to asbestosis. 4. Acute combined metabolic and toxic encephalopathy, present on admission. 5. Out of hospital pulseless electrical activity arrest. 6. Hyperkalemia. 7. Cardiogenic shock. 8. Acute kidney injury. 9. Lactic acidosis. 10. Acute diastolic congestive heart failure. 11. Severe protein-calorie malnutrition.
3/17/2021		1109535	TN	78	M	2/26/2021	3/10/2021	My Father had a hemorrhagic stroke. He passed away 13 days after receiving the second Modern?s vaccine.
3/17/2021		1109427	OK	81	M	2/26/2021	2/26/2021	Moderna Covid-19 Vaccine EUA After receiving the first vaccine, started making gasping noises at night, lethargy, fit bit would not register sleep at night, some breathing issues during waking hours. HR observed to decrease to under 40 over the last week of his life. 5 days after 2nd vaccine had extreme fatigue, nightmares, forgot to take regular meds in the morning, 6 days after he woke up very confused and had nightmares and 7 days after vaccination woke up late, exhausted, with shortness of breath all day and refused to go to ER. Went to bed early and died in the night with his CPAP machine on.
3/17/2021		1109418	CA	62	M	3/12/2021	3/14/2021	sudden death, while sleeping 2 days after injection Vaccine 3/12/21 last seen conversant and comfortable at 3a 3/14/21 Found nonresponsive and not breathing at 8:30a 3/14/21
3/17/2021		1109350	MO	67	F	3/11/2021	3/15/2021	unexplained death on 3/15/21

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3/17/2021	1109346	OR	86	F	2/17/2021	2/23/2021	When patient didn't show up for her second COVID-19 vaccine today 3/17/21, we couldn't reach her so we contacted her Dr. office. They informed us that patient visited the emergency department on 2/22/21 and passed away while in the hospital on 2/23/21.
3/17/2021	1108478		84	M	1/28/2021	2/26/2021	Death Narrative: Patient was outpatient. There was no information or document notes about reactions, underlying or active conditions between the time patient came in for the first Pfizer dose and their death.
3/17/2021	1109087	IL	91	M	3/5/2021	3/10/2021	Pt expired in Community Hospital ED on 3-10-21. This was 5 days after receiving his second Moderna covid vaccination. Hospital nurse says ED report says multiple system problems.
3/17/2021	1108959	CA	73	M	2/18/2021	2/21/2021	Stroke resulting in death. Admitted to hospital 2/21/21 as transfer from first Hospital after found collapsed in his hotel room. Left M1 occlusion, thrombectomy performed, then had hemorrhagic transformation. Developed worsening respiratory status after extubation, was reintubated. Given poor neurologic status, was extubated and started on palliative morphine drip. Pt died 0100 3/1/21.
3/17/2021	1108766	IN	78	M	2/17/2021	3/12/2021	Family reported today 3/17/2021 that patient passed away 3/12/2021, they did not indicate that it had anything to do with the vaccination or give medical history.
3/17/2021	1108762	NH	73	M	2/26/2021	3/15/2021	Patient without previous cardiovascular history with complaints of chest tightness and diaphoresis. Contacted the doctor's office and sent advise to go to ER for possible cardiovascular event. Witnessed cardiac arrest at home with unsuccessful resuscitation.
3/17/2021	1108623	LA	72	M	2/24/2021	2/25/2021	Fatigue, Body aches, loss of appetite, 100 degree fever for a short time. indigestion, nausea for about 3 days Fatal Heart attack 2/28/2021
3/17/2021	1108595	IN	87	M	2/10/2021	2/13/2021	senescence, hypotensive reaction to COVID-19 vaccination, COPD

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3/17/2021		1108477		91	F	1/7/2021	1/29/2021	Patient died unrelated to covid vaccine Narrative: The patient had advanced Alzheimer's disease and severe dementia. Patient received the first dose of Moderna vaccine on 1/7/2021 and no adverse reaction was reported. Placed in hospice care and passed away on 1/29/2021. Cause of death not documented. No indication that death was related to COVID 19 vaccination.
3/17/2021		1108476		86	M	2/6/2021	2/10/2021	Narrative: Dose #1 of vaccine was administered 2/6/21, per daughter's report patient became ill 3 days later (cough) and was taken to local hospital and was discharged with diagnosis of CAP, NSTEMI and acute on chronic CHF exacerbation. Discharged home on hospice where he passed away at home on 2/20/21.
3/17/2021		1109309	TX	92	F	1/11/2021	1/16/2021	After vaccine was administered patient was seemingly fine until a loss of consciousness/mini stroke on Jan 16 (5 days after vaccine) causing a fall and massive stroke on Jan 22 (11 days after vaccine) that left patient unresponsive and on life support until family decided to stop services and begin hospice care with no fluids or food until death
3/16/2021		1104364	NY	73	M	3/9/2021	3/10/2021	Death within 24 hours of receiving vaccine
3/16/2021		1104337	AZ	85	F	2/22/2021	2/23/2021	On 3/23 at 0730 resident non responsive with saliva foaming from mouth. BS 500. All vitals initially Ok then sats dropped to 75. (11 was called immediately upon finding resident. Taken to hospital. Completed course there and later on to rehab. She expired 3/11/2021
3/16/2021		1104258		80	M	1/3/2021	3/9/2021	Deceased Narrative: Patient was a 79 yr old male with a PMH of metastatic rectal cancer with colostomy s/p chemo with RT in 2015-16 with recurrence in 2020, was on holiday from palliative chemo since 9/23/20 due to chemo-related toxicity. Patient was admitted back to Facility on 10/08 for RLE pain ins/o increased weakness and functional decline. Patient decided to transition to hospice care and was admitted to Facility 10/13 for end life care, where he continuously showed signs of functional decline.
3/16/2021		1104257		68	M	3/4/2021	3/7/2021	Death Narrative: 1st Dose of COVID Vaccination

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3/16/2021		1104177	WA	76	F	2/3/2021	3/8/2021	first vaccine (Moderna) was injected on 02/03/2021, second vaccine (pfizer) was injected on 03/02/2021, my Mother was dead on 03/08/2021. with no symptoms on 03/07/2021.
3/16/2021		1104430		98	M	3/12/2021	3/13/2021	Death Narrative: Patient has been admitted to a home hospice program since approximately 11/12/20 with an initial terminal diagnosis of dysphagia which was later changed in February 2021 to vascular dementia. Patient with significant past medical history of several CVA's which led to aphasia and vascular dementia.
3/16/2021		1104175	MD	35	F	3/9/2021	3/11/2021	She received the 2nd Dose on 3/9/2021. On 3/10/2021 She complained of a headache. On the morning of 3/11/2021 she complained of abdominal pain and had no appetite. We then found her unresponsive, called 911 and the medics pronounced her at around 1300.
3/16/2021		1104252		84	M	3/10/2021	3/11/2021	Death Narrative: On 2/12/21, patient was hospitalized at Medical Center with "leaking and swollen legs." Patient was transferred to hospital 2/13/21 for a vascular surgeon consult, where patient was diagnosed with lower extremity ischemia and acute diastolic heart failure. A bilateral, common endarterectomy with bovine angioplasty and bilateral iliac stent placement was performed on 2/17/21. Patient was discharged to a skilled nursing facility on 2/26/21. Patient had received first covid vaccination on 1/29/21. He was due to receive his second dose on 2/26/21, however, the appointment was moved to 3/10/21 since patient was hospitalized. Patient received his second dose on 3/10/21. Patient was hospitalized again (reason for hospitalization unknown) where he passed away 3/11/21 at hospital.
3/16/2021		1104384	FL	69	F	2/13/2021	2/16/2021	Being in the Mall, accompanied by her cousin, felt a severe headache and pain in both shoulders followed immediately by fainting, cardio-respiratory arrest that required call 911 for emergency transfer to Hospital. She was intubated in the emergency room treated by the doctors, Cardiologist and Intensive care where she was subjected to hypothermia and other treatments due to the serious neurological damage that she presented. No other organ seemed compromised. Never came out of the coma, passing away on February 26, 2021.

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3/16/2021		1104698		66	F	2/3/2021	3/3/2021	RESPIRATORY DISTRESS Death
3/16/2021		1104429		70	M	3/10/2021	3/13/2021	Death Narrative: Patient with medical history significant for malnutrition and end stage COPD. Patient was on 5 to 6 liters/min of oxygen. On 3/10/21, patient received his first COVID-19 vaccination. On 3/12/21, patient was admitted to Hospice for home hospice care due to worsening of COPD. Per medical examiner, patient passed away on 3/13/21.
3/16/2021		1104666	GA	79	F	1/14/2021	3/5/2021	Patient presented with dyspnea and found to have COVID 19 infection. Treated with steroids and oxygen but clinically deteriorated and died
3/16/2021		1104671	MI	39	M	3/12/2021	3/13/2021	Patient has a long history of seizures. He has seizures on a daily basis. He lives with his family, who are his primary caregivers, they family provides all of his activities of daily living. Patient received vaccine on Friday morning, feeling well throughout the day according to the father. Went to bed, during the night in bed he had seizures which is typical for him, and during the episode the father noticed that he had stopped breathing. called 911 who came to the house and the patient died in the house. I do not believe he went to the hospital.
3/16/2021		1104080		73	F	2/6/2021	3/12/2021	death
3/16/2021		1103821		86	M	1/20/2021	2/18/2021	Weakness Death
3/16/2021		1104428		95	M	1/30/2021	2/22/2021	Deceased Narrative: Patient was outpatient, there is no information about reactions, underlying or active conditions between the time they came in for their first Pfizer dose and their death.
3/16/2021		1103837		73	M	2/19/2021	2/23/2021	shortness of breath, dizziness death
3/16/2021		1108263		78	M	2/9/2021	2/11/2021	Death Narrative: Patient died at home on 2/11/21, two days after receipt of the Pfizer COVID19 vaccine. Reviewed death certificate and cause of death is listed as chronic systolic heart failure and pulmonary hypertension. That is all the information that I have.
3/16/2021		1104699	KS	85	M	2/5/2021	2/6/2021	Patient had been admitted to hospice care on 11/3/20. He reportedly declined in health and died 2/12/21.

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3/16/2021	1103708	AZ	82	M	1/26/2021	1/28/2021	Diarrhea, Stiff Neck, Overall feeling not well, Loss of strength
3/16/2021	1103748	AL	76	F	3/13/2021	3/16/2021	Cardiac Arrest/Death
3/16/2021	1103750	HI	92	F	2/12/2021	2/13/2021	DAY AFTER, PT COMPLAINED OF PAIN IN LEFT COLLAR BONE. PATIENT DECLINED IN FUNCTION OVER NEXT 11 DAYS. HOSPICE WAS CONSULTED AND PT PASSED ON 2/23/21
3/16/2021	1103831		96	F	2/16/2021	3/15/2021	death
3/16/2021	1103826		87	M	1/25/2021	3/6/2021	chest pain, acute heart failue death
3/16/2021	1104031	FL	57	M	3/1/2021	3/11/2021	Patient died of cardiac arrest at hospital 3/12/2021
3/16/2021	1103847		84	M	2/6/2021	2/11/2021	weakness fever death
3/16/2021	1103876		74	M	1/30/2021	2/24/2021	shortness of breath, cough, nausea, diarrhea death
3/16/2021	1103885		85	F	1/27/2021	2/23/2021	death
3/16/2021	1103943	MA	70	F	2/25/2021	3/9/2021	unexplained death
3/16/2021	1103955	IL	64	F	3/3/2021	3/8/2021	No adverse reactions at the time of vaccine. Was admitted to hospital 5 days later with BLL pneumonia and passed away on 03/10/2021
3/16/2021	1103970	WV	66	M	3/11/2021	3/11/2021	Reported by EMS per report from wife that he was "sick after shot" and got worse during the night. Wife found him the following morning cold and pale, pulseless. Dispatch called at 719AM. Pt pronounced on the scene and taken to Funeral Home. Uncertain if Medical Exam is planned

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3/16/2021	1103813	NY	67	F	2/28/2021	3/2/2021	Pt was vaccinated on 2/28 and on 3/2 began to experience worsened SOB from baseline, development of sternal chest pain, abdominal bloating, nausea and fatigue. She presented to the hospital on 3/9 c/o intractable pain and nausea/vomiting that was worsening. Imaging revealed no change in her cancer from same imaging in Jan 2021. PE ruled out. No sepsis. She had acute kidney injury/dehydration. started on ivf. renal imaging normal. echo normal. ekg normal. she rapidly progressed to anuric renal failure and died 3/13/2021. oncology ruled out tumor lysis. she was not felt to be a candidate for dialysis.
3/16/2021	1349979		83	M	1/3/2021	3/4/2021	Deceased Narrative: Patient was a 82 yo male with multiple co-morbidities consisting of AF (on warfarin), prior PE, HFrEF, CAD, HTN, mixed CSA/OSA, hypothyroidism, COPD and GERD. Patient was admitted to facility on 7/12/20 after he was found down in his home for 3 days, dx with right MCA ischemic stroke with hemorrhagic conversion. Etiology of CVA was presumed to be secondary to AF/warfarin failure. No treatment with tPA or thrombectomy was initiated as he was outside the window for intervention. Patient was also found to have bilateral DVTs. Patient was then admitted to facility 08/14/20 for end of life care.
3/16/2021	1104720		65	M	2/20/2021	3/11/2021	death

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3/16/2021		1108474			M			death Narrative: Patient was admitted to the ER on 12/26/20 with worsening shortness of breath and was admitted to acute care services. On 12/29/20, a hospice consult was placed for end stage CHF, EF 20%. On 12/30/20, he transferred to the facility and was a DNR. On 1/7/21, he was noted to have increased secretions in throat and was given atropine gtts sublingual and ondansetron for nausea. He also had issues with insomnia and was given trials of hydroxyzine, trazodone and melatonin. Lorazepam remained on profile as well as part of hospice care. On 1/9/21, he was noted to be more confused, tachypneic and had anasarca (furosemide was ordered). Later on that same day he began to decline rapidly to the point of unresponsiveness other than to verbal stimuli and was determined to be imminent. On 1/10/21, he remained unresponsive and not able to tolerate oral meds. That same day at 1020 when nursing did rounds, he was found to be pulseless and without respirations. An autopsy was declined.
3/16/2021		1108473			U			death Narrative: Patient received 1st dose of Moderna COVID-19 vaccine on 03/08/2021. Patient died 03/09/2021. Medical examiner received report that patient was alert before a fall on the night of 03/08/2021. Death certificate will report death likely due to arrhythmia due to underlying CHF. Contributing factors include diabetes.
3/16/2021		1108265		84	M	2/11/2021	3/14/2021	Death Narrative: 83 y.o. male with pmh of heart failure admitted on 3/9 for shortness of breath and weight gain. Had Vfib arrest on 3/12 and was intubated/xfer to ICU. Continued to require increasing levels of pressors. He suffered VF arrest in the setting of metabolic, septic and cardiogenic shock. He had end stage heart failure and required 4 pressors. Was made CMO and passed away. Noted to have not received 2nd does of Moderna likely due to hospitalization at the time that the second dose would have been due. Patients history of adverse drug reactions included: lisinopril, dabigatran, and penicillin.

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3/16/2021	1108264		85	M	1/7/2021	2/23/2021	DEATH Narrative: No information available in the record other than date of vaccine on 1/7/2021 with no adverse effects or complications noted during observation period. Patient was not known to have had COVID infection prior to death. Had last received medical care at facility in 2012 except received audiology care up to 12/2/2020. No recent hospitalizations known. No death note or autopsy noted. Only indication of death is the updated banner/date of death in demographics. Death most likely due to advanced age (84 y/o) in addition to comorbidities.
3/16/2021	1106834	NE	70	M	3/5/2021	3/9/2021	Patient apparently expired 3/09/2021, no other information known, unknown if linked.
3/16/2021	1106733	HI	94	F	3/8/2021	3/14/2021	First dose of Moderna COVID-19 vaccine given 1/7/21. Second dose of Moderna COVID-19 vaccine given 3/8/21. No adverse effects noted after vaccination. Resident was on hospice care since 2/27/2021 with poor food and fluid intake prior. Admitted to hospice with hypokalemia, failure to thrive.
3/16/2021	1106719	CO	59	F	3/9/2021	3/14/2021	Her daughter informed pharmacy staff that pt passed away on sunday 3/14/21
3/16/2021	1106684	HI	86	M	3/8/2021	3/10/2021	Resident on palliative/comfort care services since readmission to facility on 2/9/2021. Received first dose of Moderna COVID-19 vaccine on 1/7/2021. Received second dose of Moderna COVID-19 vaccine on 3/8/21. G-tube feeding discontinued on 2/14/21. Resident expired 3/10/2021.

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3/16/2021		1106667	CA	67	M	3/12/2021	3/13/2021	Information here obtained from daughter: on Thursday patient had an uneventful fistulagram with angioplasty. Patient got vaccine at end of usual Friday am dialysis treatment. He was observed for about 30" and no untoward event noted, vitals usual. At home on Saturday morning, seemed not quite himself by wife as reported by daughter, from whom i got his information. He gets up late as hemodialysis starts at 515 am. No reported problems on Friday. On Saturday morning, he seemed not himself but sat down and ate breakfast around 9 am. On getting up from table he got suddenly weak, his head rolled back and his eyes rolled up. 911 called and he was given resuscitation efforts of unknown duration which were unsuccessful. He was pronounced dead at 11 am and the mortuary was called. No premortem labs, et al.
3/16/2021		1106603	FL	100	M	2/5/2021	2/22/2021	100 year old patient in reasonable health (reading, socializing, doing Zoom calls, etc.) took second Pfizer vaccine on February 5, 2021. On the morning of February 22, 2021 the patient suffered a major hemorrhagic stroke. He suffered severe paralysis, could not speak, and suffered from severe pain. Within 24 hours he was moved to Hospice Care. A day later on February 24, 2021 he died.
3/16/2021		1106581	MO	56	F	3/10/2021	3/12/2021	Patient was discovered deceased in her apartment at 3pm on March 12, 2021.
3/16/2021		1106554	LA	60	F	12/28/2020	12/28/2020	She received vaccine on 12.28.21. On 12.30.21 she went to the ER and was subsequently sent to Hospital. Not sure what the findings were, but she was discharged after several hours. I spoke with her on the phone on 1.1.21., She wasn't feeling well. I asked her what was going on because she had been doing really well for a few months. She stated "Every since I took the vaccine, I have felt really bad." She died on 1.5.21. Timeline: 12.28.20 Vaccine 12.30.20 ER 1.1.21 Continues to feel bad and reports feeling worse and worse since vaccine. 1.5.21 Died at home.

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3/16/2021	1106349			F			Resulted in the death; This is a spontaneous report from a Pfizer sponsored program: A contactable consumer reporting on behalf of the sister reported that a female patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unknown date, at single dose, for COVID-19 immunisation. Medical history and concomitant medications were not reported. The patient experienced an adverse effect that resulted in death on an unspecified date. Cause of death was unknown. It was unknown if an autopsy was done. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Resulted in the death
3/16/2021	1105146	PR	23	M	1/30/2021	1/30/2021	1/19 began vomiting and was hospitalized. On 1/30 he was discharged and later received the vaccine. It begins with weakness and a lack of appetite. He started coughing up foul-smelling secretions. He makes the arrangements to take him to the emergency room again, he called 911 to be transported, when they are taking the information from the POC, he is under oxygenation to 44. They take him in the ambulance, he receives CPR, they transport him to the facility where he arrives lifeless.
3/16/2021	1106737	WA	82	M	3/11/2021	3/14/2021	weakness/malaise per daughter, death on 3/14 (did have underlying medical conditions)
3/16/2021	1106175	KY		F			a friend died from the vaccine; A spontaneous report was received from a non health care professional, concerning her friend, who was administered Moderna's COVID-19 vaccine (mRNA-1273) and died from the vaccine. The patient's medical history,concomitant history, and lab data was not provided by the reporter. On an unknown date, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. The patient experienced death after receiving the moderna mRNA1273 vaccine. No further details were provided. The action taken with the second dose of mRNA-1273 in response to the event was not applicable. The outcome of the events, died from the vaccine, were considered as fatal.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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3/16/2021	1104845	NC	60	M	3/11/2021	3/11/2021	Deceased received second Moderna dose on 3/11/2021 at unknown location and unknown time. Complained of 'side effects' which are unclear at this time. Had a sudden witnessed cardiac event on 3/14/2021 and was rushed to a local emergency department. Diagnosed with ST elevation MI and could not be fully resuscitated.
3/16/2021	1105115	PR	18	M	2/14/2021	2/18/2021	Resident did not express having any symptoms, the only thing that the POC observed abscesses in the arm, groin, thigh and knees after the first vaccination. After the second dose, he was hypoactive. On 2/27 at about 3:30 am he asked him to turn on his side, between 4 am and 5 am POC went to the room I notice it strange, because his head was wrapped in the sheet. When the POC removed the sheet, she observed that her mouth and nose were full of secretions. So he turned it and he himself did not react. He called the emergency who certifies that he had no vital signs. (emergency arrives within 5:45 am to 6:00 am)
3/16/2021	1105125	MA	79	F	3/8/2021	3/10/2021	Patient had a hemorrhagic stroke
3/16/2021	1104815	TX	73	M	1/15/2021	1/22/2021	Seen in ED for positive COVID symptoms - discharged with instructions. Death 1/26/2021
3/16/2021	1105193	IA	83	M	3/12/2021	3/14/2021	Death due to pulmonary fibrosis
3/16/2021	1105749	CA	74	M	1/29/2021	2/28/2021	Patient died on 2/28/2021

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3/16/2021	1105820	WI	89	F	2/12/2021	2/14/2021	<p>Patient seen and evaluated by PA-C. with myself. We agreed on the clinical findings and implemented our plan together. Please see PA's note for details. All relevant procedures supervised. Patient arrived to the emergency department due to respiratory symptoms, hypoxic, reported that Wednesday he received his 2nd dose of COVID vaccine. His initial workup was concern for NSTEMI with elevated troponin and peaked T-waves, his chest x-ray concerning for COVID/pneumonia. Patient initially tolerated oxygen by nasal cannula and sepsis protocol was started including IV fluid resuscitation that was done cautiously due to the concern of COVID with respiratory failure. The biotics were given. PA-C readdressed code status with patient who confirmed that his DNR DNI, she so contacted his daughter. Patient had multiorgan failure including acute kidney injury, and pneumonia with respiratory failure +/- respiratory failure. Due to the concern of NSTEMI patient was initially going to be transfer to was hospital and transfer was started. Patient respiratory status started deteriorating and his blood pressure dropped slightly but improved after 500 cubic centimeters of IV fluid and he was also placed on a NIPPV. Around 6:00 p.m. patient has significantly desaturation and he discontinued himself NIPPV. Due to inability to intubate patient, he was ventilated with BVM, patient is slowly improved saturation levels and was opening his eyes, he was placed on a non-rebreather. At this point there is high concern of ARDS and due to inability to intubate or give for the respiratory support His daughter was at bedside and updated of current medical status and poor prognosis. Patient continued deteriorating and at this point he had agonal breathing. His daughter was at bedside and she was made aware of the futile prognosis of patient due to his respiratory failure. Patient rapidly became bradycardic and went into cardiac arrest. No CPR was done due to the DNI DNR status of the patient. Critical Care Procedure Note Authorized and Performed by: MD Total critical care time: Approximately 30 minutes Due to a high probability of clinically significant, life threatening deterioration, the patient required my highest level of preparedness to intervene emergently and I personally spent this critical care time directly and personally managing the patient. This critical care time included obtaining a history; examining the patient; pulse oximetry;</p>

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ordering and review of studies; arranging urgent treatment with development of a management plan; evaluation of patient's response to treatment; frequent reassessment; and, discussions with other providers. This critical care time was performed to assess and manage the high probability of imminent, life-threatening deterioration that could result in multi-organ failure. It was exclusive of separately billable procedures and treating other patients and teaching time. Please see MDM section and the rest of the note for further information on patient assessment and treatment. PE: VITAL SIGNS: BP: 126/75 Pulse: (!) 122 Resp: (!) 40 SpO2: (!) 82 % Temp: 98.1 °F (36.7 °C) Height: 5' 8" (172.7 cm) Weight: 152 lb (68.9 kg) General: Alert, nontoxic, in no acute distress. Lungs: Clear to auscultation bilaterally. CLINICAL IMPRESSION: 1. Sepsis with acute hypoxic respiratory failure and septic shock, due to unspecified organism (HCC) 2. Suspected COVID-19 virus infection 3. NSTEMI (non-ST elevated myocardial infarction) (HCC) 4. Multifocal pneumonia 5. ARDS (adult respiratory distress syndrome) (HCC) 6. Acute kidney injury (HCC) Further care and disposition otherwise as outlined by PA. ED on 2/14/2021 Revision & Routing History Detailed Report Note filed date Mon Feb 15, 2021 8:46 AM

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3/16/2021		1105772	MA	93	F	2/11/2021	2/12/2021	My mother died on February 19, 2021. She had her 2nd dose vaccine on 2/11, on 2/12 it was noted that she was not able to walk, on 2/13 she was walking at 30%, on 2/14 she was walking with difficulty, on Monday 2/15 she was throwing up violently and her blood pressure dropped, so she was sent to Clinic. My sister was told she was just constipated and she had A Fib (never reported before to us). My sister was then told on 2/16 early a.m. that she had a blood clot that destroyed her colon. Due to age surgery would likely not be successful. She then died on the Friday. We are reporting in the event that the Pfizer vaccine was somehow a contributing factor to the A fib or to the Clot. She has no history of A fib or clotting prior to this incident. She was 93, and did have dementia, but was able to eat normal foods prior to this. What was unusual was the challenge in walking the day after the shot. Other than that no difference was observed until the day she was admitted to the hospital emergency room. She was a resident at Assisted Living, Memory Care, and that is where she received the vaccine. The mailing address I provided is her mailing address prior to death.
3/16/2021		1105261	PR	85	F	1/30/2021	2/22/2021	The patient was admitted to hospice because she stopped eating and deteriorated. He was being given food through the tube and then he has no vital signs.
3/16/2021		1105679	CA	74	M	2/9/2021	2/9/2021	My father complained of heartburn the evening he received his vaccine. He told my mother he need to sit down and relax. My mother walked into the other room to watch some TV while she allowed my dad to relax. During that time, my mother fell asleep. She woke up after an hour when she realized my dad was not sitting next to her. She went to the living room where he was sitting and discovered he was not breathing and passed away. EMT was called and they said they could not do anything for my dad since he was already gone.
3/16/2021		1105600	TX	99	M	1/11/2021	2/14/2021	Death on Feb 14, 2021
3/16/2021		1105408	CT	93	M	2/1/2021	3/9/2021	Death

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3/16/2021		1105300	PR	88	F	2/18/2021	2/27/2021	He went to the hospital for cardiovascular problems and cholecystitis and was under treatment after the first dose. 2/26/2021 at around 11:00 pm she was complaining of high blood pressure, uncontrolled vital signs, uncontrolled sugar, at 6:00 am she has passed away. They certify respiratory failure.
3/16/2021		1104806	WI	80	M	3/8/2021	3/9/2021	Patient received the COVID-19 vaccine and expired the next day.
3/15/2021		1101322	OH	66	M	2/22/2021	3/3/2021	Client found dead by a family member.
3/15/2021		1101837	TX	67	M	2/10/2021	2/12/2021	The patient became ill two days after the vaccination, and was hospitalized. He was diagnosed with COVID pneumonia on the 15th, and subsequently died.
3/15/2021		1101884	NM	30	F	2/17/2021	2/17/2021	History, patient received 1st COVID-19 Pfizer vaccine on 1/28/21 and 2nd Pfizer COVID-19 vaccine on 2/17/21. Unsure if any relation but patient was treated in our urgent care on 3/8/2021 18 day post receipt of 2nd COVID-19 vaccine unresponsive. Patient received ACLS support for unknown cause with suspected neurological/respiratory/cardiac complications. Patient was transferred to higher level of care.
3/15/2021		1101761	FL	81	F	1/12/2021	1/15/2021	Trouble breathing. Taken to ER. Diagnosis Congestive Heart Failure. No Previous such diagnosis. Admitted for 6 days with Metropolo benign only new prescription. After 2nd shot on February 2 had follow up visits but started experiencing light headless. On February suddenly went limp with loss of pulse and breathing. Taken to Hospital ER, admitted without neurological responses. Died on February 22.
3/15/2021		1101718	FL	92	F	2/4/2021	2/7/2021	Patient was taken by ambulance to E.R. 3 days after injection with bleeding from the nose and blood in stool. Spent 10 days in hospital. Returned to ER a few days later with fluid leaking from arms and legs. Diagnosed with congestive heart failure. Sent home under Hospice. Returned to ER, by ambulance, 36 hrs. later. Still weeping from skin and placed in ICU. on Bipap machine. Transferred that evening to medical Care Center where she passed away on March 3, 2021.

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3/15/2021		1101690	MI	76	M	1/21/2021	1/1/2021	THE PATIENT HAD PASSED AWAY AND WAS UNABLE TO GET HIS SECOND SHOT TO COMPLETE THE SERIES. WE ARE UNSURE IF THE VACCINE WAS RELATED TO HIM PASSING.
3/15/2021		1101662	MI	68	M	1/21/2021	1/1/2021	PATIENT PASSED AWAY BEFORE THEY COULD RECEIVE THE SECOND DOSE OF THE SHOT. WE ARE NOT SURE IF IT WAS VACCINE RELATED OR NOT.
3/15/2021		1101602	FL	74	M	2/27/2021	2/27/2021	Later that day after receiving the shot, patient reportedly became very ill with fever, vomiting, and diarrhea. He was found deceased the next day when friends went to check on him.
3/15/2021		1101780	VA	89	M	3/11/2021	3/12/2021	Resident expired the next day
3/15/2021		1101286	CA	80	F	3/3/2021	3/10/2021	Large Stroke
3/15/2021		1101239	TN	87	F	2/17/2021	2/19/2021	Patient had been slowly declining over the past year due to dementia and age. On the date of her second vaccination, Feb. 17, she was getting around with her walker. On Friday, Feb. 19, she was so weak she was no longer able to walk with her walker, and she declined every day thereafter. On Monday, Feb. 22 she began crying and saying "help me". That lasted approximately a week. her health declined every day until Saturday, March 6, when she passed away at 6:15a.
3/15/2021		1100963	UT	64	F	2/26/2021	2/27/2021	High temperature second day after vaccination. Tylenol treatment to drop the high temperature. Passed away by pulmonary embolism suddenly.
3/15/2021		1100951	KY	82	M	2/3/2021	2/23/2021	Patient was found unresponsive by family members in the early morning on 2/23/2021. Patient passed away.
3/15/2021		1100865	MI	77	M	3/13/2021	3/14/2021	Patient died within 24 hours of vaccine. Unknown at this time if related.
3/15/2021		1100685		72	M	3/5/2021	3/12/2021	Death 1 week later. No other information available.

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3/15/2021	1100247	CA	78	F			Unconsciousness; Feeling discomfort within a few minutes after the vaccination; A spontaneous report was received from a healthcare professional concerning a 78-year-old, female patient, who received Moderna's COVID-19 Vaccine (mRNA-1273) and experienced of feeling discomfort within a few minutes after the vaccination, followed by unconsciousness and death. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unspecified date, prior to the onset of the event, patient received their dose of mRNA-1273 (Batch Number: Unknown) for prophylaxis of COVID-19 infection. On an unspecified date, the patient experienced feeling discomfort within a few minutes after the vaccination, followed by unconsciousness and death. Treatment information for event unconsciousness included resuscitate via cardiopulmonary resuscitation with no success. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event unconsciousness was fatal and patient died.; Reporter's Comments: This is a case of death of a 78-year-old, female patient who experienced within a few minutes of product use who experienced feeling of discomfort and became unconscious and subsequently expired. Based on the current available information, a strong temporal association between the product use and onset of the events, a causal relationship with the events cannot be excluded. However, critical details such as the patient's medical history and actual cause of death is lacking.; Reported Cause(s) of Death: Unknown cause of death
3/15/2021	1101959	MI	65	M	2/3/2021	2/6/2021	He passed on 02/06/2021

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3/15/2021		1100562	NM	83	F	2/12/2021	2/16/2021	She died 5 days after her second vaccine; This is a spontaneous report from a contactable consumer. An 83-year-old female patient (Not pregnant) received the second dose of BNT162b2 (PFIZER-BIONTECH COVID-19 VACCINE; Lot number not provided), via an unspecified route of administration in the left arm on 12FEB2021 at 03:00 PM (at the age of 83-years-old) at single dose for covid-19 immunisation. The subject had a history of Heart condition and thyroid. Relevant concomitant medications included calcium, fish oil, multivitamin and potassium. The patient died on 16Feb2021 (12:00 PM), 5 days after her second dose of vaccine (as reported). The cause of patient's death was unknown. She had no adverse effects until her death. It was unknown if autopsy was performed. Information on batch/lot number was requested.; Reported Cause(s) of Death: She died 5 days after her second vaccine
3/15/2021		1100650	CA	65	F	2/10/2021	2/12/2021	Patient died two days after receiving vaccine. Death certificate said respiratory failure.
3/15/2021		1103347	TX	85	F	3/11/2021	3/12/2021	At 2 PM Friday, March 12, patient was cleaning house and began speaking incoherently. Due to the aphasia, her daughter called 911. The ambulance delivered her to Hospital by 2:20. She presented with a brain hemorrhage. Hospital called for medivac which took her to another Hospital. The bleeding continued and the docs ruled out surgery. They were unable to slow the bleed. Patient was put on a ventilator shortly after arriving at hospital. Patient passed at 6:55 PM March 13.

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3/15/2021	1101991	NY	97	F	2/24/2021	2/25/2021	In ED on 2/25/21 Chief complaint: Patient's daughter present at bedside stating patient was not vocalizing this morning when she woke up. Patient's daughter was talking to her and she would orient to her but not answer any of her questions. EMS called and by the time they arrived patient was acting her normal self. Daughter states she has had a very difficult time managing patient's behaviors over the last several weeks and it has been getting more difficult. Daughter states that over the last several weeks her behaviors have been worsening and been more difficult to deal with. These include her getting up at night and sundowning as well as yelling and screaming during the day. Daughter states that she gets in the shouting matches with the patient during the day. Daughter breaks down and starts to cry when discussing that she thinks her mother will need long-term placement as she is having a difficult time dealing with her behaviors. Of note patient did receive second dose of Covid vaccine yesterday. -Patient has not been complaining of any symptoms over the last several days and daughter has not noticed cough or congestion or other signs of URI/illness -No focal neurologic deficits on exam -Received 1L IV NS in ED 2/26/21 Covid positive, incidental finding ? tested so she could go to nursing facility -Patient asymptomatic -Vital signs stable, afebrile -She does not need treatment at this time -She will need a repeat Covid test 14 days after the original Covid test prior to going to SNF -Plan- discharge to skilled nursing facility Discharge summary Principal Problem: Comfort measures only status Active Problems: Chronic atrial fibrillation Essential hypertension Dementia with behavioral disturbance Recurrent falls Dysphagia COVID-19 Resolved Problems: Cough with hemoptysis Leukocytosis Dehydration Inadequate oral intake Patient is a 97-year-old female with a past medical history of dementia, likely combined vascular/Alzheimer's, hypertension, chronic A. Fib, who presented to the ED on 2/25/2021 due to behavioral disturbance as well as need for long-term care placement due to progressive dementia. She did have an incidental positive Covid test on 2/26/2021 and was planned for discharge to COVID recovery ward of SNF. She did not require medication or oxygen treatment for COVID-19. She developed tachycardia/tachypnea and cough later productive for blood after suctioning attempts

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overnight on 2/28-3/1, which did not recur. Unfortunately, patient's overall function declined after, and she was refusing/unable to eat or drink. She was transitioned to comfort care status on 03/03/2021. She eventually slipped into persistent sleep with lack of responsiveness on 3/4/2021. Comfort care was provided. She had decreased urinary output and respiratory function indicating expected progression. She was noted to not have a heart rate on 03/08/2021. Auscultation did not reveal any breath sounds or heart sounds; unable to palpate pulse; no pupillary response to light was seen; and patient did not respond to painful stimuli. Death was pronounced on 03/08/2021, 02:58am. Deceased 3/8/21

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3/15/2021	1104431		83	M	1/19/2021	1/20/2021	Cardiac arrest Narrative: An 82 year old, male, resident of a facility, received his first dose of the Pfizer COVID vaccine on 12/30/20 (time of dose not known). On 12/31/20, patient was reported to be febrile with increased lethargy and UTI was suspected so patient received a dose of ceftriaxone and levofloxacin. Within 30 minutes he became wheezy and short of breath, developed hives and tongue swelling. He required intubation and admission for treatment of acute respiratory failure, acute kidney injury and significant lactic acidosis. Treatment included epinephrine, H1 and H2 blockers, and steroids. He recovered and was extubated on 1/3/21 and discharged back to the facility on 1/6/21. Attending physician noted that antibiotics were most likely contributor to event, but recommended that patient not receive the 2nd COVID vaccine dose. Patient was referred to an allergist to assess this event, with an outpatient visit on 1/14/21. Patient expressed interest in receiving the 2nd dose. Allergist determined that the antibiotics were the cause of anaphylaxis, and recommended skin testing to take place 6 weeks after his reaction. Allergist determined the reaction was not due to the COVID vaccine and advised patient that he could receive the 2nd dose. Patient received the 2nd dose of the Pfizer COVID vaccine on 1/9/21 (time not known). Notes from the facility indicate patient was lethargic and running a fever the morning of 1/20/21. At 1500 on 1/20/21 patient was noted to be lying supine in bed, visiting with aides. At 1508 nurse entered room and noted patient to be lying on floor supine and nurse was unable to get patient to respond to shaking or calling his name. Breathing was noted to be labored, and nurse was unable to detect a pulse. At 1509, 911 was called and CPR initiated. Spontaneous pulse and breathes resumed just before ambulance arrived at 1522. On arrival at the ED patient was responsive and breathing spontaneously, however, hemodynamically unstable. Patient went into cardiac arrest and code blue called at 1535. Received treatment with epinephrine, methylprednisolone, diphenhydramine, amiodarone, atropine. Patient was intubated. EKG obtained and showed acute MI. At 1622 he again went into cardiac arrest and time of death was called.

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3/15/2021	1103241	NC	97	M	2/1/2021	2/9/2021	On 01 February 2021 a 97 year old male was administered the Pfizer COVID vaccine. Side effects began as fatigue and difficulty communicating. On 08 February 2021 the male became bedridden and developed a fever with chills. Over the next few days he struggled to eat, drink, and eventually to breath. The 97 year old died 25 February 2021.
3/15/2021	1103192	CA	78	M	3/9/2021	3/14/2021	Patient passed in his sleep 5 days after receiving first dose of Moderna
3/15/2021	1103186	MI	70	F	2/1/2021	2/19/2021	Patient was vaccinated with the Pfizer vaccine in early February. On February 19th, she was diagnosed with Acute Myeloid Leukemia
3/15/2021	1103106	MS	80	M	1/15/2021	1/16/2021	Patient died on 01/24/2021. Began exhibiting symptoms similar to Covid 1 day after vaccination.
3/15/2021	1103055	IN	66	M	2/23/2021	2/24/2021	Patient wife called on 3/11/21 to state that she would like us to cancel her husband second dose appointment for his COVID-19 Moderna vaccine. Wife stated that 24 hours after receiving vaccine patient died. Hospital told patient wife that it could be due to receiving COVID-19 vaccine. Unable to get anymore pertinent information from patient representative.
3/15/2021	1102815	MO	87	F	3/5/2021	3/9/2021	Patient presented to hospital on 3/11 with shortness of breath. History of chronic oxygen dependency at night. Became more SOB over last several days and was not able to make it to md appointment. Had a recent abnormal stress test. Family states she was febrile at home. Was low on oxygen level on 2LNC, placed on non-rebreather and then BIPAP. Positive for Rhinovirus. Chest xray showed bilateral lower infiltrates. Patient deteriorated through the night and was intubated and placed on vasopressors for septic shock. Patient was made DNR and family refused hemodialysis. Family then made decision to withdraw care.

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3/15/2021	1102800	TN	83	M	3/5/2021	3/13/2021	Patient received a covid vaccine on 03/05/2021. Daughter reports there were no side effects that night or the following days. The next Saturday, March 13, 2021, the daughter was at her parents house checking up on them. Her father was in the bathroom as she passed in the hall. He came out of the bathroom and proceeded to the living room, she stated dad are you ok? He said he couldn't breath. Giving his history of COPD and being short of breath sometimes, she didn't think anything of it. She proceeded to follow him to his chair and was checking his oxygen tank that he had been using with ambulation. It still had some in the tank. She raised her head to tell him he still had some in the tank and saw that he had started "agonal breathing". Daughter is a nurse and knew he needed help. She phone for an ambulance and with the help of her mother got patient to the floor and started CPR. Paramedics arrived on scene, continued CPR and administered meds and also intubated, but were unsuccessful in their efforts.
3/15/2021	1102082	OH	77	F	2/26/2021	3/2/2021	Acute Myocardial Infarction due to severe dysphagia, odynophagia, cachexia, fluid and electrolyte abnormalities, due to advanced dementia
3/15/2021	1103656	TX	66	M	2/10/2021	2/16/2021	Patient was found deceased in garage. Neighbor who is a nurse did CPR until ambulance got there and took over, started IVs and pushed medicine and did CPR as well. Patient was pronounced deceased over the phone with the JP and Police due to the icy weather conditions on Feb 16th 2021
3/15/2021	1102754	VA	57	F	3/2/2021	3/4/2021	Patient contacted her employer 2 days after vaccination with complaint of new onset rash. Was seen by her PCP and was reportedly being treated for Shingles. Missed work week of 8-12 March for same. When didn't report to work today (3/15/21), supervisor went to home to conduct a safety check and found the patient dead in her home.
3/15/2021	1102244	LA	72	F	2/25/2021	2/26/2021	Patient expired on 02/26/2021 from a Myocardial Infarction

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3/15/2021		1102308	DE	67	M	3/9/2021	3/11/2021	Pt received Pfizer COVID Vaccine 3/9/21 at 13:25 At Clinic. Lot #EN6205 Exp 6/21 to right deltoid. No issues noted while patient dialyzing. Pt came off treatment 16mns early due to concerns of transportation. Pt a/o, VSS, pt in W/c no issues noted at discharge. Pt's comorbid conditions per hospital discharge records: <20% EF, deteriorating health status, physician recommended hospice care but pt refused. On March 11th, significant other notified facility that patient had passed away in his sleep and was found by workers at the rehab facility he was in.
3/15/2021		1102443	CO	90	M	1/27/2021	2/18/2021	On 2/18/2021 the resident spiked a fever of 101.7 and had decrease oxygen saturation down to 86% with a cough. The resident was transferred to the ER for evaluation. Per Advanced Directives resident was not treated with antibiotics and returned to the Nursing Home on 2/19/2021. The resident had several episodes of emesis and was placed on comfort measures. He died on 2/25/2021.
3/15/2021		1102572	TX	87	M	3/12/2021	3/15/2021	Was notified by a third party that patient died on morning of 3/15/2021. No other information available.
3/15/2021		1102698	NM	83	F	2/10/2021	2/15/2021	Death 5 days after 2nd Pfizer vaccine
3/15/2021		1102722	FL	81	F	3/3/2021	3/14/2021	Patient presented to Hospital ED on 3/14/21 with respiratory distress. Patient was tested for COVID-19 and found to be positive on 3/14/21 in the hospital ED. Patient was a DNR. Hospice was consulted (this writer is employed by Hospice). The patient passed away on 3/15/2021. Per family patient had recently received COVID-19 vaccine. Vaccine information verified in portal.

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3/15/2021	1102736	WA	77	M	3/7/2021	3/14/2021	Spouse of an existing client signed up for a COVID-19 vaccination and received his first injection of Moderna on 03/07/21 by ARNP. He denied any symptoms of illness, including COVID-19, on the vaccination date. He was educated re: possible side effects and adverse effects and was asked to report any such effects; no interim contact received. This provider's office called the existing client on 03/15/21 with a routine matter and was advised that this individual had passed away the preceding day. This provider spoke to the existing client, who reported that the cause of death is unknown. The existing client did not believe that her spouse's death and the vaccination were related. She was asked to notify this provider if any further information is discovered and agreed to do so.
3/14/2021	1099173	FL	98	F	1/21/2021	1/24/2021	1/24/20211 unresponsive, sent to Hospital. Admitted with diagnosis: Acute Ischemic left MCA stroke. 1/26/2021 Transferred to Hospice care. 01/30/2021 died. I don't believe the hospital was aware of her vaccination date as it is not recorded in her records, therefore I assume that a previous VAERS report has not been submitted. My relationship to the patient is that I am her daughter.
3/14/2021	1098473	MI	83	F	1/25/2021	1/30/2021	My mother had the shot on January 25. On the 30th, she became confused and was having trouble swallowing. I took her to the hospital on the 31st (Sunday). She was admitted with pancreatitis and was unable to drink water. She was then admitted to the ICU. She became septic and her mental status declined. By Tuesday, she was placed on a ventilator. She then had renal failure and died on February 18th.
3/14/2021	1098119	NE	50	F	1/22/2021	2/1/2021	in the early am she had bad diarrhea , she went to work and then started having really bad stomach pains and before noon she had to go home because she started puking. She laid down to take a nap around 3:30pm and never woke up.

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3/14/2021	1098178	DC	76	F	1/25/2021	1/25/2021	2nd dose of covid19 vaccine administered on 1/25/21 AM. First dose was about 12/28/2021. Patient had a change in condition noted same day PM, which included worsening mental status with increased confusion such as disorientation and decreased functional status, as well as opening of pressure ulcer on coccyx. Patient became lethargic. Patient condition worsened over the next few days. Patient decreased oral intakes, including medications. Care and comfort measures were in place. Patient expired on 2/4/2021.
3/14/2021	1098299	IL	79	F	2/12/2021	2/13/2021	Husband returned for second dose of COVID-19 vaccine and reported that wife, expired the day after her first dose of the COVID vaccine. Medical team did not feel that there was a correlation so we were not notified prior to that date
3/14/2021	1098041	FL	86	F	3/8/2021	3/12/2021	Death, reported to pharmacy via Coroner's office
3/14/2021	1098680	CA	79	F	2/18/2021	3/6/2021	Pt completed 2 covid vaccine morderna doses Feb 18, 2021. Pt with increasing weakness and short of breath for 3 days PTA on 3/6/2021.
3/14/2021	1098902	FL	59	M	2/2/2021	2/21/2021	Death
3/14/2021	1099216	FL	84	F	2/15/2021	3/7/2021	PATIENT'S SISTER REPORTED PATIENT PASSED AWAY 03/07/2021
3/14/2021	1099326	NJ	80	M	3/18/2020	2/23/2021	A few days after vaccination patient had an unusual dry cough/ and then a pain in his chest, He called our Doctor she said call your cardiologist now, patient called Dr and told him he wanted to go to his office, explained the pain he was experiencing - the doctor told him said he couldn't see him wanted to do a telemed exam. and proceeded to tell patient to see an gastro entomologist, take Tums, no tomatoes, no coffee and a few other foods and that patient was suffering from Acid Reflux and to call him back net week.
3/14/2021	1098028	NY	32	M	3/13/2021	3/14/2021	Cardiac arrest, death approx 12 hours later
3/14/2021	1098856	NY	77	F	3/2/2021	3/2/2021	Four hours after vaccine shot, she began with a headache then severe vomiting. She became in coherent and when brought to the hospital she had a brain hemorrhage. She passed away on 3/3/2021 at 3:05pm.

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3/13/2021		1096602	ME	78	F	2/25/2021	2/25/2021	Hospice nurse reported patient started experiencing fatigue, nausea, dizziness, decreased appetite and shortness of breath immediately following vaccination. Hospice medications were ordered and patient began receiving morphine and nebulizer treatments. She then started having dysphasia. She then died on 3/5/21 from presumed respiratory failure.
3/13/2021		1096197	TX	95	M	1/16/2021	1/21/2021	Low pulse, lethargy, labored breathing. Oxygen was administered.
3/13/2021		1096461	PA	86	F	3/12/2021	3/12/2021	Patient received vaccine at 10:35am, was observed for 15 minutes then returned home with family. Patient began to not feel well, experienced cardiac arrest as witnessed by son, was taken to hospital Emergency Department where she expired at 12:50pm.
3/13/2021		1096497	FL	48	M	3/11/2021	3/12/2021	Notified by police department that patient was found dead at his home on 3/12/21. Per the officer, the family reports patient reported diarrhea on 3/11/21 and fatigue on 3/12/21. The family found him in his home deceased later in the day on 3/12/21
3/13/2021		1096600	MO	59	M	2/23/2021	2/24/2021	Per the patient's spouse and Hospital: The patient received a rapid COVID test at clinic prior to vaccination, which read negative. The patient received vaccination on 2/23/21 and the following day (2/24/21) began to experience breathing difficulties. The patient was admitted to the emergency room at Hospital on 2/26/21 and diagnosed with hypoxic respiratory failure d/t COVID-19 (oxygen saturation < 50%). Patient was intubated on 3/2/21. Per Hospital pharmacist, patient expired on 3/12/21 at 6:40pm.
3/13/2021		1096952	MI	73	M	2/12/2021	3/2/2021	Patients cancer progressed quicker than expected. Resulting in his passing
3/13/2021		1097000	PA	69	M	2/19/2021	2/26/2021	No adverse events were immediately reported, but patient died on 7th day following vaccine
3/13/2021		1097244	CA	90	M	2/8/2021	2/10/2021	Death within 7 days of vaccine. COD Cardiac Arrest
3/13/2021		1097283	CA	85	F	2/3/2021	2/11/2021	Death within 7 days of vaccine

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3/13/2021		1096913	CA	85	M	1/13/2021	1/24/2021	My father passed away on February 10th, 2021. On Monday, January 25th 2021, he said he is feeling very uncomfortable in his chest area. He thought it was severe acid reflux. He took Gas X for Acid Reflux and told us that he does not want to go to the hospital. On Tuesday, January 26th, he felt that his Acid Reflux symptoms got worse, he still did not want to go to the hospital. He took Tums. On that evening, he started having shortness of breath. We took his BP at home and it was very low. We begged him to go to the hospital, he still did not want to go. On Wednesday, January 27th, his shortness of breath got worse and we convinced him that he has to go to the hospital. We took him to ER. Doctor said that he had a heart attack on Monday morning and that is why he was not feeling well since Monday morning. While at the hospital, while the cardiologists were monitoring him, his heart condition got worse. By Friday, February 5th, cardiologists said that he is very fragile, his heart condition is very fragile and he won't survive any procedure. They said that something triggered the heart attack. We told them about the vaccination on 1/13/2021. They sent him home on hospice on Friday, February 5th, 2021. He was on supplemental oxygen when he came home. He passed away due to a heart attack on February 10th, 2021 around 9pm.
3/13/2021		1096659	NC	62	M	3/11/2021	3/11/2021	Patient died about 12 hours after receiving first dose Covid vaccine
3/12/2021		1094490	OK	66	F	2/24/2021	3/10/2021	Patient was vaccinated with her second dose on Wednesday, February 24th. A family member contacted us to let us know she was sitting in a casino exactly one week later and passed out, going into cardiac arrest. The patient did pass away.

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3/12/2021		1094638	PA	74	M	2/13/2021	2/15/2021	Exposure to Covid 19 either on the date of vaccine (2/13/21) or shortly thereafter. Symptoms of Covid started on Monday (2/15) early morning following shot. Dr. ordered Covid test on Weds. (2/17). Taken by ambulance to Hospital, approx. 7 pm on Saturday (2/20) with dehydration, low oxygen levels, confusion, shaking and cough. Admitted to hospital with threats of ventilator up until Weds (2/24) when he was intubated, prone and FINALLY given hydration via IV fluids. He went into kidney failure on Thursday (2/25) and put on dialysis. Other organs began shutting down and was taken off the ventilator on Friday (2/26) and did not recover. He passed away just before 4:00 p.m. on 2/26/21.
3/12/2021		1094600	TX	72	M	2/6/2021	2/6/2021	It is unknown if the decedent had any side effects. Patient died on 3/11/2021.
3/12/2021		1093418	MN	94	M	1/27/2021	2/24/2021	After pt received first dose of Moderna on January 27, 2021, he experienced continuous increased decline in his health, with symptoms of increased difficulty swallowing, increased coughing, at least one episode of choking with expulsion of food; increased difficulty walking with walker, increased shortness of breath. On Wednesday, Feb. 24, at 7:50 a.m., Pt was in wheelchair exiting home, on way to detached garage, being pushed by his daughter, when he slumped over, stated that he couldn't breathe, and went unconscious. Pt. did not have a detectable pulse. EMT was called and upon arrival performed CPR and obtained a pulse. Pt was transported to local hospital, where, again he lost pulse and was resuscitated again with mechanical CPR. Pt was supported with blood pressure medicine and ventilator until 7:53 p.m. when his heart stopped again. Pt. passed at that time.
3/12/2021		1094719	MI	71	F	2/19/2021	2/22/2021	Patient reported as deceased 3 days after vaccination by son.
3/12/2021		1095081		90	F	1/28/2021	2/21/2021	Death
3/12/2021		1094993		75	M	1/26/2021	3/3/2021	2nd vaccine dose given on 02/16/2021, admitted to hospital on 02/24/2021. CARDIAC ARREST RECTAL BLEEDING died on 03/03/2021
3/12/2021		1094468	ME	84	M	2/11/2021	3/4/2021	Hospitalization after a fall resulting in femoral neck fracture. Patient deceased 3/4/21.

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3/12/2021	1094441		87	M	1/7/2021	2/10/2021	death
3/12/2021	1094421		86	F	1/28/2021	2/9/2021	cardiac arrest death
3/12/2021	1094512	IL	96	F	2/25/2021	3/4/2021	Emesis 3/4/2021 03/05/2021 Pneumonia
3/12/2021	1094868		89	M	2/1/2021	3/7/2021	Started having confusion at 3#0 a.m. Sunday morning. Unstable gait and hypoxia at home. More congested than usual. Had 2nd COVID vaccine 4 weeks ago. Had visual hallucinations with seeing "bugs" Admitted with positive COVID and Influenza B diagnosis.
3/12/2021	1094990	ND	90	M	1/26/2021	2/24/2021	Death within 60 days of COVID vaccine administration
3/12/2021	1095001		96	F	1/26/2021	2/5/2021	Death within 60 days of receiving COVID vaccine
3/12/2021	1095020	AL	66	M	3/1/2021	3/5/2021	Passed out then was brain dead . Death
3/12/2021	1095025		65	U	1/26/2021	2/19/2021	shortness of breath 3 days after 2nd dose injected. admitted on 2/19 shortness of breath admitted on 2/26 shortness of breath admitted on 3/2 cardiac arrest, neck mass, seizure like activity, acute respiratory failure died on 3/06/2021
3/12/2021	1095070		71	F	2/9/2021	2/25/2021	SHORTNESS OF BREATH Respiratory distress Hypoxia Pneumonia due to COVID-19 virus Death
3/12/2021	1095038		82	F	1/23/2021	2/2/2021	death
3/12/2021	1093762	NH	101	F	2/18/2021	3/12/2021	3/12/2021-EXPIRED AT FACILITY ON HOSPICE SERVICES
3/12/2021	1095053		76	F	1/7/2021	2/13/2021	death
3/12/2021	1094402		81	M	2/2/2021	3/1/2021	death
3/12/2021	1094979	ND	90	F	1/13/2021	2/24/2021	Death within 60 days of COVID vaccine administration. Dose 1 on 12/23/2020 Dose 2 on 01/13/2021
3/12/2021	1094146		66	M	1/30/2021	2/23/2021	2nd dose administered on 2/20/21, on 2/23/21 the patient fell and sustained a facial injury
3/12/2021	1095424		92	F	1/9/2021	2/21/2021	death

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3/12/2021	1095111		73	F	1/30/2021	2/17/2021	Admitted on 2/17/2021 2nd dose injected on 2/20/2021 Shortness of breath died on 03/04/2021
3/12/2021	1093666	MN	66	F	1/21/2021	1/28/2021	Client Passed away on 1/28/2021
3/12/2021	1093791	KY	84	F	1/21/2021	2/1/2021	Unknown
3/12/2021	1093857	MS	74	M	2/10/2021	2/12/2021	According to the patient's wife, the patient had flu like symptoms 2/11/2021. Complaints: Thirsty, sweaty and seizure with no prior history. Died at home. Not sent to hospital. Pronounced by coroner
3/12/2021	1093939	MS	83	M	3/5/2021	3/11/2021	No report of negative event after 15 min wait past receipt of vaccine. Notified by Coronor, on 3/11/2021 that this patient expired on 3/11/2021 at home. Not sent to hospital. Pronounced at home. Sent to Funeral Home
3/12/2021	1093961	TX	73	F	3/5/2021	3/8/2021	Death
3/12/2021	1093986	LA	45	F	3/10/2021	3/11/2021	Received a phone call stating that the patient complained of not feeling well on 3/11/21 while at work and that the patient died that night while at home.
3/12/2021	1094102	MS	57	M	2/27/2021	2/28/2021	NO ADVERSE EVENT NOTICE RECEIVED ON DATE OF VACCINE. RECEIVED NOTICE FROM CORONOR THAT THIS PATIENT EXPIRED 2/28/2021. COLLECTED URINE, BLOOD, AND TOXICOLOGY SCREEN. NOT SENT TO HOSPITAL. SENT TO FUNERAL HOME
3/12/2021	1093843	FL	92	F	2/12/2021	2/14/2021	patient's daughter reported patient passed away 2 days after first dose of vaccine

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3/12/2021		1094138	MA	82	M	3/10/2021	3/11/2021	D= decedent D received the second dose of the COVID vaccine on 3/10/21 @ 10:45AM. His daughter, ***** , transported him to the Pharmacy appointment. She notes that D did not have any complaints before or after the appointment?specifically she denies observing any weakness, dizziness, cough, and fever. D went on to have an uneventful day with normal appetite and bedtime. ***** also mentions that there were no adverse reactions following the first dose either. The next morning (3/11/21) at 6am the decedent?s wife found him in bed ?looking around the room? with gurgling agonal breathing. No seizure activity reported.
3/12/2021		1094343		89	F	1/28/2021	2/17/2021	ABDOMINAL PAIN death
3/12/2021		1094164		96	F	1/25/2021	3/1/2021	deceased
3/12/2021		1094165	LA	74	F	3/10/2021	3/11/2021	Patient received her first dose of the Mederna Covid vaccine at the Health unit on 03/10/21. Her family states she began experiencing nausea and vomiting last night (03/11/2021) and then started having chest pain at around midnight. This morning (03/12/2021) she was still experiencing vomiting and chest pain. She collapsed at approximately 07:30 and her family initiated CPR and EMS was called. She was brought the Hospital via Ambulance at 08:18 in cardiac arrest. The emergency department was unable to resuscitate her and she was pronounced dead.
3/12/2021		1094187		83	M	2/11/2021	2/21/2021	ABDOMINAL PAIN BACK PAIN death
3/12/2021		1094197	AL	83	M	2/26/2021	3/11/2021	DEATH - PT'S WIFE CALLED 3-11 TO TELL US PATIENT WAS FEELING BAD, AND TO ASK WHAT TO DO. WE SENT A PULSEOXIMETER, AND ADVISED TO CONTACT DR. - ON MORNING OF 3-12, PT'S WIFE CALLED TO TELL US HE HAD PASSED AWAY DURING THE NIGHT.
3/12/2021		1094208		76	M	1/26/2021	2/5/2021	ALTERED MENTAL STATUS Death
3/12/2021		1094242		85	M	1/22/2021	1/30/2021	Fall, fever, head injury, body aches, weakness, death
3/12/2021		1094259		65	M	1/30/2021		unknown death

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3/12/2021	1094290	KY	72	F	2/23/2021	3/10/2021	Patient died on March 10th 2021 and received the vaccine on February 23 2021. Patient had health issues. Spoke with coroner and patient did die at home. Patient was taken straight the the funeral home afterwards.
3/12/2021	1094300		61	F	2/5/2021	2/24/2021	death
3/12/2021	1094322		66	M	2/3/2021	3/2/2021	2nd dose given on 2/24/2021, deceased on 3/2/2021
3/12/2021	1094110		69	M	2/3/2021	2/22/2021	unknown. Patient is deceased
3/12/2021	1095748		73	M	3/1/2021	3/2/2021	death
3/12/2021	1095589		96	F	1/20/2021	1/23/2021	death
3/12/2021	1095596		70	F	2/5/2021	2/23/2021	cardiac arrest death
3/12/2021	1095605		97	M	1/26/2021	2/10/2021	death
3/12/2021	1095636		89	F	1/29/2021	2/19/2021	death
3/12/2021	1095642		94	M	1/25/2021	2/15/2021	death
3/12/2021	1095659		83	F	2/6/2021	2/16/2021	death
3/12/2021	1095666	WV	74	M	3/11/2021	3/12/2021	Patient received his 2nd dose of Moderna COVID-19 vaccine yesterday. He was found dead at his home today. After speaking with the County Coroner, an autopsy is not planned. Patient had COPD, Type II Diabetes, cardiovascular disease, and a pacemaker. The coroner does not believe vaccination was contributory to his death.
3/12/2021	1095695		84	M	1/30/2021	2/18/2021	death
3/12/2021	1095571		87	M	1/7/2021	2/5/2021	death
3/12/2021	1095737		75	M	1/21/2021	2/17/2021	Shortness of breath Acute on chronic renal failure Abnormal LFTs Death

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3/12/2021		1095668	ME	62	M	3/4/2021	3/11/2021	62 yo M with no known medical history awoke 12:15 am on 3/11/2021 and told his wife he had "pain all over". When she asked if it was chest pain, he said he didn't know. He went downstairs, vomited, slumped over against the wall behind the couch, and became unresponsive. Wife called 911 and was instructed to begin CPR. EMS crew arrived shortly after that and performed prolonged resuscitation efforts as per ACLS protocol. Pt pronounced at 3:15 am. Patient had not seen a physician in many years, had not had any vaccines in over 20 years, took no medications, and had no known medical history. He did have a strong family history of heart disease and had told his wife the week prior to his death that he had suffered a several-hour bout of chest pain that resolved spontaneously 2-3 days prior to his telling her about it. He refused to seek medical evaluation despite her urging.
3/12/2021		1095757		82	M	1/7/2021	1/16/2021	Death
3/12/2021		1095765		80	F	1/23/2021	2/3/2021	death
3/12/2021		1095771		95	F	1/20/2021	3/4/2021	death
3/12/2021		1095779		82	M	2/2/2021	2/24/2021	death
3/12/2021		1095791		85	F	2/6/2021	2/15/2021	Hip pain death
3/12/2021		1095798		94	U	1/20/2021	2/21/2021	death
3/12/2021		1095862	WA	87	M	2/23/2021	2/25/2021	received a phone call from the daughter of the patient. On 01/21/2021, patient came in and got his first Covid Vaccination. 3 days after the vaccination, the patient experienced really bad diarrhea, and was sleeping for 22 hours a day. 2 weeks later he perked up a little bit. On 02/23/2021, patient received his booster. Daughter states that 2 days later, patient shut down completely, not eating or drinking. The patient ended up passing away on 03/05/2021.

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3/12/2021	1095124		75	F	1/22/2021	1/31/2021	Chest pain DOE (dyspnea on exertion) Pneumonia of both lungs due to infectious organism, unspecified part of lung Acute pulmonary embolism, unspecified pulmonary embolism type, unspecified whether acute cor pulmonale present Death
3/12/2021	1095393	WY	76	M	3/11/2021	3/11/2021	Cardiac Arrest
3/12/2021	1095725		77	M	2/5/2021	3/7/2021	death
3/12/2021	1095170	MI	77	F	3/1/2021	3/3/2021	patient status started to decline within a few hours of receiving her covid vaccine she was weak, developed increased shortness of breath and went to the emergency room were she was diagnosed with STEMI and within 2 days expired.
3/12/2021	1095140		76	F	1/30/2021	3/3/2021	death
3/12/2021	1095149		86	M	2/11/2021	2/15/2021	death
3/12/2021	1095705		78	F	2/20/2021	2/24/2021	RESPIRATORY DISTRESS death
3/12/2021	1095160		93	F	1/26/2021	2/19/2021	death
3/12/2021	1095562		69	F	2/6/2021	2/26/2021	death
3/12/2021	1095174		77	M	2/3/2021	2/13/2021	Cardiac arrest Acute respiratory failure with hypoxia Death
3/12/2021	1095183		83	F	2/15/2021	3/1/2021	Death
3/12/2021	1095184	KY	67	F	3/11/2021	3/12/2021	~~Pfizer-BioNTech COVID-19 Vaccine EUA" Patient was discovered deceased this morning by her family members.
3/12/2021	1095236		82	M	1/21/2021	2/12/2021	death

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3/12/2021		1095238	OK	69	M	3/8/2021	3/9/2021	Patient at the time of vaccination on 3-8-21 has having issues with shortness of breath and edema consistent with congestive heart failure, the following day on 3-9-21, he was having more issues with shortness of breath, tachycardia, low O2 saturation. He was given meds in the clinic and monitored until he was feeling better with increased O2 sats. He was found unresponsive on his housing unit one hour later and failed to respond to resuscitation efforts and was pronounced expired at 1047.
3/12/2021		1095254		83	M	1/5/2021	1/29/2021	Shortness of breath Death
3/12/2021		1095300	GA	56	F	3/10/2021	3/11/2021	According to Medical Center's report, patient was brought to ED deceased upon arrival via EMS on 03/12/2021 at 8:57am. Patient had been seen on 3/11/2021 at same ED complaining of a heavy type of chest pain in the mid chest, also noting body aches, headache, and nausea.
3/12/2021		1095456		91	F	1/20/2021	2/15/2021	date of injection 01/30/2021 CARDIAC ARREST 1/30/2021 Death 1/30/2021
3/12/2021		1095327	ID	39	F	2/23/2021	2/23/2021	I was alerted on 3.11.21 by the patient's wife that patient had passed away the night after having received the vaccine. The wife informed me that she did not wake up the next morning.
3/12/2021		1095555		81	M	2/4/2021	2/9/2021	Death
3/12/2021		1095536		85	F	1/23/2021	3/3/2021	2nd injection given on 02/16/2021 Altered Mental Status admission on 3/3/2021 Intracranial bleeding Unresponsive Intracranial bleed Death on 3/6/2021
3/12/2021		1095545		81	F	1/21/2021	2/13/2021	death
3/12/2021		1095437		91	M	1/23/2021	2/24/2021	2nd dose injected on 02/19/2021 death on 2/24/2021
3/12/2021		1095435	TX	51	F	1/11/2021	1/25/2021	Headache, nausea on 1/25 progressed to SOB 1/26 and death 1/27
3/12/2021		1095406		79	M	2/4/2021	2/8/2021	death
3/12/2021		1095392	GA	66	F	2/4/2021	2/8/2021	Received shot 02/04/2021, sudden Cardiac Arrest 2/8/2021, found 2/10/2021

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3/12/2021	1095360		84	F	1/28/2021	2/22/2021	SHORTNESS OF BREATH Bradycardia Hypothermia Cardiomyopathy Elevated troponin Acute renal failure (ARF) Death
3/12/2021	1094575	TX	66	M	2/1/2021	2/1/2021	The decedent had the first Covid vaccine in February 2021 and he was set to have his second vaccine 3/3/2021. It is unknown which Covid vaccine he received. He complained only of a sore arm after receiving the first vaccine.
3/11/2021	1091538	WI	94	M	3/9/2021	3/11/2021	According to his daughter, patient did not appear to have any ill effects from his second COVID-19 vaccine on 03/09/2021. However, on 03/11/2021, he suffered what is suspected to be a fatal arrhythmia/myocardial infarction. It is unknown if there is any correlation to the vaccine.
3/11/2021	1091357	TX	72	M	2/20/2021	2/27/2021	Patient died suddenly and unexpectedly on 2/21/2021 one week after receiving first vaccine on 2/20/2021.
3/11/2021	1091337	MI	77	F	2/3/2021	2/13/2021	This is a hospice patient. She died on 2/13/2021 from her underlying medical conditions. I just received notification of the death 3/11/2021 and am reporting this immediately.
3/11/2021	1091327	FL	63	F	3/2/2021	3/2/2021	Death
3/11/2021	1091560	FL	82	M	1/22/2021	1/26/2021	On January 26, patient lost his balance and fell, no injury. On January 28, patient, fell, no injury. In both cases falls were observed and were not to the head. On January 29 patient could not maintain his balance. Taken to hospital. MRI revealed large subdural hematoma. Craniotomy on January 30, by Dr. Approximately 10 days later, Hbg, was down to 7, unexplained internal bleeding.

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3/11/2021	1091269	MI	83	M	2/4/2021	2/12/2021	A home dialysis patient who received his first COVID-19 (Moderna) vaccine on 2/4/2021. He was screened prior to admission into the clinic and reported no signs of symptom of COVID-19. This patient was diagnosed with COVID-19 on 2/12/2021 and hospitalized on 2/16/2021 with COVID pneumonia. The patient's spouse and son (who lives with them) also tested positive for COVID-19. This patient developed COVID-19 complications while inpatient including stroke and mechanical ventilation was required. The patient was made a DNR by family and removed from mechanical ventilation and expired on 2/26/2021.
3/11/2021	1091158	MN	95	F	2/23/2021	3/6/2021	patient passed away with in 60 days of receiving the COVID vaccine series
3/11/2021	1091138	NH	83	M	3/10/2021	3/10/2021	pt returned to his skilled nursing facility after his 2nd covid vaccine and at approx 10:45 pm he was in cardiac arrest. CPR was started and transported to Hospital. Pt was pronounced dead at 1:06 am on 3/11/21
3/11/2021	1091439	SC	78	F	2/25/2021	2/26/2021	fell/passed out (unknown) at home, taken by ambulance to local hospital, small bleed noted on CT scan, transferred to tertiary care center, f/u scan after 6 hours unchanged. Sent home. next morning unresponsive, transported back to tertiary care center. required ventilation en route.. massive cerebral hemorrhage noted on CT scan in different area. due to advanced dementia and unresponsiveness life support removed around 9pm that night. passed away at 9am on 3/1.

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3/11/2021	1090862	TN	76	F	2/18/2021	2/19/2021	DEATH-My Mother received her second Pfizer vaccine on Thursday, February 18, 2021 and died three days later on Sunday, February 21, 2021, after being admitted to the intensive care unit at Hospital. After developing an adverse reaction that started with nausea and then got progressively worse, including vomiting blood, Mom was rushed to the emergency room where she was tested for Covid-19 due to hospital policy (neg. result) and admitted to the intensive care unit. Mother died on Sunday, February 21, 2021. NOTE: Mother was doing well with her heart and renal conditions until she received the second dose of the Pfizer Covid-19 vaccine on February 18, 2021, directly or indirectly causing her death three days later on February 21, 2021. It is unfortunate that we are all advised (sometimes ill advised), particularly those with underlying conditions, to get vaccinated without the benefits of knowing when the vaccine can cause more harm than good. For obvious reasons, the approval of covid vaccines was rushed and thus the Pfizer and Moderna Studies are not thorough and lack in data to support an all call for everyone to get vaccinated in the name of herd immunity. Without the appropriate data, My Mother is DEAD! Sadly, there are probably more unreported deaths caused by the vaccine. While you have immunity from liability, you still have a moral obligation to collect data and advise accordingly. My goal is to save lives by sharing my mother?s personal experience and death after receiving the vaccine with everyone I know through every available resource. It is unconscionable that I have to shoulder the burden of getting the facts out about your vaccine so that individuals with underlying conditions can make a proper, informed decision about getting vaccinated. Sadly, I receive over 100 questions a day via social media from individuals inquiring about whether or not they or their loved ones should opt for the vaccine. I am not a medical professional?this is your job! Until you assume responsibility, I will continue advising anyone with heart and/or renal conditions to stay away from any and all covid vaccinations. Instead of the massive all call for vaccinations, we need further information and data from additional studies that will give more insight as to when the vaccine can cause more harm than good, as in My Mother?s case.

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3/11/2021		1090801	FL	97	M	3/4/2021	3/5/2021	Rapid decline. Patient was reportedly vaccinated (unknown location / brand of vaccine) on 3/4/2021. On 3/5/2021, patient suffered fever of 104, nausea/vomiting, lethargy, loss of appetite, and patient expired unexpectedly.
3/11/2021		1090182	TN		M			Passed away; A spontaneous report was received from a consumer concerning a male patient of unknown age, who was received Moderna's COVID-19 vaccine (mRNA-1273) and died. The patient's medical history was not provided. No concomitant medications were reported. On an unknown date, prior to the onset of event, the patient received their first of two planned doses of mRNA-1273 (Lot number: unknown) intramuscularly for prophylaxis of COVID-19 infection. It was reported by the patient's wife that the patient died. She was calling to cancel his second dose of mRNA-1273. No additional details, including the date of death, were reported. Treatment information was not provided. Action taken with the mRNA-1273 was not applicable as the patient died. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. No further information is expected.; Reported Cause(s) of Death: Unknown cause of death
3/11/2021		1090417	OH	93	M	3/6/2021	3/6/2021	Error: Wrong Dose of Vaccine - Too High
3/11/2021		1090369	SC	82	F	2/24/2021	2/24/2021	Patient showed reaction to vaccine almost immediately, began having chills and nausea. Patient ultimately succumbed to cardiac arrest.
3/11/2021		1090322	CA	71	F	2/13/2021	2/17/2021	MY WIFE DIED UNEXPECTEDLY 4 DAYS AFTER HER SECOND DOSAGE SHOT, ON FEBRUARY 17, 2021. SHE HAD BEEN HEALTHY AND HAD A RECENT CHECKUP AT WHICH THE DOCTOR GAVE HER A CLEAN BILL OF HEALTH. SHE WAS ALERT AND IN GOOD SPIRITS JUST THE NIGHT BEFORE WHEN WE WATCHED A MOVIE TOGETHER. I SAW NO INDICATION THAT SHE WAS FEELING POORLY OR OTHERWISE. I FOUND HER IN BED, DECEASED, UPON COMING HOME FROM WORK THE NEXT DAY.

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3/11/2021		1090240	NY	71	M	2/10/2021	2/1/2021	Cardiac arrest; Pulmonary embolus; Renal failure; Fever; Dehydration; Not eating or drinking; COVID-19 confirmed by positive COVID-19 test / COVID pneumonia; blood clot; blood pressure was low; Respiratory arrest; Respiratory failure; Hypoxemia; ventricular tachycardia; This is a spontaneous report from a contactable nurse reporting on behalf of the husband. A 71-year-old male patient received the first single dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; lot EL9264) on 10Feb2021 at about 19:00 (at the age of 71 years), in left deltoid, for COVID-19 immunisation. No other vaccines were given on the same day or within 4 weeks. The patient declined flu vaccine and pneumococcal vaccine (PNEUMOVAX), he had never had another vaccine except maybe his childhood vaccines. Medical history included rotator cuff surgery and cataract removed in 2020. The patient exercised regularly, he was healthy, he walked for miles and didn't eat any non-sense, he did not eat out, he did not smoke. The patient's mother was 100 years old and fully competent. The patient had two sisters older than him, the oldest one had hypertension the second sister did not have anything that they were aware of. The patient's father lived until he was 98 years old. The patient concomitant medications were none. The patient was told to take vitamin D 50,000 units but didn't even take them (he still had 9 of them in the bottle and they gave him 13). The patient experienced fever on 11Feb2021, renal failure on 14Feb2021, pulmonary embolus on 28Feb2021, cardiac arrest on 04Mar2021, dehydration and not eating or drinking on an unspecified date in Feb2021. These events required ER visit and were reported as serious as involved hospitalization from 14Feb2021 to 04Mar2021 and as fatal events. The patient died on 04Mar2021. Clinical course of the events included the following information. The patient received the first vaccine on 10Feb2021, the next day he developed a fever. The reporter spoke with the patient's doctor who told to give the patient paracetamol (TYLENOL) thinking the fever was from the vaccine. On 12Feb2021 and 13Feb2021, the patient's temperature was 102. Then the doctor advised to take the patient to the hospital. The patient's temperature was still 102, he was in renal failure, and they had to dialyze him. The patient was otherwise healthy, the patient's last physical was in Dec2020 and the only thing it showed

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was that his A1C was 5.7. The patient had no cholesterol or hypertension. The doctor advised the patient to decrease sugar and carbs because the holidays were coming up. The patient's follow up was scheduled on Mar2021. The reporter felt that the vaccine has something to do with the patient renal failure. The reporter spoke with the doctors at the hospital who didn't want to commit to anything. The reporter believed this was an adverse event. The caller mentioned that she had her vaccine before and she was fine. The patient was admitted on 14Feb2021 and by Wednesday he was not eating or drinking, he was dehydrated. The patient's admitting diagnoses was elevated temperature and ruling out COVID. The patient tested positive for Covid on 14Feb2021 (COVID-19 PCR test). The patient's temperature was 99.8 and then kept creeping up, on Saturday it was 102. The caller gave the patient Tylenol cold and flu (lot T0CL001021, expiry date Oct2021) took the edge off but in three hours the temperature was back up again. The patient never complained of pain and didn't want to take Tylenol. On 15Feb2021 the patient's numbers were getting better after the fluid challenge and then his numbers kept creeping up after that. The patient had the fever a week until they had it under control. The fever went away, it was gone for like 5 days, then it spiked again. The patient was started on piperacillin/tazobactam (ZOSYN) for like 3 or 5 days and the fever went away but then it kept getting worse. On 28Feb2021, the medical personnel thought the patient had a pulmonary emboli but because of the renal failure, they couldn't do a computerized tomography on the patient. The doctors mentioned that the patient was in renal failure and they thought they heparinized the patient and he had a blood clot who led to pulmonary embolus, cardiac arrest, and death. The patient was diagnosed with a pulmonary emboli on 28Feb2021. The patient started de-saturating and the doctors intubated and sedated him that whole time until this. Dialysis was started on 01Mar2021 and the patient received it every day except 04Mar2021. The patient's blood pressure was normal, it hardly ever went above 120. The patient was on the medical floor from 22Feb2021 to 04Mar2021. When the patient was on the medical surgical floor, he was on high flow 5 liters. After the patient started desaturating, he went to the intensive care unit and was

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put on a non-rebreather on 45%. The patient's highest heart rate was after intubation was 135, but the patient's blood pressure was low so they started him on some vasopressors. They did the fluid challenge on the patient and his labs were a little better than the labs kept creeping up until the doctor inserted a shiley catheter for dialysis. Respiratory: Respiratory arrest and then cardiac arrest. Respiratory failure, they intubated the patient. The reporter assumed dyspnea because the patient was intubated. Tachypnea was when the patient was in the intensive care unit already intubated. Hypoxemia, they intubated the patient so the caller guessed it was for the oxygen saturation drop. Covid pneumonia: yes. Chest x-ray showed mild pneumonia. The caller requested a follow up x-ray and the doctors said they were going to do another one but the caller is unsure if they did or when. The patient received additional therapies for COVID-19: remdesivir. Other radiological investigations: unable because of the patient's kidney function. They were looking at the D dimer and BMP to come up with the embolus since the patient couldn't have the scan. ARDS: no. Cardiovascular: The patient had a heart attack on 04Mar2021. The reporter thought it was from the pulmonary embolus which led to cardiac arrest. Arrhythmia: the caller guessed so, the patient was being worked on for 10 minutes before the caller got there. The caller saw a rhythm strip which showed a flat line and then she noticed ventricular tachycardia, then a flat line. The patient did not have SARS-CoV2 antibodies at diagnosis. Gastrointestinal/Hepatic, neurological, hematological, dermatological: none. Vascular: pulmonary embolus: yes, deep vein thrombosis, limb ischemia, vasculitis: no. Renal: renal failure: yes, acute kidney injury: no. The patient was scheduled for his second vaccine dose on 03Mar2021 at 04:15 but did not receive it. Time of death was 4:15 in the afternoon on 04Mar2021. The reporter considered renal failure, fever, dehydration, not eating or drinking, cardiac arrest and pulmonary embolus as fatal and related to the suspect vaccine. The outcome of the other events was unknown. Cause of death was unknown. No autopsy was performed.; Sender's Comments: Based on current information available, the company considered there is a possibility that all reported events are consequence of COVID-19 pneumonia on the basis of advanced age.

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The positive COVID-19 test occurred 4 days after the first injection of suspect vaccine BNT162B2. No complete effect can be achieved for short time interval. The COVID-19 is more likely pre-existing colonization or intercurrent condition, unrelated to suspect vaccine BNT162b2. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: Renal failure; Fever; Dehydration; Not eating or drinking; Cardiac arrest; Pulmonary embolus

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3/11/2021	1090239	OK	82	F	2/3/2021	2/1/2021	she passed away on 19Feb as she had a HGB of 5; O2 sats were in 70s; she had a HGB of 5; on the same side the patient hand started swelling; lymphedema from L breast; swelling all over; This is a spontaneous report from a contactable consumer reporting on behalf of the mother. An 82-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 03Feb2021 at 13:45, at single dose, in left arm, for COVID-19 immunization. No other vaccine was given in four weeks. Medical history included chronic obstructive pulmonary disease (COPD) and congestive heart failure (CHF). Known allergies: none. The patient had no COVID prior vaccination and was not tested after vaccination. Concomitant medications were not reported, however, the patient received other medications in two weeks. On 05Feb2021 at 09:00, on the same side the patient hand started swelling and doctor gave her some furosemide (LASIX). One week from vaccination she started having lymphedema from L breast and started noticeably swelling all over. On 18Feb2021 she was taken to the hospital as O2 sats were in 70s. She passed away on 19Feb2021 as she had a HGB of 5. The events resulted in: Doctor or other healthcare professional office/clinic visit, Emergency room/department or urgent care, hospitalization for 1 day. No treatment was received. No autopsy was performed. Low oxygen saturation, hand swelling, lymphedema from L breast and swelling all over final outcome was unknown. Information on Lot/Batch number has been requested.; Reported Cause(s) of Death: she passed away on 19Feb as she had a HGB of 5; she had a HGB of 5

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3/11/2021		1092485	CA	78	M	2/27/2021	2/28/2021	Patient felt generally unwell, tired and unable to walk well. Said his feet felt numb. He could not get up and slid to the floor. He did not have the core strength to even help him sit up. Sometime after he was assisted back on the couch around 4:30 am he must of got back up and attempted to go to restroom because he was found on the floor with his arm and face resting on the love seat which looked as if he was trying to pull himself up. His wife found him in the morning around 11:00 am and he had been died for some time according to EMS. His death was unexpected. Even when contacting his doctors they were confused as to why he had passed away. No autopsy was done but as of this moment he has not been cremated yet and is at Funeral Home.
3/11/2021		1091695	IL	78	F	2/3/2021	2/10/2021	patient expired 2/10/2021. Unknown whether the death was even related to the vaccine. Pt did not have any problems during 15 min observation period and no issues reported to HD after vaccination. reported because the person expired within 7 days of vaccination.
3/11/2021		1090464	TN	73	M	2/10/2021	2/11/2021	Feb. 10: Moderna Vaccination #1 Administered (arm) Feb. 11-Feb. 19: Developed a cough which worsened, weakness, confusion, could not follow instruction, fell, no appetite, fever of 102.8 on Feb. 19, no taste Feb. 20: Emergency Room with diagnosis of Covid pneumonia. Given usual Covid treatment. Became very confused, combative, etc. Feb. 21: Placed on ventilator Mar. 1: Ventilator removed. Patient expired.
3/11/2021		1092595	TX	70	F	2/1/2021	2/5/2021	A high risk employee received 1st vaccine dose of Moderna through the Health Center (HC) on 2/1/2021. This patient was seen as an employee only and was not established patient of the HC. The patient reported "having symptoms of Bronchitis" on 2/5/2021 prior to being hospitalized for 7 days (2/5/21 to 2/12/21). On 2/12/2021, an ER visit at Medical Center & transported to General Hospital on 2/13/21. On 3/11/2021, we were notified that the patient died on 3/10/21.
3/11/2021		1092477	FL	83	F	2/17/2021	3/7/2021	Pericardial effusion; multiple blood clots in portal vein.
3/11/2021		1091753	IL	68	M	2/24/2021	2/25/2021	observed for 15 min after both vaccines and no reported issues after vaccination. Patient did expire 2/25/2021 but cause of death unknown.

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3/11/2021		1092883	ME	72	M	3/9/2021	3/10/2021	Death. Patient lived alone, was found dead at 11:04 the morning following his second dose of vaccine. Actual time of death is unknown. Time of vaccine administration the previous day is estimated.
3/11/2021		1092737	ME	69	M	2/27/2021	3/11/2021	Sudden death. Alone at home, found on floor 4 hours after last phone contact
3/11/2021		1092651	CA	77	M	2/26/2021	2/27/2021	DEATH
3/11/2021		1303694	MI	94	M	2/27/2021	2/27/2021	Pt started feeling weak within hours of vaccine progressive weakness ensued and pt began to have falls and Rapid decline in general status and Died 3- -2021
3/11/2021		1092483	IA	67	F	3/10/2021	3/11/2021	Both patient and spouse we given their Moderna prime dose on 2-10-21. Both patient and spouse agreed to observe the post vaccination waiting period and reported no concerns. On 3-10-2021, they returned for their boost dose at 12:30 PM. Prior to administration of their second dose, they reported only mild headache and fatigue that presented approximately 12 hours after their first dose was administered. Once again, spouse and patient observed the post vaccination waiting period and reported no issues. On 3-11-21, I was notified that patient had passed away at home. In speaking to spouse, he stated that they both went to bed that evening with with a mild headache and fatigue. Spouse stated that he woke up early that morning with a more pronounced headache and had difficulty sleeping. He noted that at approximately 5:18 AM patient seemed to breathing heavily and may have gasped a bit. He checked on her again around 6:40 and determined that she had passed away. He contacted EMS and the technician confirmed that she had passed away. Spouse reports that the state will perform and autopsy in the next few days at the direction of Medical staff.

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3/11/2021		1092328	PA	71	F	1/27/2021	2/1/2021	Patient appeared alert, oriented and completed everyday normal activities 3 days after receiving vaccine on a Wednesday afternoon, Jan 27th 2021 at 4:00 p.m. . Went to bed as usual on Sunday night Jan 31st 2021 at 9:30 p.m., husband found patient on couch sitting upright, unresponsive at 4:00 a.m. Patient's daughter came over to the house approx. 8 minutes later. Performed CPR for 3-5 minutes, pt had a pulse. The ambulance was called prior to daughter arriving at the house. Ambulance arrived at 4:40 a.m. took pt to Hospital by 5:00a.m. Pt declared "brain dead~
3/11/2021		1092214	ME	66	M	3/2/2021	3/5/2021	Patient received his first COVID vaccine on 3/2 and then passed away 3 days after receiving Moderna vaccine. Provider presumed he died from sudden heart attack, this occurred at home.
3/11/2021		1091894	HI	70	F	2/25/2021	3/1/2021	The patient presented to the off complaining of feeling weak in the legs on Monday, March 1, 2021. She had been moving over the weekend and was over-exerting herself and stated she had fallen on a rug at the old house and then had lain down on the floor to sleep with her dog in the new home, had difficulty getting up and needed help. No symptoms of fever, chills, sweats, headache, myalgias. The next day she passed away at her home, sitting in her chair.
3/11/2021		1092653	CA	88	F	3/9/2021	3/10/2021	Patient received the vaccine on the evening of 03-09-2021. R.N. states she was "fine " at 440 AM bed check. At 0830 03-10-2021 patient was found slumped over on her bathroom toilet having expired sometime between 440AM and 830 AM
3/11/2021		1091799	KY	64	M	1/12/2021	2/25/2021	Became COVID-positive, pneumonia, ARDS, hospitalized for hypoxia 2/21/2021, death 2/25/2021
3/11/2021		1092168	MN	91	M	1/31/2021	2/12/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/11/2021		1091928	ID	80	M	2/11/2021	3/8/2021	Pt was given Moderna COVID-19 vaccine on 2/11/21 with no adverse reactions. Pt later died on 3/08/2021 with lung cancer being cause of death.

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3/11/2021	1091957	CO	77	M	1/19/2021	2/19/2021	I'm still not sure which COVID19 vaccine my dad received (It made me fill it out--I'm not sure if he got Moderna or Pfizer). Nursing home would know. He received his 2nd shot on Jan 19. On Feb 17 all was fine and they were planning on getting him crowns at the dentist. On Feb. 19 everything went poorly. He started to suddenly have seizures and was not responsive. When I arrived on Feb 21 he didn't say much and had seizures that night. On Feb 22, he responded a little bit and had a big black eye from a seizure the night before. On Feb 22 he had at least 4 seizures and he passed that afternoon around 1:20 pm
3/11/2021	1092016	NE	87	F	2/5/2021	2/9/2021	Per son and employee, patient's health had been declining since she was hospitalized for a severe UTI in Dec 2020. The evening of 02.09.2021 she vomited, then was found to be unresponsive the morning of 02.10.2021. Patient passed away later in the day on 02.10.2021.
3/11/2021	1092047	MN	80	F	1/7/2021	2/18/2021	patient passed away within 60 days of receiving a COVID vaccine
3/11/2021	1092108	NE	83	M	2/11/2021	2/13/2021	Patient's wife reports patient never reported feeling unwell. He had been working on painting the basement all week and on 02.12.2021 came in from outside, ate, and they sat down to watch TV. Around 9:30 patient reported being extremely tired and went to bed. Was found unresponsive the following morning, 02.13.2021. Patient's wife reports the doctor said it was a heart attack.
3/11/2021	1092110	MN	78	M	2/4/2021	3/6/2021	Patient passed away within 60 days of receiving a COVID vaccine series
3/11/2021	1092924	MI	53	M	2/23/2021	2/23/2021	Received vaccine, got sick the same day and passed away that Saturday. I truly believe that the vaccine caused his death Moderna
3/10/2021	1088096	KS	68	F	2/3/2021	2/4/2021	Fever, fatigue, runny nose the day after the 1st dose. . Pt deceased from COVID less than one month after 1st dose of vaccine
3/10/2021	1088320	KS	85	M	2/3/2021	2/6/2021	Pt tested positive for COVID on 2/6/2021. Deceased on 2/15/21. Not marked COVID death on death certificate.

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3/10/2021		1088287	PR	91	M	2/9/2021	3/5/2021	The caregiver on duty tells the nurse in charge that on 5/3/2021 she proceeds to bathe the resident and he was disoriented, so she goes to bed at around 5:00 a.m. The resident expresses that he feels bad, when the caregiver goes to look for things to take vital, when he returns she finds him without vital signs and was presenting respiratory problems.
3/10/2021		1088216	IL	67	F	2/3/2021	2/24/2021	Death within 30 days of vaccination
3/10/2021		1088184	CA	56	M	3/6/2021	3/9/2021	Pronounced dead on 3/9/21 approximately 72 hours after receiving vaccination. Unknown symptoms prior.
3/10/2021		1088180	AR	93	M	3/5/2021	3/9/2021	Patient was admitted to Hospice on 8/11/20. He experienced normal progression of his diseases until his death on 3/9/21.
3/10/2021		1088175	IL	65	F	2/3/2021	2/18/2021	death within 30 days of vaccination
3/10/2021		1088112	MD	73	M	2/26/2021	3/5/2021	03/05/2021: Increased SOB, DOE, increased HR and RR, pain on inhalation, agitation 3/06/2021: increased work of breathing, using accessory muscles, sweats, low-grade fever 3/07/2021- death
3/10/2021		1088328	PR	91	F	2/4/2021	2/5/2021	The caregivers in their rounds indicates that resident was well, ate his meals and her vitals were taken. In their next 7:30 pm rounds they find that the resident was not breathing. Home physician certifies death as Congestive Heart Failure.
3/10/2021		1087952	MN	89	F	12/27/2020	12/27/2020	Resident fell out of her chair and was transferred to the ER with a diagnosis of a Mio cardial infarction and passed away in the ER.
3/10/2021		1087949	NH	90	F	1/28/2021	3/6/2021	3/6/2021 Expired at facility receiving Hospice Services since 8/1/2020. Hx Covid-19 June 2020. Prior to death: Resident began refusing meals and failing overall. On, 2/18 began with jaundiced skin, no other symptoms. ADPOA, Hospice APRN and MD updated. Comfort measures maintained as resident continued to have slow decline.
3/10/2021		1087885	NY	68	M	3/8/2021	3/9/2021	Patient was found deceased in garage one day post vaccination

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3/10/2021	1087763	IA	62	F	3/5/2021	3/8/2021	Difficulty breathing leading to organ failure and death
3/10/2021	1087735	NH	68	M	2/18/2021	3/5/2021	On 3/5/21 at approximately 0200 became congested suddenly. Doctor was notified with N.O. Torsemide 20 mg tab via PEG-tube NOW, IM Rocephin 1 mg QD x7 days for possible aspiration, Chest X Ray, CBC/BMP in morning, and may suction resident if tolerated PRN. Received both Torsemide and the Rocephin and then deceased at 0350.

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3/10/2021	1086933	WA	96	F	2/5/2021	2/5/2021	<p>Pneumonia; Unresponsive at times; Weak; Diarrhea; Feeling Punky; Body aches/muscle aches; Fever; Chills; Nausea; Vomiting; Sore arm at site of injection; A spontaneous report, was received from a nurse (caregiver), regarding a 96 years-old female patient, unknown race and ethnicity, who was administered Moderna's COVID-19 vaccine (mRNA-1273), and experienced pneumonia, unresponsive at times (unresponsive to stimuli), weak (asthenia), diarrhea, feeling punky (malaise), body aches/muscle aches (myalgia), fever (pyrexia), chills, nausea, vomiting, sore arm at site of injection (vaccination site pain), and vomiting. The patient's medical history was not reported. Historical vaccine reported was flu shot. Concomitant medications included insulin, unspecified medication for pulmonary hypertension and heart failure. On 05 Feb 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (Batch number: 013M20A), intramuscular for the prophylaxis of COVID-19 infection. On 05 Feb 2021, the patient experienced the sore arm. On 07 Feb 2021, the patient experienced body aches, sore arms, felt punky, weak, fevers with a body temperature of 103.7 (unknown units), chills, nausea, vomiting, diarrhea and muscle aches. Treatment medication included acetaminophen. On 08 Feb 2021, the patient continued with high fever, unresponsive at times, and all other symptoms. On 09 Feb 2021, the patient's fever was control, very weak and passed away on the same day at 04 45 pm. The death occurred and death certificate stated that pneumonia was the cause of death. Action taken with second dose of mRNA-1273 in response to the events was not applicable. The outcome of the event, pneumonia was considered as fatal, and that of other events unresponsive at times, weak, diarrhea, feeling punky, body aches/muscle aches, fever, chills, nausea, vomiting, sore arm at site of injection, and vomiting were considered as unknown. The patient died on 09 Feb 2021. Plans for an autopsy was unknown. The cause of death was reported as pneumonia.; Reporter's Comments: This case concerns a 96 year old, female patient, who experienced a serious unexpected event of Pneumonia (fatal) among others, 5 days after receiving 1st dose of mRNA- 1273 (Lot# 013M20A). Very limited information regarding these events has been provided at</p>

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this time. The subject's con meds included insulin, unknown medications for pulmonary HTN and heart failure. The cause of death was determined to be pneumonia. Advanced age and co-morbidities may remain as risk factors.; Reported Cause(s) of Death: Pneumonia

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3/10/2021		1086901	DE	75	M	1/31/2021	2/1/2021	His oxygen dropped too low to 76; Pneumonia; something with toxins; he couldn't eat or swallow; he couldn't eat or swallow; This is a spontaneous report from a contactable consumer. This consumer reported similar events for 2 patients. This is the 1st of 2 reports. This consumer (wife) reported for a 75-year-old male patient that received his first dose of BNT162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), on 31Jan2021 (at the age of 75-years-old) for COVID-19 immunization. Medical history included dialysis for approximately 2.5 years, a lung problem, blood pressure. Concomitant medications included carvedilol and warfarin and other unspecified medications. The patient experienced pneumonia and died on 11Feb2021 03:00 AM. An autopsy was not performed. The cause of death was reported to be pneumonia. Clinical course was the follows the next day on 01Feb2021 at 9:30AM the patient was dressed and ready to go to dialysis. His oxygen dropped too low to 76. He wanted an ambulance called. He went into the hospital. The patient was confused, and he was not normally confused. In the hospital the physicians said he had pneumonia, but it wasn't that bad. The doctors were baffled. He also was in the hospital for something with toxins. He had a lung problem for a long time. If he didn't go to the bathroom the toxins were hitting the liver and then the toxins were going to the brain. When he was in the hospital he couldn't eat or swallow. The first day he did eat a bit, but he had dialysis in the hospital, and it knocks him out. They were giving him antibiotics IV. He couldn't swallow any of his pills. He was in there for 11 days and had not eaten. He couldn't swallow any pills. He started going to sleep and they started giving him Morphine drip at the end. They couldn't get any medicine in him because he couldn't swallow. The patient died of pneumonia, the outcome of the other adverse events was unknown. Information on lot number/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021247875 Same report, different patient/event; Reported Cause(s) of Death: Pneumonia

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3/10/2021	1086868	IL	72	M	12/29/2020	1/17/2021	Passed away; Severe hypotension; Hemodialysis shunt bleeding; A spontaneous report was received from other health professional concerning a 72 years old, male patient who experienced hypotension, removal and replacement of hemodialysis shunt (procedure), hemodialysis shunt bleeding and death. The patient's medical history was not provided. Concomitant product use was not provided/unknown by the reporter. On 29-DEC-2020, the patient received their first of two planned doses of mRNA-1273 (Batch number [LOT/BATCH: 039K208] intramuscularly in the right arm for prophylaxis of COVID-19 infection. The patient was hospitalized for severe hypotension and Removal and Replacement of hemodialysis shunt from 17-JAN-2021 to 21-Jan-2021. On 26-01-2021 the patient was sent to hospital due to his hemodialysis shunt bleeding. On 27-01-2021, the patient passed away at the hospital. Treatment information was unknown. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 27 Jan 2021. The cause of death was unknown. Plans for an autopsy were unknown.; Reporter's Comments: Very limited information regarding this event/s has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/10/2021	1088723	TX	28	M	2/21/2021	2/24/2021	Patient had 2nd COVID vaccine on 2/21/2021. He started having a temperature on 2/24/2021. Patient then started having trouble breathing. We took him to hospital. He was admitted on 2/25/2021. He steadily declined and was sent to ICU and died on March 1, 2021.
3/10/2021	1088338	OR	72	F	1/13/2021	3/5/2021	Case received vaccines 12/23/2020, and 01/13/2021. Public Health received notification that patient died 3/5/2021. Not really sure if her death is related to vaccine administration but I was instructed to fill out this form.

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3/10/2021		1089441	FL	76	F	2/1/2021	2/21/2021	Sunday, Feb 21, 2021. Patient told her husband she didn't feel well and she lay down next to him. She was tossing and looked like she was trying to get up. He was talking to her and she wasn't answering him. She was having trouble breathing. Took her to the hospital right away at 7:30 pm. They put her into a comma with a respirator. Finally went from emergency room to ICU on Monday. Then on Wednesday they took the respirator out and I spoke to her ? told her we all love her and she could only say hoarsely ?terrible, terrible.? They said she might get moved to regular floor. But then Wednesday night couldn't breathe again and put the respirator back in. Thursday morning husband had it removed and she died that evening at 10:51 on February 25.
3/10/2021		1088365	KS	85	F	2/3/2021	2/9/2021	Pt tested positive for COVID on 02/29/2021. Passed away on 02/25/2021. COVID listed on death certificate.
3/10/2021		1089536	WI	80	M	2/12/2021	2/15/2021	Moderna COVID-19 Vaccine EUA Heart attack Death
3/10/2021		1089349	TX	63	F	2/24/2021	2/25/2021	Patient had an adverse reaction to her first shot, unreported, mostly local to the injection. For this 2nd dose, she was not feeling well the day after the shot, but was at work. She did not show up for work on Friday and was found dead. Time of death was undetermined. She lived alone. An autopsy was not performed.
3/10/2021		1089215	CA	78	M	3/2/2021	3/2/2021	Syncopal episode followed by death. Unable to be revived. Coroner's case.
3/10/2021		1089038	IA	65	F	1/27/2021	1/29/2021	Patient died 2 days after COVID vaccination, concern for vaccine related death. Autopsy showed bilateral pulmonary emboli. No evidence death was vaccine related.
3/10/2021		1088956	NY	74	M	2/3/2021	2/14/2021	Tested positive and had symptoms for Covid-19 . Admitted to hospital on 2/14/21 in the icu and died in 2/28/21

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3/10/2021		1088837	FL	64	F	3/10/2021	3/10/2021	Patient received first vaccine dose on 3/10/21, waited for approximately 1 hour in Pharmacy after. Was walking to her vehicle and became short of breath. Patient got to her vehicle and called 911 due to severe shortness of breath. Rescue arrived on scene at approximately 11:00am, found patient in distress and administered epinephrine, methylprednisolone, and diphenhydramine. Patient placed on CPAP in rescue en route to ER, became unresponsive, frothing pink sputum. Intubated by paramedics en route with iGel device. Patient arrived to ER at 11:22am, went into cardiac arrest at 11:24am. Patient continued to be unstable, had multiple rounds of cardiac arrest and ROSC. Patient ultimately did not survive arrests, and pronounced dead at 2:37pm. Medications received during course in the ER - epinephrine 1mg x18 doses, sodium bicarbonate 50mEq x4 doses, calcium chloride 1g, insulin regular 10 units x1, furosemide 80mg x1, epinephrine titrated infusion, sodium bicarbonate infusion.
3/10/2021		1088830	TX	50	M	3/3/2021	3/8/2021	Patient died after feeling unwell for about ten minutes.
3/10/2021		1088401	KS	96	F	2/3/2021	2/15/2021	Pt tested positive for COVID on 2/15/21. She passed away on 02/23/21. Not listed as COVID death on death certificate.
3/10/2021		1089759	TN	86	M	2/1/2021	2/12/2021	Death
3/10/2021		1088815	TN	78	M	2/18/2021	2/21/2021	PER MEDICAL RECORDS PATIENT PRESENTED TO ER VIA EMS REPORTING INTERMITTENT CHEST PAIN, FEELING LIKE HIS HEART WAS STOPPING.
3/10/2021		1088367	PR	98	F	2/4/2021	2/24/2021	Person of contact spent around 10 minutes in the room, spoke with the resident, left the room. When the caregiver came into the room with the resident lunch the resident was without vital signs. Dxn: Atherosclerotic Heart Diseases
3/10/2021		1088539	OR	58	M	2/11/2021	2/24/2021	He was found unresponsive, cold and with rigor mortis present after family requested welfare check. He had not been seen for 36 hours.

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3/10/2021	1303655	OH	84	M	2/3/2021	2/4/2021	Fever, chills, nausea the morning After vaccine. Took out the trash and had a cardiac arrest and fell. 911 called went to hospital 3 1/2 days no change. 2 Dr.s said no improvement brain dead. Had a living will disconnected after 48 hrs. Disconnected at 7:00 pm died 8:17 pm. 2/7/21
3/10/2021	1088686		67	M	3/4/2021	3/7/2021	Pt found deceased in home on 03/07/2021
3/10/2021	1088615	IL	59	F	3/5/2021	3/6/2021	Death within 30 days of vaccination, vaccinated on 3/5/2021 pronounced dead on 3/6/2021. Unknown if any side effects from vaccine. No ER visit found at local hospital.
3/10/2021	1088741	NY	85	F	2/26/2021	2/27/2021	Patient found unresponsive approx 16 hours after vaccination. Death listed as Cardiac arrest secondary to stenosis. Patient had inoperable cardiac issues and was reportedly in a terminal state.
3/10/2021	1087428	OH	89	M	1/29/2021	2/1/2021	Documentation in death summary noted patient expired 2/11/21. Clinical diagnosis; respiratory failure due to pneumonia, GI bleed due to duodenal bulb ulcer, renal failure, uncontrolled atrial fibrillation, protein calorie malnutrition, community acquired pneumonia. SARS-COVID-19 not detected per documentation found on DNA molecular diagnostics laboratory report collected 2/2/21. Patient had received covid vaccination 1/29/21 prior to arrival at ED on 2/1/21. No documentation found of which brand or dose number patient had received. No lot number available for documentation.
3/9/2021	1084793	MA	60	F	3/5/2021	3/6/2021	Hypotension in the 70s/40s despite IV fluid replenishment. Per our MD DC/transfer note: PEG displacement, ongoing sepsis, hypoglycemia. Assess for other reason for hypotension including sepsis, cardiogenic shock, acute abdominal processes. patient was transferred to the Hospital ER where she expired

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3/9/2021		1083728	CA	70	M	2/20/2021	2/21/2021	Dead on the bed with his legs dangling off one side of the bed; Complained about an upset stomach; A spontaneous report was received from a nurse concerning a 70-year-old, male patient, who received Moderna's COVID-19 Vaccine (mRNA-1273). The patient's medical history included hypertension and diabetes. No concomitant medications were provided. On 20 Feb 2021, Saturday, the patient received their dose of mRNA-1273 (Batch Number: Unknown) for prophylaxis of COVID-19 infection. On 21 Feb 2021, Sunday 9:36 AM the patient's experienced an upset stomach and attributed it to dinner last night and later on 22 Feb 2021, Monday he was found dead on the bed with his legs dangling off one side of the bed. The cause of death was unknown. Treatment information for event upset stomach included half a spoon of an Indian thing. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event upset stomach was fatal and patient died on 21 Feb 2021.; Reporter's Comments: This is a 70-year-old, male patient, who received Moderna's COVID-19 vaccine and history of risk factors for CAD such as hypertension and diabetes, was found dead 2 days after vaccination. Very limited information regarding this events has been provided at this time. Further information has been requested; Reported Cause(s) of Death: Unknown cause of death
3/9/2021		1084203	AL	65	M	2/24/2021	3/8/2021	Pt was visiting dr for routine checkup. Pt began to experience difficulty breathing, 911 called. I showed up to pt apneic, pulseless. CPR initiated. Return of spontaneous circulation in ambulance (without Rx). Pt intubated, ventilations continued throughout contact. Pt still had spontaneous pulse upon delivery ti ED, placed on vent in our presence. Pt later transported to Level 1 hospital on vent.

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3/9/2021	1084419	ME	61	M	3/5/2021	3/5/2021	EMS reported sudden onset of shortness of breath, patient grabbed his chest and collapsed. He stopped breathing. Wife began CPR with chest compressions at 5:00. Fire dept. arrived resumed CPR and attached AED but there was no shock advise. They placed an OPA as well (inserted an airway) and started ventilation. Asystole was confirmed, they continued CPR. After 5:25 they gave 3 rounds Epineferin and ended CPR at 5:46. They also checked his blood sugar and it was 136. Possible reaction to covid vaccine. Possible death due to history of cardiac issues. His PCP is requesting an autopsy

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3/9/2021		1084390	NH	88	F	1/8/2021	1/29/2021	1/29 /21 Increased fatigued, congestion, BP elevated Stat CBC/BMP/CXR. CXR. CXR-CHF with superimposed bilateral infiltrates and bilateral pleural effusions. N.O. Rocephin 1gm IM QD x 7 days. CBC am. Consult with cardiology. 2nd covid vaccine not given. 2/2-2/5 Sent to ER for ongoing significantly elevated BP's. Remains on Rocephin. Hospitalized 3 days for Acute on Chronic Diastolic and Systolic Heart Failure-Diuresed with IV Lasix, Multiple changes in medications by cardiology for poorly controlled HTN. Head CT negative, Covid negative. 2/5 Readmission from Facility-Followed closely by cardiology. Losartan was increased, Hydralazine was increased, Norvasc was increased. Continue Atenolol. Monitoring daily weights and vital signs. Resident with increased lethargy and then behaviors at times, and refusing meds. Oral intake poor. Continued on Coumadin for A-Fib with monitoring of INR. Palliative consult ordered. Continued to be followed by Mental Health and APRN in addition to PCP. 2/6 CBC/BMP/CXR-BUN/Creatinine elevated 44/2.2 and upon readmission to facility. MD changed from Lasix to Demadex. CXR-Continued PNA. Started on Rocephin 1gm IM x 7 days. 2/8 MD visit. Palliative consult ordered 2/11 Critical labs with elevated BUN/Creatine and Na level. MD offered hospitalization to ADPOA who declined and wanted to pursue Hospice instead. Resident was seen by APRN from Home Health and Hospice Services who discussed plan of care with ADPOA requested comfort care and no further hospitalizations. 2/12 Resident admitted to Hospice Services. Compassionate visit with ADPOA 2/14 resident with further decline, periods of apnea evident, comfort maintained. 2/18 Passed at facility with Hospice services in place and compassionate visits with ADPOA
3/9/2021		1084287	MN	80	M	2/2/2021	2/4/2021	Death
3/9/2021		1084685	ME	68	M	3/8/2021	3/8/2021	We received a phone call stating that the patient passed away overnight.
3/9/2021		1084187		94	F	1/30/2021	2/18/2021	At Home Care Hospice Patient

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3/9/2021		1084180	IN	79	F	3/5/2021	3/5/2021	Patient came with husband to Vaccine clinic today 3/5 for 2nd dose of vaccine. Did well during and immediately after vaccine. Husband states patient has c/o severe chest pressure and pain for several weeks but has refused to come to ER for evaluation. Today, after getting vaccine dose and going to local bank, patient was in passenger side of truck when chest pain started again. Husband begged patient to let him take her to the ER but she said no, I'm fine and I don't want to go. She then went unresponsive. At a stop light, he was next to a couple of cops who he was able to wave down and proceed to escort them in to ER. Upon arrival to the ER, patient was unresponsive and pulseless. CPR was initiated, 1 defib, and 1mg of epi was given. Return of pulse was obtained, but husband asked for no life support and only comfort measures. Patient was admitted for comfort measures. I do NOT think this was related to her vaccine, but rather the unfortunately end to a sub-acute chest pain patient that declined multiple urgings to seek care. Patient then expired on 3/5/21 at 2037.
3/9/2021		1084145		96	F	1/28/2021	3/1/2021	At home Care Hospice Patient

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3/9/2021	1083754			M			systemic inflammatory; asymptomatic COVID-19 infection; asymptomatic COVID-19 infection; This is a spontaneous report from a non-contactable consumer. A male patient of an unspecified age received the second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. On an unspecified date, the patient developed a devastating systemic inflammatory response within 36 hours of receiving his second Pfizer vaccine shot. Patient's deadly inflammatory state followed his vaccination. Administration of the Pfizer vaccine ignited a deadly inflammatory response in patient's body acutely, in a setting where he had a recent asymptomatic COVID-19 infection. The patient died on an unspecified date. It was not reported if an autopsy was performed. Outcome of all events were fatal. No follow-up attempts are possible, information about lot/batch number cannot be obtained. No further information is expected.; Reported Cause(s) of Death: asymptomatic COVID-19 infection; asymptomatic COVID-19 infection; systemic inflammatory
3/9/2021	1084800	TX	54	F	3/8/2021	3/8/2021	Death. EMS called to residence 9 hours later for cardiac arrest. Pt pronounced at Emergency Room. Pt sent to ME office for autopsy.
3/9/2021	1085019	WA	65	F	3/3/2020	3/5/2021	Had vaccine on 3/3/2021 at approximately 1 PM. She was found on her couch deceased on 3/8/2021. Possible death on 3/5/2021. She called her sister and told sister that back hurt worse than usual and she would lay on the couch and rest. This is where she was found. Unknown if from vaccine, but due to vaccination on Wednesday proceeding her death, report is being filed.
3/9/2021	1084036	MS	59	F	2/5/2021	2/6/2021	Profoundly weak by Saturday the day after the injection (2/6/2021), hospitalized by Monday (2/8/2021), on a ventilator by Wednesday (2/10/2021) and died the following Monday, (2/15/2021) She was treated for HLH (hemophagocyticlymphocytosis)
3/9/2021	1085673	NM	88	M	2/23/2021	2/26/2021	Patient died 2/26/2021

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3/9/2021	1084949	PR	95	F	2/20/2021	2/24/2021	Patient dies suddenly 4 days after the vaccine
3/9/2021	1085865	OH		M	1/29/2021		DEATH 2/23/21
3/9/2021	1085783	CA	37	M	2/24/2021	3/5/2021	Sudden Unexpected Death - No signs or symptoms
3/9/2021	1086206	AZ	87	M	2/18/2021	2/19/2021	Four days of feeling sick with aches, pains, upset stomach. On day 2 he was so sick he thought he would die. Sudden death on day 7.
3/9/2021	1085413	CA	37	M	3/2/2021	3/4/2021	patient was on treadmill at home on 3/4/21 and became shortness of breath, collapsed, hitting head on floor. Family started CPR, Downtime prior to ED arrival 30 minutes. Arrived at ER at 8:48AM. Intubated by EMS. initially shocked 1x but otherwise was in asystole. Eventually after about 70 minutes of CPR at ER patient had no ROSC, pupils dilated and fixed and at this point pronounced dead.

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3/9/2021	1085375	NJ	54	F	2/2/2021	2/21/2021	Patient presented to medical center emergency room on 02/21/2020 at 19:00, patient complained of shortness of breath and feeling fullness of her throat. Patient stated that she had Motrin 800 mg TID and Flexeril PRN due to her back pain. Patient also stated that she ate a banana after she took her medications. Her systolic blood pressure was 50, and her HR was 109, patient also stated that she had her 2 shots of Moderna Vaccine, her first shot was on 01/06 and her second shot was on 02/02. Patient was treated with: 1 Duoneb, 0.3 ML IM of epinephrine, Solumedrol 125 mg, Benadryl IV 50 mg, Normal Saline infusion IV 1000 ml/hr, and Pepcid IV 20 mg. Patient lactic acid was 10.6, WBC 24.2 and Temp 97 F, patient was diagnosed as sepsis shock and patient received: Piperacillin-tazobactam 3.375 g in D5W 50 ml IVPB (3.375 g once) Vancomycin 1 g in D5W 200 ml IVPB (1 g once). Patient pH was < 6.780 and PCO2 was 55 and bicarbonate level was 5.0, patient received Sodium bicarbonate IV 50 mEq once. Patient was not stable as her BP and HR were fluctuating patient received DilTiazem IV 2.5 mg for 2 doses. Patient received Levophed 16 mg /NS 250 ml IV. At 23:13 patient was intubated, patient received a local anesthesia through a central line of lidocaine 2% without epinephrine, and patient was transferred to the ICU to be monitored. At 00:33 CODE BLUE was called and patient became unresponsive and lost pulse while patient was brought to ICU. Patient was coded twice before ROSC, during intubation patient noted to have coffee-ground drainage.
3/9/2021	1085302	WI	79	M	2/26/2021	3/1/2021	Patient was admitted to Hospital on 3/1/21. Blood Sugar of 758. Patient diagnosis with Acute respiratory failure with hypoxia and acute heart failure and Metabolic encephalopathy. Patient put on ventilator and passed away on 3/2/21 at 17:04.

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3/9/2021	1085254	NJ	90	M	3/1/2021	3/1/2021	Severe abdominal pain unable to eat or sleep for 36 hours. He went by ambulance to the Hospital emergency room. They tried to pump his stomach but he aspirated and and went into cardiac arrest. He was revived but never regained consciousness. (The ICU Dr said that he had blood clots in his abdomen from a recent stroke. We were unaware of him having a stroke other than in 2026. The same Dr. said that he had necrosis in his lungs from aspirating. The necrosis was from his bowel dying) He was put on a ventilator and given drugs to increase his heart rate. On 3-5-21 the heart drugs were reduced and he died. I was with him when he recieved the vaccination and he was healthy, just old. I think that the shot killed him.

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3/9/2021	1085193	CA	69	F	2/22/2021	2/22/2021	Unconscious; Felt a bit sore at the injection site; A spontaneous report was received from a consumer and healthcare facility staff member concerning a 69 years old, female patient who experienced little bit sore at the injection site, unconscious and passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. On 22 Feb 2021, prior to the onset of the symptoms, the patient received their second of two planned doses of mRNA-1273 (Batch number not provided) intramuscularly for prophylaxis of COVID-19 infection. The patient experienced sore at the injection site and unconsciousness both since 22 Feb 2021. The husband of the patient performed CPR as instructed by 911 and EMT's and police performed medical procedure which included injections and electrical shock both on 22 Feb 2021. The patient died on 22 Feb 2021. Treatment information was not provided. The patient received both scheduled doses of mRNA-1273 prior to the events; therefore, action taken with the drug in response to the events is not applicable. The patient died on 22 Feb 2021. The cause of death was unknown. Plans for an autopsy were not provided.; Reporter's Comments: This is a case of death of a 59-year-old, female patient who experienced injection site sore and became unconscious on the same day after mRNA-1273 administration and subsequently expired. Although critical details such as the patient's medical history and actual cause of death is lacking, based on the current available information which shows a strong temporal association with the product use, thus, a causal relationship cannot be excluded. injection sore is consistent with product safety profile and cannot be excluded.; Reported Cause(s) of Death: Unknown cause of death

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3/9/2021	1085185	VA		F	1/5/2021	1/5/2021	testing positive for COVID; Fever for 3 hours after the vaccine/ High temperature; Joint pain; Severe upper back pain; Headache; A spontaneous report was received from a nurse concerning a 44-year-old female patient who experienced fever for 3 hours after vaccination, headache, joint pain, and severe upper back pain. The patient's medical history was not provided. Products known to have been used by the patient, within two weeks prior to the event, included dulaglutide, metformin, empagliflozin, losartan, amlodipine, levothyroxine, simvastatin, allopurinol, estrogen, colchicine, calcium, zinc, multivitamin and vitamin C. On 05 Jan 2021, the patient received mRNA-1273 (Lot number 026L20A) intramuscularly for prophylaxis of COVID-19 infection. On 05 Jan 2021, patient experienced fever for 3 hours after vaccination. The patient also experienced headache, joint pain, and severe upper back pain. The patient stated her temperature was high from 05 Jan 2021 until 09 Jan 2021 when it went down. Treatment information was not provided. Follow-up received on 21 Feb 2021, from the patient's husband, included that the patient tested positive for Covid-19 on 09 Jan 2021 and was hospitalized on 11 Jan 2021. The patient never recovered from her symptoms and the patient died on 02 Feb 2021. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the events Coronavirus test positive was fatal and for headache, joint pain, severe upper back pain and temperature were unknown. The cause of death was reported as Coronavirus test positive and autopsy details was unknown.; Reporter's Comments: This case concerns a 44-year-old female who was hospitalized with a serious unexpected event of COVID-19 with fatal outcome along with NS unexpected back pain and NS expected fever, headache, arthralgia. Event onset was 5 days after the first dose of mRNA-1273. Treatment not reported. Event outcomes fatal. Autopsy results unknown. Based on current available information and temporal association between use of the product and the start date of the event, a causal relationship cannot be excluded.; Reported Cause(s) of Death: Testing positive for COVID

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3/9/2021	1085032	AR	58	F	2/25/2021	2/26/2021	Patient received dose #2 of her Moderna COVID vaccine on 2/25/21. Patient called in to work the next day 2/26/21 because she was not feeling well. Patient did not show up to work on Monday 3/1/21 and her supervisor, called the PD to check in on her and she was found deceased in her home.
3/9/2021	1084965	CA	84	M	3/5/2021	3/5/2021	Injection in left arm at 4:15 pm. on Friday 3/5/2021. At 9pm, 3/5/2021 he complained of chest pain and was taken by ambulance to Medical Center Emergency Room. He was diagnosed with gallstones and discharged at approx 4:00 am on 3/6/2021. He found non responsive at home shortly thereafter.
3/9/2021	1085788	MI	96	M	2/22/2021	2/24/2021	My grandpa was very lethargic after his 2nd vaccine. The following day he started acting more awake, he had a better appetite but seemed to be breathing a little funny. He was labored a bit. He went to sleep on 2/24/21 and at 230 am was dead.
3/8/2021	1081009	NC	85	F	3/5/2021	3/6/2021	there were no signs of adverse reaction at the time of injections and she waited 15 minutes at the site to watch for side effects. and none were evident or reported. We were notified that she passed away on Saturday, March 6.
3/8/2021	1081308	MI	71	M	3/2/2021	3/2/2021	Death 3 days afterads, undetermined cause at this time.
3/8/2021	1081305	NE	59	M	2/26/2021	2/27/2021	Sudden death approximately 24 hours after receiving 2nd COVID vaccine - symptoms unknown - autopsy revealed cardiac disease as the cause of death
3/8/2021	1081304		90	F	2/26/2021	3/7/2021	patient passed away within 60 days of receiving a COVID vaccine
3/8/2021	1081279	SD	90	M	3/2/2021	3/2/2021	Patient seen by physician for weakness, tired, increase SOB, falls, increase confusion and then subsequently hospitalized . Patient then expired on 3/7/21.
3/8/2021	1081155	MT	86	F	2/12/2021	3/6/2021	Pt died on 3/6/2021. Received Vaccine on 2/12/2021. Unknown cause of death.
3/8/2021	1081132	NJ	58	M	2/5/2021	2/26/2021	Severe thrombocytopenia approx. 10 days after vaccine administration.

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3/8/2021	1081033	WY	88	F	2/22/2021	2/25/2021	Patient expired 2 days after receiving the vaccination. Patient had other signs of deterioration over the course of the previous month with worsening edema and difficulty breathing. Unlikely to be related according to our assessments, but wanted to err on the side of caution.
3/8/2021	1080932	KY	87	F	1/12/2021	1/23/2021	DIAGNOSED WITH COVID 1/21/21; RECIEVED BAMLANIVUBAM INFUSION; HOSPITAL ADMISSION 1/23/21 WITH ACUT RESPIRATORY FAILURE DUE TO COVID. INTUBATED X 10 DAYS
3/8/2021	1080716	MI	67	F	2/27/2021	3/1/2021	On day three after vaccine administration patient expired. quite an active man, no signs led up to his death until maybe a half hour prior to the event.
3/8/2021	1080671	FL	74	M	1/26/2021	2/2/2021	Patient received vaccine 1/26/2021, complained of fever and chills post vaccine. Daughter reported worsening symptoms to confusion, decreased appetite, N/V and chest pain. Dry cough and SOB. Patient admitted to facility for Chest pain, AMS on 2/2/2021. Expired 2/2/2021.
3/8/2021	1080620	VA	70	M	3/4/2021	3/5/2021	Information provided by facility director. Resident told medical provider on 3/3/21 at routine visit that he had not felt right since receiving vaccine on 2/11/21. No specific complaints and no findings reported by provider. No specific complaints reported prior to nurse at facility finding resident unresponsive and breathing at approximately 6AM on 3/5/21. 911 initiated. EMS, police and coroner responded.
3/8/2021	1080538	KS	56	F	1/8/2021	3/7/2021	Unexpected Death. No details known at this time.

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3/8/2021		1080335			U			Anaphylaxis; A spontaneous report was received from a physician assistant concerning a patient of unspecified age and gender, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced anaphylaxis. The patient's medical history was not provided. No relevant Concomitant medications were reported. On an unknown date, prior to the onset of the event, the patient received their first of two planned doses of mRNA-1273 (Lot number: unknown) for prophylaxis of COVID-19 infection. On an unknown date, after receiving vaccine, the patient died due to anaphylaxis. No further details were available at the time of this report. Treatment for the event was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The outcome of the event anaphylaxis was fatal. The patient died on an unspecified due to anaphylaxis. Autopsy details were not provided.; Reporter's Comments: Very limited information regarding the event of anaphylaxis has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Anaphylaxis
3/8/2021		1081426	MI	84	F	3/1/2021	3/1/2021	Death on the way home after receiving vaccine.
3/8/2021		1081471	MA	92	M	3/4/2021	3/7/2021	This individual received the first dose of the Covid-19 Pfizer vaccine on 3/4/21 and a few days later passed away on 03/07/21.
3/8/2021		1080404	NY	88	M	1/25/2021	1/25/2021	Severe fatigue, lethargy observed by family members on date of discharge from sub-acute nursing care to home 02/03/2021 and subsequently on 02/04/21 with complaint of shortness of breath. Continued lethargy and shortness of breath on 02/05/21, 02/06/21. Lethargy, shortness of breath and loss of appetite, chills, on 02/07/21. Less lethargic on 02/08/2021 but worsened shortness of breath and loss of appetite. Patient requested 911 call on afternoon of 02/09/2021 for shortness of breath. Rapid Covid screen at ER was positive and staff reported beginning treatment with dexamethasone and remdesivir. Hospital staff reported to family that patient had pneumonia, congestive heart failure, confusion on 02/10/2021. Nursing staff reported patient was getting antivirals and antibiotics. Patient was transported for care by pulmonary specialist at Hospital on 02/13/2021.

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3/8/2021		1082804	AZ	28	M	2/18/2021	3/2/2021	Patient committed suicide the morning of March 2, 2021. He stepped in front of a truck on a highway. I consulted with pharmacy and they said that I should report even if the 2 most likely have nothing to do with each other.
3/8/2021		1081416	OK	74	F	2/22/2021	2/25/2021	Pt. presented to ED via EMS for emergent coma. EMS intubated patient in field due to respiratory failure. Pt. was severely hypertensive with nearly total loss of brainstem reflexes. Patient had known L MCA cerebral aneurysm with appointment to undergo intervention to address in the near future. NCCT reported massive multifocal brain hemorrhage, SAH, SDH, and parenchymal hemorrhage with midline shift and subfalcine herniation. Due to dismal/poor prognosis, family requested withdrawal of support approximately 4 hours after presentation and patient expired shortly thereafter.
3/8/2021		1082850	MI	68	M	2/19/2021	2/20/2021	pt became nauseated and vomiting 1 day after getting vaccine, reported on Mon 2/22/21 but states was getting better, received call from sister on 2/25/21 that pt could not get out of bed on own - was sent to ER at that time
3/8/2021		1082787	KY	88	M	2/23/2021	3/7/2021	Death on 3/7/21
3/8/2021		1082759	VA	79	M	3/4/2021	3/7/2021	Death
3/8/2021		1082717	AZ	88	F	2/16/2021	2/17/2021	Patient dropped dead 24 hours after receiving the vaccine. The vaccine killed her. She received the vaccine 2/16/2021 and died 2/17/2021
3/8/2021		1082707	MO	55	M	3/5/2021	3/7/2021	death
3/8/2021		1082467	MD	63	F	2/17/2021	3/6/2021	Pt passed away on 3/6/21.
3/8/2021		1082400	KY	84	F	1/12/2021	3/7/2021	Patient developed COVID after vaccines. There was an outbreak at her facility . She ended up with pneumonia and expired on 03/07/2021
3/8/2021		1082190		81	M	2/2/2021	2/18/2021	Patient hospitalized 2/18/21, second dose was scheduled for 2/23/21. Patient expired in hospital 2/27/21.

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3/8/2021	1082172	KY	86	F	1/18/2021	2/3/2021	THE RESIDENT STARTED HAVING SYMPTOMS OF COVID 19 ON 2/3 (COUGH AND SHORTNESS OF BREATH). RAPID TEST WAS NEGATIVE, BUT PCR TEST WAS POSITIVE. SHE RECEIVED TREATMENT FOR COVID WITH IVERMECTIN, DEXAMETHASONE, ALBUTEROL MDI, MUCINEX, AND Z-PACK. SYMPTOMS PROGRESSED AND SHE PASSED AWAY ON 2/15/21.
3/8/2021	1082161	NV	79	M	3/3/2021	3/3/2021	Cardiac Arrest/Death Date of death 03/03/2021 time 01:54 pm
3/8/2021	1081763	ME	81	F	3/1/2021	3/2/2021	Pfizer-BioNTech COVID-19 vaccine treatment under Emergency Use Authorization(EUA): Female died 27 hours after receiving second dose of vaccine. Immediately after vaccine she had rapid breathing, almost hyperventilating. Medical history included Dementia and Parkinson's Disease.
3/8/2021	1081762	ME	75	M	2/28/2021	3/2/2021	Pfizer-BioNTech COVID-19 vaccine treatment under Emergency Use Authorization(EUA): Male received his second vaccine on February 28, 2021 and had been following the vaccine. Symptoms included nausea, vomiting, hypotension, and bradycardia. He was admitted to the hospital on March 1st. Medical history included Coronary Artery Disease, A-Fib, and a previous CABG procedure.
3/8/2021	1081547	MS	84	M	3/5/2021	3/7/2021	NO IMMEDIATE ADVERSE EVENTS PRESENT FOLLOWING IMMUNIZATION. RESIDENT WAS ALERT, RESPONSIVE, TALKATIVE, WITHOUT COMPLAINTS, AND ENGAGING IN NORMAL ACTIVITIES AFTER IMMUNIZATION, AS WELL AS THE FOLLOWING DAY. HE WAS FOUND IN BED THE SECOND MORNING AFTER VACCINATION (AT 6:25AM) WITHOUT VITAL SIGNS AND HAD EXPIRED PEACEFULLY IN HIS SLEEP. HE WAS A DNR, NO LIFE SUSTAINING MEASURES WERE PERFORMED.
3/8/2021	1083117	CA	69	M	3/5/2021	3/5/2021	Pt. received his second moderna vaccine on 03/05/2021 and his son reported that the pt. passed away after receiving his vaccine.

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3/8/2021	1082345	WY	83	F	2/5/2021	3/5/2021	This patient developed a severe pneumonia, clinically diagnosed as COVID-19 pneumonia, with hypercapnic and hypoxemic respiratory failure, and expired. I am not sure if it was related to the vaccine, but the rapid antigen for Sars-CoV2 was positive and the PCR was negative. I am reporting this event because of the lack of clarity on this issue and the positivity of the Sars-CoV2 was beyond the parameters of 14 days in the phase three trials.
3/8/2021	1082985	MI	86	M	2/25/2021	2/28/2021	Patient had been feeling dyspneic for 1.5 weeks to 1 month prior to his death on 2/28/21. He received vaccine on 2/25/21. On his family found him leaning on the couch with eyes rolled back and foaming at the mouth. He was making noises (like grunting sounds?). EMS was called. He had cardiac arrest while in ambulance enroute to EMS. Resuscitation efforts continued in ED. Family was informed about his status and resuscitation efforts were stopped.
3/8/2021	1082153	MN	85	M	2/1/2021	2/1/2021	Patient is a 85 y.o. male who presents with headache. Patient received his Covid vaccination proxy 72 hours prior to ER arrival this morning. Patient states that been having complaints with increasing weakness plus mild headache. Patient also complained about some mild increasing shortness of breath. Patient denies any chest pain nausea vomiting. Patient has had no dysuria or frequency. Patient states he has had a headache for at least a month but in route to the headache is probably just been within the last 72 hours. Patient had increasing weakness and because this is brought to the emergency room by patient's wife for further evaluation. Covid vaccine was not at our facility and is not documented in Database. Looks like he Doctors at the Facility as well.
3/7/2021	1080434		76	M	2/24/2021	3/2/2021	Death Narrative: Patient passed away on 3-2-21, patient received the vaccine on 2-24-21. Patient was obese and had several co-morbid conditions.
3/7/2021	1079251	WA	68	F	3/5/2021	3/6/2021	Patient died the day after she received her vaccine
3/7/2021	1079516	NE	96	F	2/4/2021	2/5/2021	There were no symptoms experienced on the first vaccination given on 1/14/2021. The second vaccination was given on 2/4/2021, the following day (2/5/2021) patient complained of fatigue and nauseau. In the evening she went into cardiac arrest and died.

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3/7/2021	1079904	CA	60	U	2/17/2021	2/22/2021	SUBJECT WAS FOUND DECEASED ON 22 FEB 2021 AT AROUND 11:30 PM
3/7/2021	1079958	CA	68	F	3/5/2021	3/6/2021	Pt found down and pulseless in home by husband. EMS called, Pt found to be in PEA arrest. Pt achieved ROSC with CPR and Epinephrin. Pt Passed away on 09/07/2021 at 1330. Pt was in multisystem organ failure.
3/7/2021	1079976	NY	44	M	12/23/2020	12/23/2020	12/23/20 (Moderna #1) - Malaise, cough on 12/24, went to walk-in on 12/25 c/o cough, malaise, rx'd Augmentin x14d, Rapid covid negative (and PCR resulted negative). 12/27 slept all day, 12/28 back to work. 1/12/21 metallic taste in mouth, severe GI sx, malaise, aches, headache. 1/14 seen at walk-in and covid swabbed Negative. 1/21/21 exposed to parents who found out they were covid + on 1/22/21. 1/25/21 (Moderna #2) - Continued with persistent cough and GI sx. Then also developed urinary frequency and urgency. Seen at urgent care 2/1 c/o cough, dx URI, rx'd augmenting. Woke up morning of 2/2/21 abruptly, stood up, said something was wrong, and collapsed. CPR attempted immediately, EMS brought him to ER where he was pronounced dead.
3/7/2021	1080033	MN	93	M	1/14/2021	1/22/2021	COVID symptoms started within 8-9 days of vaccination. No fever, general not feeling, chills. Turned into very difficult breathing, low oxygen levels and pneumonia. Tested positive for COVID at Hospital ER on Wednesday, January 27. Died in the hospital Saturday morning, January 30, 2021.
3/7/2021	1080075	WA	61	M	2/25/2021	2/25/2021	Hemorrhagic stroke. = Death

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3/7/2021	1080431		67	M	2/25/2021	2/26/2021	Narrative: 67 year-old male received his 1st COVID vaccine dose at a clinic on 2/25/21 at ~ 11:45am. No known prior COVID infection. No history of vaccine allergies or allergies to any component of the COVID vaccine. Does have history of allergic reactions including hives, angioedema or anaphylaxis to some medications (neomycin, Neosporin, bacitracin) and environmental allergens (yellow jackets, fir trees). Patient reported previously daily use of diphenhydramine (2 caps every morning) and kept an epi-pen on hand. The afternoon of 2/26/21, patient presented to his neighbor's house requesting assistance with an epi-pen. Neighbor reported significant swelling around tongue and lips, and ability to faintly speak. Neighbor administered epi-pen, but unsure if it worked, so administered a 2nd epi-pen. Within a minute or two after the 2nd dose, patient slumped over and became non-responsive. EMS was called and neighbor began CPR. EMS reported that patient was non-responsive upon arrival. A King airway was placed and a Lucas device used for chest compressions. Three rounds of epinephrine were administered during transport to the local emergency room. Patient remained unresponsive with evidence of PEA during transport. Arrival at the ER occurred ~ 4:25pm. On arrival patient noted to be unresponsive with CPR in progress. Dose of epinephrine administered ~ 3 minutes after arrival in ER. No femoral pulse palpable, cardiac monitor did show some electrical activity. Evaluation of oral cavity showed significant swelling of tongue. Additional dose of epinephrine given. Patient remained with no palpable central pulse and showed continued evidence of PEA. Patient was estimated to have been down > 45 minutes. Patient pronounced deceased at 4:59pm.
3/7/2021	1080433		89	M	1/25/2021	2/7/2021	unknown cardiovascular event
3/7/2021	1080435		62	M	2/27/2021	3/1/2021	DEATH Narrative: 61 y.o. male with pmh afib, substance dependance, renal failure, recent admissions in the community for acute hypotension and acute kidney injury (11/2020 & 2/2021). Was found deceased in his apartment on the afternoon of 03/01/2021. Request sent to ME office for report if one exists. Patient was listed as having no known allergies.

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3/7/2021	1080432		64	M	2/27/2021	3/3/2021	Death Narrative: On 3/3/21 an MSA from the Decedent Affairs Office received a call from the Office of the Chief Medical Examiner. The ME office informed the MSA that an autopsy was conducted on 3/2/21 and is pending results. No further information was given. A clinical review was conducted by the PCP but no conclusions could be made until autopsy results are received. The Office of Decedent Affairs will be reaching out periodically to the ME's office to retrieve these results. This Issue Brief will be updated by 3/17/21.
3/6/2021	1078239	MN	77	F	3/6/2021	3/6/2021	Death. Ruptured myocardial infarction.
3/6/2021	1078246	MN	76	F	3/1/2021	3/1/2021	Death. Ruptured myocardial infarct.
3/6/2021	1078352	IL	18	M	3/2/2021	3/5/2021	Developed fatigue, body aches, headache 1 day after vaccination on 3/3. The morning of 3/5 complained of chest pain. Took Tylenol at 8:30 am. At 10:30 am his family found him unresponsive. EMS was called and he was pronounced dead in the home.
3/6/2021	1078618	CT	84	F	1/19/2021	1/25/2021	She was week, fell, wouldn't eat, drink or get out of bed. Died after being sent to hospital 3 times and ended up on hospice
3/6/2021	1077452	MN	92	F	2/27/2021	2/28/2021	Death felt a little sick 1 day after shot 2/28/21, felt worse next day 3/1/21 was weak, she was found dead am 3/2/21 on the floor in her bedroom 1/2 way between bathroom and bed.
3/5/2021	1075388	IA	81	F	2/15/2021	2/16/2021	The day after the shot she developed fever for 2 days as high as 101. She developed a pruritic burning rash to posterior right leg extending down the lateral lower leg. She had fatigue and myalgias. Diagnosed with shingles on 2/23. and informed to not receive the 2nd vaccine. She presented to the Emergency room on 2/27 with fatigue, numbness right side of the face, no reports of shortness of breath or chest pain. Ambulated in to ER. After her work up she was discharged home - she present back to the ER within 30 minutes. PTA arrival at the ER for the 2nd time - she complained of left neck and arm pain - then went unconscious. She arrived to the ER in full arrest - pronounced deceased after resuscitation efforts were not effective

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3/5/2021		1075042		90	F	1/29/2021	3/4/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/5/2021		1075057	IL	91	M	1/25/2021	2/12/2021	death
3/5/2021		1075090	IL	96	M	1/25/2021	2/23/2021	death
3/5/2021		1075097	NY	87	F	2/15/2021	2/16/2021	Pt received initial dose on 1/5/21, diagnosed with COVID-19 on 1/8/21, treated with monoclonal antibodies on 1/13/21. Pt experienced CHF exacerbation, anasarca, and renal failure during acute illness. Pt also treated for pneumonia during this time. Pt was considered terminal status on 1/25/21. She received second COVID-19 vaccine on 2/15/21. Pt then experienced increased difficulty eating and taking medications this same day, in addition to hallucinations she was experiencing. Patient subsequently died on 2/16/21.
3/5/2021		1075211	NH	85	F	1/29/2021	2/9/2021	2/9/2021 Expired at facility. Several weeks prior with several medical and mental health issues as noted prior. 2/4 began with increased lethargy and somnolence. Medications being held per MD. 2/5 CBC WNL, BUN/Cr 38/1.23 GFR 41 2/5 Admitted to Hospice services on 2/5.
3/5/2021		1075296	OH	69	F	3/2/2021	3/3/2021	Patient was found dead this morning.
3/5/2021		1075354		93	M	1/7/2021	2/26/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/5/2021		1075017	IL	85	F	12/30/2020	2/9/2021	death
3/5/2021		1075407		64	F	2/12/2021	3/1/2021	Patient passed away within 60 days of receiving the COVID vaccine series
3/5/2021		1075412	NY	94	M	1/26/2021	2/24/2021	Pt with underlying COPD and chronic respiratory failure requiring BIPAP. Pt had cardiopulmonary arrest on 2/24/21 and died as a result. Pt was overall palliative-focused plan of care.
3/5/2021		1075608	NJ	72	F	3/3/2021	3/4/2021	Patient waited 15 mins after covid vaccination on Wednesday 3/3, cleared by EMT to leave. I was notified by nurse at the senior building where patient resides that she had expired Thursday evening at home. Paramedics were called. No other additional information.

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3/5/2021	1075620	NY	91	M	1/5/2021	1/22/2021	Patient became acutely ill on 1/15/21 with recurrent pneumonia, treated with Augmentin. Pt became progressively worse on the next 48-72 hours, treatment goals changed to palliative-focused, and all treatments withdrawn. Patient died on 1/22/21.
3/5/2021	1075636	NH	82	F	1/8/2021	1/21/2021	1/21/2021 During Covid 19 outbreak on the unit, resident contracted the virus. 1/21 MD updated on increased weakness, twitching, fatigue noted today. 2 rapid covid-19 tests done today, both negative. new orders cbc with diff, BMP, d. dimer stat and swab for covid and Influenza. 1/21-Covid and Influenza swab results received. PCR-Influenza negative, covid-19 positive. Palliative care updated. 1/21-Labs drawn cbc, BMP, d. dimer Results WNL. Temp 101.2 and Occ dry cough. 1/22 Palliative MD and APRN visited. Family preference for no hospitalizations, no IV's and do not intubate. DNR. Admitted to Hospice services on 1/25. 1/21-1/29. Symptomatic with lethargy, occ cough, off and on temp and began refusing meals and meds at times. 1/31 periods of apnea. 2/1 precautions ended for Covid 19. Continued with Hospice care and with ongoing refusal of meals, condition declining and comfort maintained. Meds slowly discontinued. Expired at facility on 2/18/2021.
3/5/2021	1075298	NY	98	F	1/4/2021	1/17/2021	Pt had worsening altered mental status, tachypnea, and low-grade fever on 1/13/21. Pt considered terminal status previously and comfort-focus care pursued. Suspected pneumonia vs. TIA/CVA. PO meds D/C'ed as patient could no longer swallow.
3/5/2021	1074788		24	F	2/1/2021	3/4/2021	At 8 weeks pregnancy (2 weeks after first shot) started bleeding and had a subchorionic hematoma. By 10 week subchorionic hematoma resolved. Received second shot and of Feb. 1 week later, at 12 weeks pregnancy , fetus had no heart beat! It measured normal size (as expected) and limited normal first trimester anatomy by ultrasound. But NO heart beat. Something insulted this placenta to lead to fetal demise.

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3/5/2021	1075639	MD	53	M	2/27/2021	3/1/2021	<p>Patient is a 53 year old man with a past medical history of follicular lymphoma diagnosed in 2008, more recently with DLBCL with CNS involvement (involving hypothalamus; dx 8/2018; s/p HD MTX, s/p BMT- followed by Dr.), autoimmune hepatitis, obesity, adipic DI, central hypothyroidism and type 2 DM who presented to Hospital via EMS after a fall at home with multisystem organ failure leading to intubation in the ED and subsequent transfer to Oncology ICU for further management. He was in his usual state of health until Sunday. On Saturday he got COVID vaccine at 4pm, that evening he had no issues. Sunday night around 10pm he didn't make complete sense and his wife was concerned because of his history of DM and treated CNS lymphoma. BG was 320-340 at that time. Monday he was good and Monday night he started to have shaking of his left hand. Tuesday he had one episode of diarrhea. Later he was more shaky in the shower and he started to fall and his wife was unable to grab him and he slid down the wall and could not get up. Family was called to help and he was not making sense so they called EMS. Wife reports that he was down approximately 3 hours before EMS was able to get him up. In EMS he was noted to have a large area of skin desquamation from the right posterior knee to the ankle. His GCS was 15. He had stable blood pressure and heart rate. He was hypoxia to the 50s and oxygen was applied. In the ED he was found to be in multisystem organ failure and was intubated and had rapid progression of shock requiring Epinephrine, Levophed and Vasopressin. Crash lines were placed and he was sent to hospital. Upon arrival he was noted to have a cold pulseless right lower extremity and surgery was called. He was evaluated by Trauma Surgery, Orthopedic surgery and Vascular surgery and eventually underwent above the knee amputation. Unfortunately they were not able to remove all nonviable tissue and he continued to deteriorate. He was taken level 1 back to the OR and an additional 10 cm of nonviable tissue was removed. Unfortunately upon arrive he suffered cardiac arrest in the setting of severe lactic acidosis and hyperkalemia.</p>
3/5/2021	1074271	CA	74	F	2/28/2021	3/2/2021	<p>altered mental status, acute on chronic thrombocytopenia, death</p>

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3/5/2021		1074361	PR	93	F	2/25/2021	2/26/2021	General malaise, acetaminophen was given every 6 to 8 hours
3/5/2021		1074401	PR	100	F	2/25/2021	2/26/2021	General malaise, acetaminophen was gives every 6 to 8 hours
3/5/2021		1074599	MN		M	2/2/2021	2/3/2021	Death; A spontaneous report was received from a other health care professional concerning a 57-year-old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and died. The patient's medical history included chronic obstructive pulmonary disease (COPD). Concomitant product use was not provided. On 02 Feb 2021, prior to onset of the events, the patient received his first of two planned doses of mRNA-1273 (Lot number: 043L20A) in the left arm for prophylaxis of Covid-19 infection. 03 Feb 2021, it was reported that the patient died. The patient was not experiencing any symptoms prior to death. He was on hospice care, not hospitalized. No further information was provided. Treatment information was unknown. The cause of death was not reported. Plans for an autopsy were unknown. Action taken with the mRNA-1273 in response to the event was not applicable.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown
3/5/2021		1075035		85	F	2/23/2021	3/4/2021	sudden cardiac arrest and death
3/5/2021		1074784	GA	82	F	1/14/2021	1/15/2021	Nurse called clients' son to remind her of the second dose needed and was informed that client had passed away from Pneumonia the Sunday after she received the vaccine 1/17/2021.
3/5/2021		1075024		82	F	2/11/2021	2/27/2021	Death
3/5/2021		1074873	MD	82	F	12/29/2020	2/10/2021	Patient had COVID pneumonia in January 2021. Readmitted 2/10 for nausea/vomiting found to be in DKA. Treated with IV insulin, fluids, pressors and admitted to ICU. DKA resolved but continued to have ongoing nausea and dysphagia. EGD showed possible candidiasis, GI symptoms started to improve and was discharged home 2/24 with O2, life care, home health care. Patient recorded deceased 02/26/2021.

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3/5/2021	1074894	NY	94	M	1/26/2021	2/11/2021	Patient became ill with pneumonia on 1/29/21 and then recurrent pneumonia on 2/10/21. Pt's plan of care was subsequently changed to comfort-focused on 2/11/21 and patient was deceased that same day.
3/5/2021	1074903	AL	90	M	2/27/2021	3/1/2021	caller (son) stayed w/ the pt for about an hour after he received the vax and the pt stated the only symptoms at that time was some achiness on the arm around the injection site. Son went home after that. He tried to contact him on 3/1/2021 but wasn't able to reach him. On 3/2/21 the brother tried to contact him and wasn't able to reach him. They contacted the police dept on 3/2/2021 around 8:00 AM to do a well check. Pt was found on the couch like he had fallen asleep but was deceased. They suspect he probably expired on 3/1/2021. No autopsy will be conducted per the son.
3/5/2021	1074955	OK	82	M	2/13/2021	2/14/2021	at midnight client got up to go to the bathroom. His legs became weak and he fell and hit his head on the wall. He called for his wife and said he didn't feel right. He denied any pain. She called EMSA and he stopped breathing while she was waiting on them. She gave him CPR with instructions from the dispatcher. He was pronounced dead at 1:30am. She has tried to call the clinic 3 times and left messages and no one has called her back, Her PCP told her this needed to be reported .
3/5/2021	1074982	IL	90	F	12/29/2020	12/29/2020	death
3/5/2021	1075363	CA	69	M	2/25/2021	2/26/2021	Death due to Moderna 2nd dose, pulmonary thromboembolism
3/5/2021	1074753	RI	79	F	2/11/2021	2/20/2021	Pt. had a cardiac arrest and expired on 2/20/21.
3/5/2021	1077297	GA	91	M	3/5/2021	3/5/2021	He collapsed and went into cardiac arrest
3/5/2021	1077008	CO	89	F	2/26/2021	2/26/2021	Per patient's daughter the patient had severe flu like symptoms, shaking, extreme pain in wrists/fingers/feet. Patient collapsed at home and pronounced dead at scene.
3/5/2021	1077014	AK	74	M	2/5/2021	2/1/2021	Death

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3/5/2021	1077021	OR	77	M	2/6/2021	2/9/2021	Patient passed away three days after receiving the vaccine.
3/5/2021	1077053	CA	77	M	2/17/2021	2/21/2021	Patient received the first shot on 2/17/21. Nothing seemed unusual during the following days; no complaining of soreness or anything. He hadn't introduce any new medicine or food into his routine. On the morning of 2/21/21, he woke up around 5 AM as usual. He spoke with his wife for a bit. Around 7:00 AM, he started having trouble breathing. He asked for help from family members. 911 was called. EMT's preformed heart compressions for about 45 minutes before pronouncing patient deceased. During EMT's initial encounter, EMT's struggled getting a tube down patient's throat due to his tongue being swallow
3/5/2021	1077079	CA	77	F	3/5/2021	3/5/2021	Patient was alert and oriented with no signs or symptoms of sickness prior to immunization for 2nd dose of Pfizer COVID19 vaccine. Temperature 98.7. Patient under hospice care and DNR status for wound care (coccyx). Patient has no recollection of first dose, but no adverse reactions to first dose per her caregivers. Patient did not appear to have any adverse reactions to the vaccine after the 15 minute observation period. About 1 hr after vaccine administration, patient was reported deceased. No signs of swelling or allergic reaction at site of injection.
3/5/2021	1077148	TX	64	M	3/5/2021	3/5/2021	It was reported to us that at @1822 the patient sustained a Seizure at home. EMS was called and arrived to initiate CPR. CPR was performed but the patient was declared deceased by EMS at his home.
3/5/2021	1076949	OR	22	F	1/29/2021	2/22/2021	Patient admitted on 2/21/21 and died in hospital on 2/22/2021. Patient had a significant, lifelong underlying medical condition.
3/5/2021	1077236	IL	94	F	3/1/2021	3/1/2021	Family states patient had been coughing and was weak after the vaccine. Patient walked to the bathroom and then fell striking her head found in PEA with agonal breathing. Despite aggressive CPR medications patient remained in asystole. Unknow if Moderna or Phifzer

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3/5/2021		1077275	FL	84	F	2/15/2021	2/16/2021	At about 11:00 am which was about 22 hours after receiving 2nd dose of Moderna patient exhibited difficulty breathing and soon breathing became more difficult to point where her shoulders were lifting to breathe. At 6:45 pm she passed away.
3/5/2021		1080425		74	M	2/11/2021	2/20/2021	Narrative: Patient with h/o ESRD on HD MWF, HTN presented to ER on 2/20/21 with worsening dyspnea and GI symptoms; tested positive for COVID-19. Patient had received first COVID vaccination approx. 9 days prior. Patient admitted to ICU for treatment of COVID+ PNA. During admission, patient often could not tolerate removal of fluid during HD d/t tachycardia. He received dexamethasone, convalescent plasma for COVID. Patient underwent TTE which was notable for septal wall motion abnormalities and grossly reduced EF. Admission also c/b acute liver injury, possible cholecystitis, thrombocytopenia, SVT, encephalopathy. Patient then developed progressive shock and hemodynamic instability on 3/2 and passed away on 3/2/21.
3/5/2021		1080427		88	M	1/12/2021	1/13/2021	Narrative: above in section "Other relevant history~~
3/5/2021		1080428		74	M	2/23/2021	2/24/2021	DEATH Narrative: 73 y.o. male with pmh severe COPD, CAD, HTN, hypothyroidism, OSA treated with CPAP, obesity. Noted to have engaged with Pulmonary clinic in December 2020 for worsening respiratory status. No PFTs since 2015. Was found slumped over deceased in his home on the afternoon of 2/24/2021. Medical Examiner notified. Request sent to ME office for report if one exists. No drugs or alcohol were found on the scene and no sign of trauma. Hypertensive cardiovascular disease were reported as an adequate cause for death. "pathologist" reported that Covid vaccine does not need to be listed as it was "more than 24 hours since the shot".
3/5/2021		1080429		84	M	2/10/2021	2/11/2021	DEATH Narrative: no documentation regarding any immediate reaction after vaccine administration. 83 y.o. male with pmh severe pulmonary hypertension, s/p TAVR last year, severe asbestos related lung disease on chronic oxygen, recently started on palliative care. Was found by daughter deceased on the morning of 2/11/2021. Autopsy declined by family.

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3/5/2021	1075349	IL	103	F	1/25/2021	2/25/2021	death
3/5/2021	1075657	WI	94	F	3/1/2021	3/1/2021	Resident was having back pain but did have previous back pain prior too.
3/5/2021	1077227	GA	84	F	2/24/2021	2/26/2021	nausea and diahhrea
3/5/2021	1076158	PA	69	M	2/24/2021	2/24/2021	Patient was found dead at his home on 2/25/2021. He was last seen at home by his sister at 8:30pm on 2/24/21.
3/5/2021	1075710	NH	96	F	1/29/2021	2/6/2021	2/6/21 Sent to ER for evaluation of agitation and returned a few hours later on 2/7/21 with no acute findings. 2/7/21 continued with agitation and restlessness and had psychoactive medication changes 2/8/21 Had head CT with no acute findings 2/11/21 MRI of lumbar spine with compression fx T10 2/17/21 UA and KUB done with no acute findings Multiple falls within this time frame with escalating agitation, restlessness, and insomnia. Dx psychosis and started on Seroquel 2/25/21 3/2/21 Patient died
3/5/2021	1080424		88	M	1/12/2021	1/13/2021	Narrative: above in section "Other relevant history~~
3/5/2021	1076919	PA		F			died of an heart after the vaccine/Heart attack; This is a spontaneous report from a contactable consumer received from a Pfizer-sponsored program. This consumer reported similar events for 3 patients. This report is the 1st of 3. A female patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient experienced heart attack on an unspecified date. The patient died of an heart attack after the vaccine on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: died of an heart after the vaccine/Heart attack
3/5/2021	1075871	TX	89	F	2/2/2021	2/4/2021	She was vaccinated on 2/2/21 and started feeling bad on 2/4/21. She was treated by her doctor, improved somewhat, got worse, then went to the hospital on 2/16/21. She died on 2/20/21.

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3/5/2021		1076017	CA	86	M	3/4/2021	3/4/2021	elderly diabetic man with AFib/RVR who presented with multiorgan failure few hours after receiving his 2nd COVID shot today and ultimately expired. he did well after the 1st COVID shot and subsequently developed this multiorgan failure after the 2nd shot. had his second COVID vaccine shot around 4 pm, went home and collapsed, lay on the floor for a few hours refusing to call paramedics, eventually wife called 911, he arrived to ED and was dead a few hours later. -on arrival the pH was 6.7, agonal breathing, low BP, lactate 18, but no MI, no stroke, no apparent infection/sepsis. important to note that he had a covid vaccine just a few hours from collapsing and dying.
3/5/2021		1075725	WI	99	M	3/1/2021	3/2/2021	Resident started have chest pain on 3/02 and on 03/03 he was lethargic and wasn't eating or drinking Resident was on Hospice
3/5/2021		1076162	MO	81	M	1/11/2021	1/15/2021	Patient received vaccine on 1/11/2021. Patient passed away 1/15/2021, cause not reported, unaware if related.
3/5/2021		1076915			F	1/19/2021	1/21/2021	(name) is now dead 2 days after receiving a COVID mRNA shot; This is a spontaneous report from a non-contactable other non HCP. A 28-years-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 19Jan2021 at single dose for Covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient is now dead 2 days after receiving a Covid mrn (as reported) shot in Jan2021. She died two days later, according to her mother. 28 year old daughter took the vaccine on a Tuesday (on 19Jan2021) and was dead by Thursday (on 21Jan2021). Outcome of event was fatal. Autopsy shows no other red flags (as reported). The reporter has assured us he will get to the bottom of this vaccine crap. Anything attached should be red flag (as reported). No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: (name) is now dead 2 days after receiving a COVID mRNA shot
3/5/2021		1076188	NC	65	M	2/20/2021	2/20/2021	Out of hospital cardiac arrest and refractory shock, acute kidney injury, shock liver, respiratory failure leading to death

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3/5/2021	1076911	CA	101	F	2/8/2021	2/12/2021	passed away shortly after her vaccine; started dealing with signs that are common with a stroke; developed swelling in her arms; This is a spontaneous report from a contactable consumer report for grandmother. A 101-year-old female patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number=EM9809) via an unspecified route of administration in left arm on 08Feb2021 04:30 AM at single dose for covid-19 immunisation. Medical history included elderly. No covid prior vaccination. No other vaccine in four weeks; No other medications in two weeks. On 12Feb2021 12:00 AM, patient passed away shortly after her vaccine. She started dealing with signs that are common with a stroke. Event considered Life threatening illness (immediate risk of death from the event). She also developed swelling in her arms. No treatment received, patient not recovered from stroke and swelling arm. The patient died on 12Feb2021. No covid tested post vaccination. It was unknown if an autopsy was performed.; Reported Cause(s) of Death: passed away shortly after her vaccine
3/5/2021	1076918	PA		F			chest pain; This is a spontaneous report from a contactable consumer from a Pfizer-sponsored program. A female patient in her 50s received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) at single dose for COVID-19 immunisation on unknown date. Relevant history and concomitant drug was unknown. The patient died after experiencing chest pain for 2 weeks post vaccination. The outcome of event was fatal. It was unknown if autopsy done or not. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Chest pain

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3/5/2021	1076912			U			died from COVID after receiving the two doses of the vaccine; COVID; This is a spontaneous report from a contactable consumer report for a friend. A patient of unspecified age and gender received first dose and second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE) both via an unspecified route of administration on unspecified dates at single doses for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The consumer mentioned her friend died from COVID after receiving the two doses of the vaccine. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: died from COVID after receiving the two doses of the vaccine
3/5/2021	1080430		59	M	1/27/2021	2/14/2021	Death Narrative: Death was not determined to be related to COVID vaccination. COVID vaccination (dose 1) occurred on 1/27/21 with no noted side effects. Death occurred on 2/14/21.
3/5/2021	1076917	PA		F			one died after the vaccine; This is a spontaneous report from a Pfizer-sponsored program. This contactable consumer reported that a female patient of an unspecified age received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The reporter reported 3 females died post vaccination with the Pfizer-BioNTech COVID-19 vaccine. She explained one died after the vaccine on an unspecified date. She explained she had no additional details on the adverse event. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: one died after the vaccine
3/5/2021	1075917	HI	93	M	2/9/2021	2/13/2021	WE CALLED PATIENT ON 3/2/21 BECAUSE HE HAD NOT SHOWED UP FOR HIS 2ND DOSE. THE PERSON WHO ANSWERED THE PHONE NOTIFIED US THAT PATIENT PASSED AWAY AT MEDICAL CENTER ON 2/13/21.

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3/4/2021	1071300	OH		F			<p>Died; A spontaneous report, was received from a consumer on a social media, concerning a 38-years-old female patient, unknown race and ethnicity, who was administered Moderna's COVID-19 vaccine (mRNA-1273), and died. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unknown date, prior to the onset of the event, the patient received dose of mRNA-1273 (Lot number: unknown), for the prophylaxis of COVID-19 infection. On 17-Feb-2021, social media interaction was posted concerning a death of a patient on an unknown date after receiving Moderna vaccine. No treatment information was provided. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on an unknown date. The cause of death was not provided. Plans for autopsy were not provided.;</p> <p>Reporter's Comments: Very limited information regarding the event of death has been provided at this time. No further information will be available.;</p> <p>Sender's Comments: MODERNA, INC.-MOD-2021-018380:Same reporter; Reported Cause(s) of Death: Unknown cause of death</p>

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3/4/2021	1071367	GA	81	M	2/11/2021	2/11/2021	<p>Blood pressure went down until he died; Couldn't hear his heartbeat; neck was sweating; He was cold; Couldn't get up; Death; Sick; immediately very tired; he was tired; Hands were shaking; Slept for too long; A spontaneous report was received on 18 Feb 2021 from a consumer concerning a 81-years-old, male patient who received Moderna's COVID-19 vaccine and developed immediately very tired, hands were shaking, neck was sweating, was cold, sick, couldn't get up, couldn't hear his heartbeat and blood pressure went down until he died. Patients' medical history, as provided by patient's spouse, was emergency room(ER) admission in November 2020 because he had a congested chest (he had fluid around his heart). At that time, they gave him pills for kidney function. Other concomitant medication reported was Coumadin, blood thinner. Two weeks before receiving the vaccine, patient's EKG was normal. On 11 Feb 2021, in the morning, patient received their first of two planned doses of mRNA-1273(BATCH/LOT # 007M20A) probably in the right arm for the prophylaxis of COVID-19 infection. On 11 Feb 2021, approximately after 15 minutes of receiving vaccine, they left and patient was immediately very tired, his hands were shaking. So, patient's spouse made them down sleep for too long. On Friday, 12 Feb 2021 she tried to pick him up, but he was tired, exhausted, and sick. On Saturday, 13 Feb 2021, she brought him a coffee and he couldn't hold it because his hands were shaking, so she gave him the coffee and then made him pee on the bed because he couldn't get up. At lunch time she made him eat something and he fell sleep again. His wife was hanging around him all day and around 7:30pm she realized that he was cold, and his neck was sweating, she couldn't hear his heartbeat. So, she called emergency services and when they arrived, her husband's blood pressure went down until he died. Treatment for the events were not provided. Action taken with mRNA-1273 was not applicable. Patient was pronounced dead on 13 Feb 2021 20:00. The cause of death was not provided. The plans for an autopsy were not provided. The events of blood pressure went down until he died and couldn't hear his heartbeat were fatal. The outcome for the remaining events were unknown.; Reporter's Comments: This case concerns an 81 year old, male patient, who experienced a serious event of death among others, 2 days after</p>

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								receiving mRNA- 1273 (Lot# 007M20A). Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death
3/4/2021		1071618	NY	92	F	1/6/2021	1/7/2021	Chills; headache; extreme fatigue; gas or chest pain that was thought to be gas and went away Died 4 days later
3/4/2021		1071741	MI	83	M	2/24/2021	2/26/2021	He started vomiting 2 days later. we suspect he was having stool issues as well. he vomited blood at some point over the weekend. there was black vomit right before he passed. from 2am-6am he was wheezing and rattling and then he passed at approximately 6am 3/1/2021 at home. EMS did come and try to revive him and were unsuccessful.
3/4/2021		1071903	LA	63	F	2/26/2021	2/28/2021	No reported adverse effects after vaccine was administered. Someone reported to our clinic that patient was found dead at home on Sunday
3/4/2021		1071139			F	1/12/2021	1/13/2021	Sudden death; A spontaneous report was received from Pfizer concerning a 60-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 12 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 13 Jan 2021, the patient was found to be deceased at 3:00 am. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 13 Jan 2021. The cause of death was unknown/not reported. Plans for an autopsy were unknown/not provided. .; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021	1072156	CA	68	M	2/22/2021	2/23/2021	Vaccine manufacturer and lot number unknown, vaccine given at alternate location. 2/23/21 8:27 PM: The patient is a 68-year-old male comes to the emergency department by paramedic ambulance for altered mental status that, began at around noon in association fever temp 102.9. PMH of myelofibrosis (on Jakafi and hydroxychloroquine), depression, anxiety, OSA, and history of AVR. Given history of myelodysplasia and Jak inhibitor predisposing to some opportunistic infections most notably viral reactivation with history of HSV and possible bacterial endocarditis he was admitted to the ICU for further monitoring and pressors. Patient has a MOS procedure 14 days prior - Status post MOSs procedure with large wound deficit on forehead -- Does not appear to be overtly infected at the time of admission. ED physician indicated mild facial cellulitis. 2/23/21- WBC 16.1 on admission. ECHO 2/26 indicated - no vegetation visualized. Of note second COVID vaccine 2 days prior to admission. Dr. felt incident was possible cardiogenic shock secondary to COVID vaccine. He did not feel the patient has a source of infection upon admission. Questionable given wounds on forehead Dr. (CMO) review of case- his impression was septic shock with and underlying case of chronic cardiac compromise making the hemodynamics worse
3/4/2021	1071935	IA	28	M	3/3/2021	3/3/2021	Patient received the vaccine around 11 am. He hadn't been feeling well (headache, dizziness) per report and initially called in to work. He then decided to come to work and was found down in a patient bathroom during his shift on our Facility while taking care of a patient (he was a nurse aid). Patient was coded and the team and was transferred to our Facility ED. He expired 3/3 2112
3/4/2021	1072113		44	M	2/12/2021	2/14/2021	Death
3/4/2021	1071863	NH	101	F	1/4/2021	1/6/2021	Patient, age 101, was having a period of declining health prior to vaccine administration. This continued after the vaccine to include increased pain, inability to swallow and ultimately Patient passed away on 1/9/2021. The physician does not believe this is due to vaccine administration, however family asked that this information be reported for record keeping.

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3/4/2021	1071138			M	1/5/2021	1/8/2021	Sudden death; A spontaneous report was received from Pfizer concerning a 60-year old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 05 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 08 Jan 2021, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 08 Jan 2021. The cause of death was unknown/not reported. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding the event has been provided at this time and is insufficient for causality assessment. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1071137			F	12/30/2020	1/4/2021	Unresponsive; A spontaneous report was received from Pfizer concerning a 58-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 30 Dec 2020, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 04 Jan 2021, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 04 Jan 2021. The cause of death was unknown/not reported. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021		1071136			F	1/4/2021	1/11/2021	sepsis; respiratory failure; Fever; Unresponsive; A spontaneous report was received from Pfizer concerning a 56-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced respiratory failure, sepsis, fever and sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 04 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 11 Jan 2021, the patient began to have a fever. She was sent to the emergency room for evaluation. That evening, she died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 11 Jan 2021. The cause of death was reported as respiratory failure and sepsis. Plans for an autopsy were unknown/not provided.; Reporter's Comments: This is a case of 56-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced sepsis, fever, respiratory failure and sudden death. Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Respiratory Failure; Sepsis
3/4/2021		1071135			F	1/8/2021	1/9/2021	Unresponsive; A spontaneous report was received from Pfizer concerning a 56-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 08 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 09 Jan 2021, the patient was found deceased in her home. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 09 Jan 2021. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021	1071134			F	12/23/2020	1/8/2021	Death; A spontaneous report was received from a reporter concerning a 56-year old female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and had experienced death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 23 Dec 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 08 Jan 2021, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 08 Jan 2021. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1071130			M	12/28/2020	12/29/2020	Unresponsive; A spontaneous report was received from Pfizer concerning a 45-year old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 28 Dec 2020, approximately 24 hours prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 29 Dec 2020, the patient was found deceased at home. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 29 Dec 2020. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021	1071129			M	1/8/2021	1/9/2021	Unresponsive; A spontaneous report was received from Pfizer concerning a 43-year old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 08 Jan 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 09 JAN 2021, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 08 Jan 2021. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1071128			F	12/28/2020	1/4/2021	Unresponsive; A spontaneous report was received from Pfizer concerning a 32-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 28 DEC 2020, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 04 JAN 2021, at 7:20 am, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 04 Jan 2021. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: This case concerns a 32-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The cause of death was unknown. Plans for an autopsy were not provided. Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1072166 VT		87	M	2/9/2021	3/2/2021	Patient hospitalized with shortness of breath and pneumonia (from 2/15/2021 to 2/21/2021) and patient died at another facility on 3/2/2021.

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3/4/2021	1071133			F	1/8/2021	1/8/2021	Unresponsive; A spontaneous report was received from Pfizer concerning a 52-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 08 Jan 2021, approximately 2 hours prior to the onset of event, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 08 Jan 2021, the patient was monitored for the appropriate amount of time by nursing staff, following vaccination. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 08 Jan 2021 at 2:15pm. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: This case concerns a 52-year old, female patient, who experienced a sudden death 1 day after administration of first dose of mRNA-1273. The cause of death was not provided. Plans for an autopsy were unknown. Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021	1071117			U	1/31/2021	2/7/2021	Passed away; UTI; Abnormal bleeding; A spontaneous report was received from a healthcare professional concerning a patient who received the Moderna COVID-19 Vaccine (mRNA-1273) and experienced abnormal bleeding, UTI, and passed away. The patient's medical history included a long term history of anticoagulation therapy. Concomitant product use included anticoagulation therapy. On 31Jan2021 prior to the onset of the events the patient recieved their first dose of mRNA-1273 (Lot number:not reported) intramuscularly for prophylaxis of COVID-19 infection. On 07Feb2021, the patient complained of abnormal bleeding. Patient was seen at clinic on 10Feb2021 and was diagnosed with a UTI and given antibiotics. An INR was also completed that day due to patient having a long term history of anticoagulation therapy. Results of that showed the INR to be 12. Prior to vaccination, patient's INR was normal and no changes to medications and diet were made after vaccination and prior to complaint starting. On 12Feb2021 the patient passed away. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 12Feb2021. The cause of death was unknown. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns an 82 year old male patient, with history of long term anticoagulation therapy (unknown indication), who experienced a fatal event of death and abnormal hemorrhage, 13 days after receiving second dose of mRNA- 1273 (Lot# Unknown). Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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3/4/2021	1071132			M	1/7/2021	1/7/2021	chronic hypoxia respiratory failure; Unresponsive; A spontaneous report was received from Pfizer concerning a 51-year old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had developed hypoxia a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 07 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 07 Jan 2021, around 6:00 pm, the patient became increasingly hypoxic. He was transported to the hospital for acute on chronic hypoxia respiratory failure. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 12 Jan 2021 at 11:25pm. The cause of death was not provided/unknown. Plans for an autopsy were unknown/not provided.; Reporter's Comments: Very limited information regarding these events has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1073902	WA	80	F	1/29/2021	2/25/2021	Patient seemed otherwise healthy before the vaccination. Patient was hospitalized then shortly passed after getting the 1st dose.

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3/4/2021	1071131			F	12/31/2020	12/31/2020	Unresponsive; A spontaneous report was received from Pfizer concerning a 50-year old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and had a sudden death. The patient's medical history was not provided. No relevant concomitant medications were reported. On 31 Dec 2020, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) intramuscular for prophylaxis of COVID-19 infection. On 31 Dec 2020, the patient died. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 31 Dec 2020. The cause of death was unknown. Plans for an autopsy were unknown.; Reporter's Comments: This case concerns a 51 year old, female patient, who experienced an unexpected event of Death, after receiving 1st dose of mRNA- 1273 (Lot# unknown). Very limited information regarding this event has been provided at this time. There is no contact information and no further follow up information is expected.; Reported Cause(s) of Death: unknown cause of death
3/4/2021	1072218	VT	82	M	2/13/2021	2/21/2021	Patient hospitalized for NSTEMI (from 2/18/2021 to 2/20/2021) and discharged on hospice/comfort care. Patient died 2/21/2021.
3/4/2021	1074067	MI	67	M	2/25/2021	2/26/2021	Patient received Moderna COVID-19 vaccine on 2/25/2021. Patient found dead by family the morning of 2/26/2021. Family requested an autopsy.
3/4/2021	1073895	WA	77	M	1/28/2021	2/22/2021	Patient passed away after getting the 1st dose of COVID vaccine. He seemed otherwise very healthy.
3/4/2021	1073816		85	M	1/9/2021	2/14/2021	RESPIRATORY FAILURE Narrative: PT PASSED AWAY WHILE IN THE HOSPITAL
3/4/2021	1073815		78	M	12/31/2020	1/14/2021	DEATH Narrative: NO DETAILS PROVIDED, NO NOTE REGARDING DEATH
3/4/2021	1073814		91	M	1/19/2021	2/7/2021	DEATH Narrative: NO ADDITIONAL DETAIL PROVIDED OTHER THAN PATIENT DIED AT HOME
3/4/2021	1073813		96	M	12/31/2020	2/5/2021	DEATH Narrative: UNCLEAR WHY PATIENT WAS HOSPITALIZED AS LIMITED INFORMATION IN RECORD

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3/4/2021	1073812		82	M	12/30/2020	1/23/2021	DEATH Narrative: PT WAS PLACED ON HOSPICE ON 1/21/2021
3/4/2021	1073808	CA	72	M	3/4/2021	3/4/2021	Prt was found deceased
3/4/2021	1073773	CA	89	M	3/2/2021	3/2/2021	Patient was found deceased later in the afternoon.
3/4/2021	1073092	IL	43	M	2/11/2021	3/3/2021	The decedent reported a continuous headache since receiving the vaccination. On March 3rd he suffered a cardiac arrest and was pronounced deceased.

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3/4/2021	1073682	NJ	80	M	1/28/2021	2/26/2021	pulmonary edema; Low heart rate; chest pain; This is a spontaneous report from a contactable pharmacist. An 80-years-old male patient received his second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), intramuscular in left arm on 28Jan2021 at single dose for COVID-19 Immunisation. Medical history included dementia, high blood pressure, COVID prior vaccination. He had no known allergies. Concomitant medication included diltiazem hydrochloride (CARDIZEM), anastrozole (ARIMIDEX), simvastatin and lorazepam. Historical Vaccine included first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on 07Jan2021 (at the age of 80-years-old) at single dose for COVID-19 Immunization. There was no other vaccine received in four weeks. The patient experienced pulmonary edema, low heart rate and chest pain on 26Feb2021. The events resulted in hospitalization and patient died. The patient was hospitalized from 26Feb2021 for 1 day. Treatment received for the events included Epinephrine, morphine, nitroglycerine. The patient underwent lab tests and procedures which included Covid test Nasal Swab post vaccination on 26Feb2021 indicated Negative. The patient died on 26Feb2021. An autopsy was not performed. information on the lot/batch number has been requested.; Sender's Comments: Pulmonary edema, low heart rate, and chest pain, all reported as fatal, are deemed unrelated to BNT162B2 vaccine, being rather accidental occurrences, likely favored by the patient's age and by the mentioned high blood pressure, known risk factor for cardiovascular diseases. 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: Low heart rate; pulmonary edema; chest pain
3/4/2021	1072763	PR	79	M	2/5/2021	2/5/2021	The same day that the person was vaccinated he started feeling dizzy and had difficulty breathing. He was hospitalized from February 5 to February 23. Patient died in the hospital on February 23, 2021

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3/4/2021	1072993	FL	90	F	2/4/2021	2/5/2021	Day After - severe headache, 2 days after headache continues, itchy scalp, day 3 rash visible at hair line headache continues, more confusion than normal, day 4 on site nurses check rash and think it is dermatitis, day 5 continues to get work nurse practitioner was to visit next day, day 6 NP thinks that she has UTI and sends her to hospital (2/11/21). Hospital determines - Rash is Shingles, UTI present, - MRSA is now present in shingles which is on right back of head and right neck and face. Next Sepsis is diagnosed. Since 2/11/21 patient was not conscious. 2/20/21 family is notified that she should be moved to Hospice. Moved to hospice on 2/20/21. The patient, my mother, died on 2/23/21 official cause of death is UTI.
3/4/2021	1073128	IL	95	F	1/22/2021	1/23/2021	Expired within 30days of vaccination. Received vaccine 1/22/21 did not have any complaints, during a bed check she was found on the floor with no apparent injury, no pulse or respirations.
3/4/2021	1073167	TX	54	F	2/11/2021	2/24/2021	She passed away 2/24/2021
3/4/2021	1073225	IL	73	M	2/2/2021	2/22/2021	Death within 30 days: Admit 2/8/21-2/13/21 s/p fall with left hip fracture (repaired), severe debility with recurrent falls discharged to SNF. Not doing well postop at the SNF, brought to ED due to failed foley insertion with bright red blood upon arrival to ER febrile, hypotensive, tachycardic, severe sepsis. Gran negative bacteremia likely from chronic ascites, family decided on comfort care and he expired within hours of admission.
3/4/2021	1073252	IL	73	F	2/17/2021	3/1/2021	Death within 30 days of vaccine
3/4/2021	1073283	IL	71	F	2/11/2021	3/1/2021	Death within 30 days of vaccination
3/4/2021	1073344	IL	102	F	12/30/2020	1/17/2021	patient died.
3/4/2021	1073361	IL	106	F	1/25/2021	2/19/2021	passed away

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3/4/2021	1073471			M			<p>Was found deceased a little less than 12 hours following COVID vaccination; A spontaneous report was received from a reporter concerning a 96-year-old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and was found deceased a little less than 12 hours following COVID vaccination. The patient's medical history included hospice care. No relevant concomitant medications were reported. On an unknown date, prior to the onset of the event, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, the patient was found deceased a little less than 12 hours following COVID vaccination, and he had had some changes over the last two days. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. On an unknown date the patient died. The cause of death was unknown. Plans for an autopsy were not provided.;</p> <p>Reporter's Comments: This case concerns a 96 year old male patient, who was on hospice care experienced a fatal event of death, after receiving mRNA- 1273 (Lot# Unknown). Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death</p>

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3/3/2021		1068308	MO	75	M	2/3/2021	2/13/2021	cardiac arrest due to pericardial effusion; cardiac arrest due to pericardial effusion; On 21Feb he went to the ER after vomiting and passing out; On 21Feb he went to the ER after vomiting and passing out; On 19Feb, he began to feel ill again with a fever. He felt worse on 20Feb; On 19Feb, he began to feel ill again with a fever. He felt worse on 20Feb; fever; headache; stomach upset; This is a spontaneous report from a contactable consumer reporting for the father: A 75-year-old male patient received the 1st dose of bnt162b2 (BNT162B2, Lot # EL3428) at single dose at left arm on 03Feb2021 for Covid-19 immunisation. Medical history included type 2 diabetes mellitus. No known allergies. The patient had not experienced Covid-19 prior vaccination. Concomitant medication in 2 weeks included amitriptyline hydrochloride (manufacturer unknown) 10 mg, atorvastatin (manufacturer unknown) 20 mg, dutasteride (manufacturer unknown) 0.5 mg, linacotide (LINZESS) 290 mcg, gabapentin (manufacturer unknown) 300 mg, montelukast (manufacturer unknown) 10 mg, ramipril (manufacturer unknown) 5 mg, insulin degludec (TRESIBA) 100 unit/ml, liraglutide (VICTOZA) 18 mg/3ml solution. No other vaccine in 4 weeks. The patient experienced cardiac arrest due to pericardial effusion on 21Feb2021 14:15, fever on 13Feb2021, headache on 13Feb2021, stomach upset on 13Feb2021, on 19Feb, he began to feel ill again with a fever, he felt worse on 20Feb on 19Feb2021, on 21Feb he went to the ER after vomiting and passing out on 21Feb2021. Events resulted in Emergency room/department or urgent care. Therapeutic measures were taken as a result of cardiac arrest due to pericardial effusion. Course of events: In Feb2021, 10 days after his 1st injection, the patient developed fever, headache, and stomach upset. He went for a rapid Covid-19 test (nasal swab) and it was negative on 11Feb2021. The doctor told him he might be having a delayed reaction to the vaccination. After a couple of days, he improved. On 19Feb2021, he began to feel ill again with a fever. He felt worse on 20Feb2021. On 21Feb2021 he went to the ER after vomiting and passing out and received treatment: IV fluids, diagnostic testing at ER. Rapid Covid test (nasal swab) at ER came back negative again on 21Feb2021. His heart arrested suddenly and he could not be resuscitated. CT scan results, that came back after death, showed Covid like pneumonia and

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								pericardial effusion. The patient died on 21Feb2021 14:15. Cause of death was cardiac arrest due to pericardial effusion. An autopsy was not performed. The outcome of cardiac arrest due to pericardial effusion was fatal, of fever, headache, stomach upset was recovering, of he began to feel ill again with a fever, he felt worse was not recovered, of he went to the ER after vomiting and passing out was unknown.; Reported Cause(s) of Death: cardiac arrest due to pericardial effusion; cardiac arrest due to pericardial effusion
3/3/2021		1068889		85	M	12/29/2020	1/25/2021	death Narrative: no other details available, as nothing documented in record
3/3/2021		1069009	PR	94	M	1/21/2021	1/30/2021	Several days after vaccination his left arm turned red. He was taken to the hospital where he was evaluated and admitted with a diagnosis of left axillary vein thrombosis. A chest X-ray was taken and he presented bibasilar atelectasis and pneumonia with pleural effusions.
3/3/2021		1068993	WA	48	F	1/23/2021	2/20/2021	Spontaneous intracerebral hemorrhage and death on 2/20/2021
3/3/2021		1068963	WA	85	F	2/17/2021	2/18/2021	approximately 24 hours post vaccine Patient developed a low grade fever of 99.5 and had increased fatigue. 48 hours later she had decreased neurological functioning. 02/23 she had difficulty swallowing. 02/23 She was admitted to hospice services. 02/26 she passed just before 10 am.
3/3/2021		1068931	MA	93	M	2/17/2021	2/28/2021	Case passed away on 2/28/21. During post vaccination monitoring, case did not have any adverse reactions. When writer spoke to him on 2/26/21 to schedule his second dose, he sounded well.

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3/3/2021		1068901	NH	67	F	1/30/2021	2/21/2021	ER admit for CP and Jaw pain, exhaustion, Aortic arteritis normal SED rate found on CT scan hospital admit IV medications required Solumedrol and Actemra questionable how much medications received d/t IV's not working. Released from care on 2/19 with prednisone . Symptoms still present off and on. 2/21 922pm CP Jaw Pain severe EMT's called EKG done reported no heart attack, pain better, EMTs left. 10/15 severe Pain collapsed with no pulse and no breathing, EMTs returned unable to obtain a shock-able rhythm time of death pronounced. reason for death on certificate Aortitis - hospitalist thinks aortic dissection d/t severe inflammation
3/3/2021		1068890		77	M	1/13/2021	2/11/2021	death Narrative: unclear of details, s/p spine surgery on 2/2/21 and discharged on 2/6/21
3/3/2021		1069118	IL	72	F	2/25/2021	3/1/2021	Within 10 minutes following the second vaccination, patient reported dizziness and nausea, had an episode of vomiting but recovered within 30 minutes. It was reported to our clinic that the patient was found deceased on March 1, 2021 at approximately 10 pm. Cause of death is not determined at this time.
3/3/2021		1068850	TX	70	F	2/26/2021	2/26/2021	Pfizer-BioNTech COVID- 19 Vaccine EUA: Wife of patient called Primary Care Physician to inform that patient had received dose #2 of Pfizer COVID vaccine, and later that evening experienced a seizure and expired.
3/3/2021		1068814	MO	66	M	2/16/2021	2/25/2021	9 days after vaccination, the patient was found deceased in his home, sitting on his couch. Determined to be due to pulmonary embolism.
3/3/2021		1068700	PA	77	M	2/25/2021	2/26/2021	Patient passed away 24 hours after receipt of 1st Dose Pfizer vaccine. Provider does not feel death was due to vaccination. but underlying conditions. No immediate side effects noted from vaccination.
3/3/2021		1068564	LA	80	M	2/26/2021	2/28/2021	On 3/2/2021, clinic was notified by patient's family that patient had deceased on 2/28/2021 from a heart attack. Unsure of any relation to the Moderna vaccine but reporting for due diligence.

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3/3/2021	1068295	OK		F			<p>Was admitted and tested positive and put on ventilator; She felt slightly ill the day of vaccine; 2 days later patient become ill; tested negative 2 times over the following 10 day while deteriorating; Patient died 10 days later; This is a spontaneous report from a contactable consumer via Pfizer Sales Representative. This consumer (daughter) was reported for a female patient (mother). A 76-year-old female patient received first dose of bnt162b2 (Pfizer), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunization. Medical history included lupus from an unknown date and unknown if ongoing. The patient's concomitant medications were not reported. The patient with lupus received 1st dose of vaccine. She felt slightly ill the day of vaccine. 2 days later patient become ill, tested negative 2 times over the following 10 day while deteriorating. Was admitted and tested positive and put on ventilator. Patient died 10 days later. Daughter thought she had COVID before vaccination. Event took place after use of product. The patient underwent lab tests and procedures which included COVID-19: negative (tested negative 2 times over the following 10 day while deteriorating), COVID-19: positive (Was admitted and tested positive and put on ventilator) all on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. The outcome of other events was unknown. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Patient died 10 days later</p>

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3/3/2021	1068357	IL	84	M	2/13/2021	2/13/2021	No pulse and no heart beat; couldn't wake him up; passed away; A spontaneous report was received from a daughter concerning a 84-year old, male patient who received Moderna's COVID-19 Vaccine (mRNA-1273) experienced no pulse or heartbeat, couldn't wake him up and passed away. The patient's medical history, as provided by the reporter, included high blood pressure and prostate cancer. No relevant concomitant medications were reported. On 19 Jan 2021, the patient had a blood pressure reading of 133/84 at a cardiology visit. On 13 Feb 2021, approximately 3 hours prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (batch number 031M20A) intramuscularly for prophylaxis of COVID-19 infection. On 13 Feb 2021 at 3:30 pm, the patient could not be woken up and was found with no pulse or heartbeat. Action taken with the drug in response to the events was not applicable. The outcome of the events, no pulse or heartbeat and couldn't wake him up, were not provided. The patient died on 13 Feb 2021. The cause of death was unknown.; Reporter's Comments: Very limited information regarding this event/s has been provided at this time. The patient's medical history of high blood pressure and prostate cancer remains the risk factors. The cause of death was unknown. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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3/3/2021	1068307			U			died; bled out; This is a spontaneous report from a contactable nurse. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient had bled out on an unspecified date with outcome of unknown. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The limited information provided precludes a full clinical assessment of the case. As a cautionary measure and for reporting purposes, and assuming a drug-event temporal association, the Company cannot completely exclude a causal association between the reported events 'bled out' and 'died' (death of unknown cause) and BNT162B2 administration, until sufficient information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate.;Linked Report(s) : US-PFIZER INC-2021210582 Same reporter/drug, different patient; Reported Cause(s) of Death: died

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3/3/2021	1068306			M	2/18/2021	2/18/2021	heart attacks; Collapse of lung; pulse was in the 130s/140s; passed away; nose and fingers turned gray and were cold to the touch; nose and fingers turned gray and were cold to the touch; his big toe had turned gray; his right foot was swollen; low grade fever; Shaking; extremely cold; This is a spontaneous report from a contactable consumer. An elderly male patient received the 2nd dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), via an unspecified route of administration, on 18Feb2021, at single dose, for COVID-19 immunisation. Medical history included ongoing blood magnesium decreased (went to the hospital on 17Feb2021). Concomitant medications were not reported. Previously the patient received the 1st dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), on 27Jan2021, for COVID-19 immunisation and experienced arm soreness. The patient experienced passed away (death, hospitalization, medically significant) on 23Feb2021, heart attacks (caused hospitalization, medically significant) on 20Feb2021 with outcome of unknown, collapse of lung (caused hospitalization) on 20Feb2021 with outcome of unknown, pulse was in the 130s/140s (caused hospitalization) on 19Feb2021 with outcome of unknown, low grade fever on 18Feb2021 with outcome of recovered on 23Feb2021, shaking on 18Feb2021 with outcome of unknown, extremely cold on 18Feb2021 with outcome of unknown, nose and fingers turned gray and were cold to the touch on 19Feb2021 with outcome of unknown, his big toe had turned gray on 19Feb2021 with outcome of unknown, his right foot was swollen on 19Feb2021 with outcome of unknown. The events his big toe had turned gray and his right foot was swollen required physician visit on 19Feb2021. They were reported as a result of the magnesium deficiency. On 19Feb2021 evening his fever increased and his nose and fingers turned gray and were cold to the touch. On 20Feb2021 he collapsed at home and was taken to the hospital by ambulance. He had several heart attacks prior to the collapse. They decided to put him in a medically induced coma and reduce his body temperature that evening and started dialysis on 21Feb2021. They returned his body to normal temperature on 23Feb2021, his pulse was in the 130s/140s. They were starting to reduce the sedatives on 23Feb2021. The patient passed away on 23Feb2021. It

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						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 away
3/3/2021	1068304	CT		M	2/10/2021	2/17/2021 died; This is a spontaneous report from a contactable consumer reporting for a patient. An 86-year-old male patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), on 10Feb2021 at single dose for COVID-19 immunization. Concomitant medications were not reported. Relevant medical history included bacterial infection, the patient was being treated for bacterial infection and had spent 1 week in hospital within one month prior to being dosed with vaccine. On 17Feb2021 the patient died. The cause of death was unknown. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: death
3/3/2021	1069140	PR		75 M	2/9/2021	2/10/2021 The day after the administration of the vaccine, the fever began, the patient claim that he had no blood pressure problems. He was given acetaminophen every 4 hrs. and vitamin C and D. On February 11, he was stabilized, he had his regular meals without any problem but in the afternoon his temperature rose again and they put him to bed. The patient died that same afternoon around 4:00 pm
3/3/2021	1068549	FL		87 F	2/10/2021	2/13/2021 2/13/21 Patient had covid like symptoms 2/15/21 Patient admitted to Hospital with covid like sx and decreased O2 sat; tested positive for Covid on 2/15/21; treated with Remdesivir and convalescent Plasma. Sx worsened and patient died 2/26/21..
3/3/2021	1070562	CA		77 M	3/1/2021	3/2/2021 The coroner called Dr. on 3.2.2021 to advise that he had a witnessed collapse and Mr. was taken to the ED where he was pronounced.
3/3/2021	1069026			74 M	2/5/2021	2/26/2021 Death Narrative: Family was able to be present at bedside shortly after patient was extubated. Fentanyl bolus given 10-15 minutes prior. Patient passed away soon after endotracheal tube removed. Time of death 10:14am.

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3/3/2021	1069235	AK	89	M	1/7/2021	2/28/2021	Death
3/3/2021	1070937	AL	81	M	2/18/2021	3/3/2021	Unwitnessed Cardiac arrest. ACLS protocols were performed. Cessation of resuscitation was called in the field by Dr.
3/3/2021	1070770	TX		U	2/4/2021	2/1/2021	Maternal exposure during pregnancy; Fetus stopped growing on 09Feb21 (8w4d); no heartbeat detected; This is a spontaneous report from a contactable consumer (parent). This consumer reported information for both mother and fetus. This is a fetus report. A patient of unspecified age and gender (fetus) received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL9269), transplacental on 04Feb2021 at 14:00 at single dose for COVID-19 immunisation. The patient medical history was not reported. Concomitant medication included ergocalciferol (VIT D), folic acid (FOLATE), ascorbic acid/betacarotene/calcium sulfate/colecalciferol/cyanocobalamin/ferrous fumarate/folic acid/ nicotinamide/pyridoxine hydrochloride/retinol acetate/riboflavin/thiamine mononitrate/tocopheryl acetate/zinc oxide (PRENATAL VITAMINS) and sertraline hydrochloride (ZOLOFT) at 25 mg, all transplacental. It was reported that OB exam on 03Feb21 showed healthy baby at 7weeks 5days heartbeat detected 152 bpm; no abnormalities identified via ultrasound; labs and hormone levels all within normal ranges. No issues detected. Mother received 1st dose of vaccine on 04Feb2021. Per ultrasound on 20Feb2021, fetus stopped growing on 09Feb2021 (8 weeks 4 days); no heartbeat detected. Miscarriage occurred on 22Feb2021. The fetus died on 22Feb2021. It was not reported if an autopsy was performed.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021204433 same drug and reporter, different patient and event; Reported Cause(s) of Death: Fetus stopped growing on 09Feb21 (8w4d); no heartbeat detected; Mother received 1st dose of vaccine 04Feb21. Per ultrasound on 20Feb21, fetus stopped growing on 09Feb21 (8w4d); no heartbeat detected. Miscarriage occurred 22Feb21.

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3/3/2021	1070765			M			died 2 days after the second vaccine; This is a spontaneous report from a contactable consumer reporting for his/her father. An 87-year-old male patient received the second dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number unknown) via unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient previously received the first dose of BNT162B2 on an unspecified date for COVID-19 immunisation and was fine. The patient died 2 days after the second vaccine. The reporter stated patient death due to the Pfizer Covid vaccine. The patient had autopsy. The outcome of event was fatal. Information about lot/batch number has been requested.; Reported Cause(s) of Death: died 2 days after the second vaccine
3/3/2021	1070051	TX	79	F	1/6/2021		unknown
3/3/2021	1070040	MD	71	F	2/10/2021	2/22/2021	Admitted to hospital 2/22/21
3/3/2021	1070038	HI	68	M	1/14/2021	1/22/2021	Client passed away 8 days after being vaccinated. It is unknown if it occurred from the vaccine or other comorbidities.
3/3/2021	1070005	TX	85	M	1/7/2021		Patient contracted Covid some period of time after receiving the vaccine.
3/3/2021	1069938	IA	80	F	2/4/2021	2/20/2021	expired at Hospital
3/3/2021	1069570	CA	69	F	2/22/2021	2/22/2021	2nd dose of Moderna at 9:00am. No side effect (except pinch at injection site) throughout the day and evening. At ~9:45pm, my wife suddenly fell unconscious. Immediate CPR & with Paramedic were not able to revive her. SHE PASSED AWAY at home. We believe it may be triggered by the vaccine. Did not have a chance to go to hospital or emergency room - it was too sudden. A sad day for us.
3/3/2021	1069263	FL	83	M	2/11/2021	2/16/2021	DIED

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3/3/2021	1070769			F			then died within 24 hours afterwards; This is a spontaneous report from a contactable consumer. This consumer reported that a 74-year-old female patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; Lot number unknown), via an unspecified route of administration an unspecified date at single dose for COVID-19 immunization. Concomitant medications were not reported. The patient with a host of health issues (heart issues/had a pace maker, diabetes, among others) was in a rehabilitation center following a hospital stay and was given the second dose of vaccine. It was reported that the patient died within 24 hours afterwards. It was not reported if an autopsy was performed. Information on batch/lot number was requested.; Reported Cause(s) of Death: then died within 24 hours afterwards
3/3/2021	1069876	OR	73	M	2/20/2021	2/22/2021	Vaccinated 2/20. At that time, had symptoms of incarcerated hernia, went to ED for evaluation. Not felt to warrant hospital admission. Returned two days later with agitation, altered mental status, and incarceration. Went to OR, uncomplicated hernia repair. Postoperatively, did not recover mental status. Went into arrhythmias POD 4, hypotension ensued, had multiple interventions and evaluations without satisfying answers for clinical course.

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3/3/2021	1069560	NY	61	M	1/15/2021	1/31/2021	Hospital course 1/31 ? 2/20/21 1/31 in ED pt was at home when children noticed his lips were blue, ems arrived and found him to be 50% on RA, on Non-rebreather pt got to 78%, covid on 01/26 Shortness of Breath 61-year-old male presents with EMS for evaluation of shortness of breath hypoxia. History is limited due to the patient's current clinical condition and so is primarily obtained from EMS. EMS reports that he tested positive for COVID-19 5 days ago. He began developing shortness of breath yesterday and his family called because his lips and fingers were blue today and he appeared short of breath. On EMS arrival he had a room air saturation of less than 50% so he was placed on nonrebreather with improvement in his saturation to 70% and he was transported to the emergency department. Patient does admit to shortness of breath. He denies any chest pain. He is noted to have a cast on his left ankle and said that he broke his left ankle on 23 December but has not had surgery. He denies any new pain or swelling of the leg. In the ED he was placed on 15L nasal cannula and NRB mask with improvement in SPO2 to low 90s. Additional work up revealed troponin of 1.35, lactic acid 5.8, and d-dimer 14.4. He received dexamethasone and was placed on heparin gtt. 1/31 admitted to ICU Acute hypoxic respiratory failure due to COVID-19 vs heart failure vs PE. CXR with bilateral hazy infiltrates more pronounced in the bases and left periphery and suspected multifocal pneumonia. At risk for PE given LLE immobility in the setting of COVID-19 with significantly elevated d-dimer. RISK of CTA outweighs benefit given AKI and iodine allergy. Continue with empiric treatment with heparin gtt. Admitted to ICU with SO2 in 60s-70s on 15L and NRB. Attempted 50L 95% FIO2 high flow and nasal cannula. Given lasix 40mg IV with good diuresis however SPO2 still remained low 80s with RR 40s and PO2 42 so the decision was made to intubate. Oxygenation improved following intubation, with further improvement following recruitment maneuver and increase in PEEP. FIO2 weaned to 90% with SPO2 remaining in mid 90s. Will continue to wean FIO2 as able. ARDS net protocol as much as possible. Consider prone ventilation and/or epoprostenol if unable to improve. VAP Bundle: HOB >30 degrees; Oral care per nursing standard and on DVT/PPI prophylaxis Sedation: Target Richmond Agitation and Sedation Scale (RASS)

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of 0 to -2 with propofol and fentanyl. Check baseline TG levels. COVID - 19: Convalescent plasma: Not indicated Steroids: Dexamethasone 6 mg / day for 10 days Remdesivir: Not indicated d/t AKI IL-6 inhibitor: Meets criteria for tocilizumab Systemic AC: Heparin gtt. No signs of bleeding (Platelets and Hb stable). Antibiotics: Start 3 and 7 day course of azithromycin and ceftriaxone, respectively. Elevated troponin Suspect demand ischemia d/t hypoxia; EKG does not show any ischemic changes AKI: Suspect d/t hypoxia in the setting of COVID infection. Urine output and electrolytes acceptable. Closed fracture of left ankle Suffered fracture following a fall on ice in December. Cast was placed on 12/30 by SOS. He was due to be re-evaluated this week for possible cast removal. Inhaled epoprostenol started Considered for ECMO but not initiated due to not a candidate Vasopressors required at times Antihypertensive infusion required at times severe hypoxia with position changes switched from heparin drip to enoxaparin prophylaxis 2/20 discharge summary 61 y/o male admitted to Hospital on 1/31 with hypoxia. He was diagnosed with COVID 19 5 days prior to admission, and had worsening respiratory status. He was intubated after arrival, and was on ventilator for the entire intervening time, until he was extubated on 2/20 at the time of transition to Comfort measures only. Prior to developing COVID 19, he had received his first dose of the Pfizer vaccine, as a member of the school system. He had a fractured L ankle after a fall on 12/31/20, and had a cast in place at the time of admission. He received Tocilizumab on 1/31, and underwent several cycles of prone positioning, beginning on 2/2. He completed a course of Decadron, he received Ceftriaxone and azithromycin beginning on admission, and completed a course of these. Anticoagulation with enoxaparin was utilized due to coagulopathy associated with COVID 19. Vasopressor support was required at times, as well as diuresis for fluid management. He required high levels of sedation to maintain ventilator synchrony, and high levels of ventilator support with high oxygen levels throughout his stay. Tracheostomy was being considered, but family decided that since he was not going to have good recovery, withdrawal of support, and allowing death was the appropriate choice for the patient and for them. He was extubated at 2100 on 2/20/2021.

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								Death was pronounced at 2123 on 2/20/2021. Children were at bedside.
3/3/2021		1069316	TN	57	F	2/12/2021	2/21/2021	death
3/3/2021		1069647	FL	73	M	2/19/2021	2/21/2021	Beginning in the evening 2/19/21, fever/chills/fatigue; worsening of symptoms 2/20/21 with lethargy/lack of appetite/weakness; unable to arouse on 2/21/21 then breathing stopped, patient's spouse called 911 performed CPR, EMS continued for 15 min then while in ambulance to hospital where he was pronounced dead. Official time of death 2:20pm
3/3/2021		1069685	MN	92	F	3/2/2021	3/2/2021	3/2/21 became SOB, treated with oxygen and head of bed up in bed, only at dessert and drank supplement, for evening meal, no pain noted. 3/3/21 staff helped get her up in morning, went to weight room to take her weight, she then appeared to be struggling to breath, she was brough back to her room and the aides summoned nurse for assessment, was put back into bed, nurse noted poor color and shallow breathing, resident passed away shortly after that.
3/3/2021		1069728	TX	47	M	3/2/2021	3/3/2021	Patient Started having dizziness, feeling faint at around midnight on 3/3/2021. He then lost consciousness, had seizure-like activity and was taken to hospital via EMS. In the hospital patient was unresponsive and received resuscitation attempts unsuccessfully. Per family, after about 45 minutes, code was called and patient expired.
3/3/2021		1069743	OH	89	M	2/25/2021	2/26/2021	Cardiac arrest- death

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3/3/2021	1069830	MO	87	F	1/8/2021	1/25/2021	From CT Scan in ED at 7:40 pm on 1/25/2021 -- There is a large intraparenchymal hemorrhage with Surrounding vasogenic edema within the left occipital lobe. There is additional subdural hemorrhage layering along the left frontal, temporal and parietal convexity which may be decompressing from the area of intraparenchymal hematoma. No visualized intraventricular hemorrhage. There is some trace hemorrhage layering along the left tentorium cerebelli. Severe associated mass effect with left-to-right midline shift of 2.1 cm. There is subfalcine and downward transtentorial herniation with complete effacement of the basilar cisterns. Evaluation of the craniocervical junction is limited due to beam hardening artifact. Near-complete effacement of the left lateral ventricle. No head trauma or fall. Deceased 1/26/2021
3/3/2021	1069615	OR	58	M	1/31/2021	1/31/2021	58-year-old male, history of Down syndrome, who presented from his care facility for approximately one week of progressive fatigue, lethargy, reduced mentation, along with reduced intake, who was found to be less responsive. He was brought to the emergency department where he was found to be hypothermic, hypotensive, hypoxic, and bradycardic. Upon admission to the ED, POLST form discovered _____ DNR, but limited medical interventions. He was then discovered to have COVID-19 pneumonia, likely driving this entire process.
3/2/2021	1065765	TX	78	F	1/18/2021		No known side effects; postmortem Covid-19 test negative Date of death: 02/16/2021
3/2/2021	1066118	PA	46	M	2/16/2021	2/17/2021	Patient had an unwitnessed cardiac arrest while outside walking his dog. AED in the field initially advised shock and was shocked 3 times without effect. At the time EMS ALS arrived, patient was in PEA arrest. He was transferred to Hospital with CPR in progress. Time of death called at 1857.
3/2/2021	1065979	TX	63	M	12/1/2020	1/20/2021	No known side effects; postmortem Covid-19 test negative Date of death: 02/12/2021

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3/2/2021		1066093	TX	63	M	12/30/2020	2/2/2021	No known side effects; however, on 1/20 the decedent suffered lethargy. On 2/12/2021, the decedent had a possible seizure and was transported to emergency department where shortly after arrival, he was pronounced dead.
3/2/2021		1066107	PA	80	U	1/21/2021	2/22/2021	death
3/2/2021		1065920	FL	85	M	1/22/2021	1/26/2021	never woke up after arrival; Suffered with vascular dementia; Death cause: Covid/Tested positive to Covid 31Jan, tested due to increased lethargy; This is a spontaneous report from a contactable consumer. An 85-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 22Jan2021 at single dose for COVID-19 immunization. The patient received the vaccine at nursing home/senior living facility. Medical history included dementia, hypertension, past strokes. The patient was exposed to asymptotic staff member on or prior to 25Jan2021. The patient had no known allergy. No COVID prior vaccination. Concomitant medication included lisinopril. No other vaccine was received in four weeks. The patient was tested positive to COVID on 31Jan2021, tested due to increased lethargy started from 26Jan2021. The patient suffered with vascular dementia. She was ambulatory up to 31Jan2021. The patient was sent to hospice that evening on 31Jan2021 to quarantine, never woke up after arrival. Palliative Care started 02Feb2021, the patient expired 12Feb2021. Cause of death was COVID. The patient did not receive treatment for events. The autopsy was not performed. The outcome of events "never woke up, vascular dementia" was unknown. Information on Lot /Batch Number has been requested.; Reported Cause(s) of Death: Death cause: Covid
3/2/2021		1066126	PA	66	F	1/21/2021	1/26/2021	death
3/2/2021		1066178	FL	90	M	2/10/2021	2/15/2021	Caller is nephew of patient. Patient was admitted to Hospital on 2/15/21 with Covid like symptoms and decreased O2 sat. He tested positive for Covid 2/15/21. Treated with Remdesivir. Patient status continued to decline and he passed away in hospital 2/22/21 0612.

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3/2/2021	1066209	MA	87	M	12/30/2020	1/18/2021	[COVID-19 Vaccine] treatment under Emergency Use Authorization(EUA): He presented 10 days after first COVID-19 Vaccine with Progressive neurological deficits with bulbar manifestations - dysarthria, dysphagia and bilateral arm weakness and incoordination, worse on right. MRI brain was negative for acute stroke and MRI cervical, showed degenerative changes. Transferred from community hospital to tertiary center where the diagnosis was made of AIDP. He was intubated at that time in Neuro ICU. Given Steroids and IVIG but no improvement and was either will need to have Trach and PEG vs CMP and family honored the patient's wishes and made him CMO. signs of severe demyelination and AIDP was diagnosed.
3/2/2021	1066274	PA	46	F	1/21/2021	1/23/2021	death
3/2/2021	1064646	HI	98	F	2/16/2021	2/24/2021	Minor arm pain on 2nd day of each vaccine Diarrhea 3 days after 2nd vaccine Massive heart attack (left ventricle) 8 days (2/24/21) after vaccine Home hospice 3:30pm 2/24/21 Stopped breathing 5:45 am, pronounced dead at 8:22 am on 2/25/21

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3/2/2021	1065111	FL	71	M	1/28/2021	1/29/2021	Very sick, then hospitalized Died; This is a spontaneous report from a contactable Other Health Professional (patient). A 71-year-old male patient received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration in left arm on 28Jan2021 06:00 at single dose for COVID-19 immunization. Medical history included Esrd controlled a-fib. Concomitant medication in two weeks included diphenhydramine hydrochloride (BENADRYL) before vaccine and some dialysis Ned maybe. Facility type vaccine: Other. If other vaccine in four weeks: No. If covid prior vaccination: No. The patient previously received first dose of BNT162B2 on an unspecified date for COVID-19 immunization. The patient experienced very sick on 29Jan2021. The patient was not recovered from the event very sick. Event reported as Very sick and my father died. AE resulted in: Emergency room/department or urgent care, Hospitalization. AE treatment: Famotidine and nausea meds then hospitalized Died. It was unknown if an autopsy was done. Information on batch/lot number has been requested.; Sender's Comments: The limited information provided precludes a full clinical assessment of the case. Significant in the assessment would be the date when the first dose of the vaccine was given, the patient's complete medical history, and the full clinical course of the event (including specific symptoms/events associated with reported 'very sick'), which were unknown at the time of this report. This case will be reassessed once with additional information. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: Very sick, then hospitalized Died

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3/2/2021	1066199	NE	80	M	2/8/2021	3/1/2021	Patient had gotten up to the bathroom and collapsed in the hallway after using the restroom. Patient was unresponsive upon EMS arrival with vomitus coming out of the mouth per the report when they rolled patient over onto his side the emesis was pouring out of his mouth. ER course: Examination. Epinephrine 1 mg IO x4 CBC, CMP, cardiac panel MDM: 1447 patient arrival, per EMS report patient had been sick and vomiting all morning. Bradycardia noted at arrival with rates in the 30s, CPR was initiated patient had received 3 rounds of epi prior to arrival. 1450 CPR continues via the Lucas device, 1 mg epinephrine given IV push 1451 CPR pause rhythm check. CPR resumes 1453 CPR paused for rhythm check. No central pulses, CPR resumed, glucose of 99 per fingerstick 1454 King tube removed. Oral airway placed respirations by BVM. 1 mg epinephrine IV push 1455 CPR pause for both pulse and rhythm check. No central pulses noted. CPR resumes via Lucas 1456 pupils are fixed and dilated bilaterally 1457 CPR pause for pulse and rhythm check. No central pulses noted. CPR resumed via Lucas. 1 mg epinephrine IV push 1459 warm blankets applied. CPR pause for pulse and rhythm check. No central pulses noted. CPR resumed 1501 CPR pause for pulse and rhythm check. No central pulses. CPR resumes 1502 1 mg epinephrine given IV push 1503 CPR pause for pulse and rhythm check. No central pulses noted. CPR resumed via the Lucas device 1506 resuscitation is ceased at this time. Time of death recorded at 1506
3/2/2021	1065719	OH	84	M	2/18/2021	2/22/2021	My grandpa got his second covid vaccine on Thursday. Saturday he complained of stiff neck. Sunday he had low grade fever, nausea and vomiting, chills, and mild headache. He was feeling bad enough to call squad at 3 pm. The paramedics did evaluation and thought he was just experiencing normal side effects from vaccine and felt no need to transport to hospital so my grandpa decided to stay home and just rest. At 2 am that same night he went into cardiac arrest and was not able to be brought back
3/2/2021	1067177	PA	93	F	2/20/2021	2/27/2021	Patient had sudden death 1 week after 2nd COVID vaccine. Had complained of dizziness throughout the week leading up to it.

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3/2/2021		1065712	PR	78	M	2/14/2021	2/18/2021	Patient started feeling weak, stomach pain, neck pain, respiratory problems, confusion, low blood pressure which led to death on February 21, 2021, 7 days after the vaccine was given.
3/2/2021		1065551	GA	68	M	3/1/2021	3/1/2021	Pt received 2nd Pfizer BioNTech Covid 19 EUA vaccine @1:50 pm; Pt released from Observation @2:09 pm. Approximately 2:18 pm RN called to parking lot and observed pt having difficulties. Called for EMS & crash cart. Vitals taken 2:20 BP 83/55, no respirations noted, pt unresponsive. AED attached. EMS arrived 2:22 and took over care of pt. and transported @2:40 pm to Hospital. Per wife, pt has history of PE in Oct. 2020, HTN, diabetes with insulin pump, obesity, gastroparesis, home oxygen and uses motorized scooter. Wife also said pt had allergy to iodine not previously reported, and MD had stopped Zarelto subsequent to 1st Pfizer vaccine 2/8/21 "due to breathing difficulty". Patient was unable to be resuscitated. Time of death 14:59.
3/2/2021		1065543	NC	78	M	1/15/2021	2/14/2021	It was reported to staff that this gentleman suffered thrombocytopenia following his vaccine, a platelet infusion was done and he expired on 2-14-21
3/2/2021		1065507	MI	83	F	1/23/2021	1/24/2021	EXTREME PAIN, STOPPED EATING/DRINKING -- STARTED MORPHINE

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3/2/2021		1065435	NC	81	F	1/19/2021	1/19/2021	blood clot; death cause: Heart Problems; tired; nauseous; This is a spontaneous report from a contactable consumer. An 81-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) (Lot number EL3248), via an unspecified route of administration at single dose in the left arm on 19Jan2021 14:00 for covid-19 immunisation. Medical history included heart problems, pacemaker. Concomitant medication included heparin. The patient experienced death cause: heart problems on 20Jan2021, blood clot on an unspecified date with outcome of unknown that required hospitalization, tired on 19Jan2021 with outcome of unknown, nauseous on 19Jan2021 with outcome of unknown. The patient was hospitalized for blood clot from 16Jan2021 to 18Jan2021. The patient died on 20Jan2021. An autopsy was not performed. The events were described as follows: The patient was tired and nauseous about 3 hours after her vaccine. She had been in the hospital 16Jan2021 to 18Jan2021 for a blood clot. The patient died at her home on 20Jan2021 between 4 and 7 pm. No treatment required. The vaccine was administered at Hospital Facility. Prior to vaccination, the patient was not diagnosed with COVID-19 and since the vaccination, the patient had not been tested for COVID-19.; Reported Cause(s) of Death: death cause: Heart Problems
3/2/2021		1065434	FL	47	M	2/13/2021	2/18/2021	Patient died; This is a spontaneous report from a contactable consumer (parent's patient). A 47-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), via unknown route on 13Feb2021 (at the age of 47-year-old) at single dose for COVID-19 immunization. Relevant medical history and concomitant medications were not reported. On 18Feb2021 the patient died. The cause of death was unknown. An autopsy was not performed. No COVID prior vaccination. The patient had not been tested for COVID post vaccination. Information about lot/batch number has been requested.; Reported Cause(s) of Death: Patient died

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3/2/2021	1065394			F			<p>Died; A spontaneous report was received from a consumer on a social media, concerning a 58-years-old female patient, unknown race and ethnicity, who was administered Moderna's COVID-19 vaccine (mRNA-1273), and died. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unknown date, prior to the onset of the event, the patient received dose of mRNA-1273 (Lot number: unknown), for the prophylaxis of COVID-19 infection. On 17-Feb-2021, social media interaction was posted concerning a death of a patient on an unknown date after receiving Moderna vaccine. No treatment information was provided. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on an unknown date. The cause of death was not provided. Plans for autopsy were not provided.;</p> <p>Reporter's Comments: Very limited information regarding the event has been provided at this time and is insufficient for causality assessment. The cause of death was not provided. Plans for autopsy were not provided.;</p> <p>Sender's Comments: US-MODERNATX, INC.-MOD-2021-018302:Same Reporter; Reported Cause(s) of Death: Unknown cause of death</p>

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3/2/2021	1065158	FL		M	1/20/2021	1/22/2021	death; severe headache; This is a spontaneous report from a non-contactable consumer from a Pfizer-sponsored program. A male patient of an unspecified age (Age: 83, unit: Unknown; as reported) received the first dose of the bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE; Lot Number:EH9899), intramuscularly in the left arm on 20Jan2021 at a single dose for COVID-19 immunisation. The patient's medical history included sulfonamide allergy from an unknown date and unknown if ongoing. Concomitant medications were not reported. The patient previously took azithromycin [MANUFACTURER UNKNOWN] and experienced allergy on an unspecified date. On 22Jan2021, the patient experienced severe headache (non-serious). On 28Jan2021, the patient experienced death (death, medically significant); 8 days after receiving the vaccine. The patient died on 28Jan2021 due to unknown cause of death. It was unknown if an autopsy was performed. The clinical outcome of the event, death, was fatal. The clinical outcome of the event, severe headache, was not recovered. No follow-up attempts are possible. No further information is expected. ; Reported Cause(s) of Death: Unknown cause of death
3/2/2021	1065078			M	12/22/2020	1/11/2021	Unresponsive; A spontaneous report was received from a Reporter concerning a 25 Years-old male patient who received Moderna's COVID-19 vaccine (mRNA-1273). The patient's medical history was not provided. No relevant concomitant medications were reported. On 22-DEC-2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: unknown) for prophylaxis of COVID-19 infection. On 01-JAN-2021, The patient became unresponsive and died which is serious. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not reported. On 01-JAN-2021, the outcome of the event unresponsive became fatal. patient died.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death
3/2/2021	1066289	PA	88	U	1/21/2021	2/8/2021	death

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3/2/2021	1065341	WA	91	F	1/29/2021	2/11/2021	Systemic: Made aware of patient passing away on 3/1 per letter from Corporate legal team. Patient passed away on 2/14. Vaccine 1st dose given 1/29/21.-Severe
3/2/2021	1068883		89	M	12/31/2020	2/5/2021	DEATH Narrative: PATIENT PASSED AWAY WHILE ON HOSPICE CARE
3/2/2021	1066291	LA	80	F	1/14/2021		Patient administered vaccine on 1/14/21 with no reactions noted after 15 minutes. Patient seen for wellness visit on 1/20/21 with no complaints regarding vaccine. Patient died on 1/30/21
3/2/2021	1067090	NY	97	F	2/17/2021	2/18/2021	within 24 hours after her second injection she developed chills, had a syncopal episode and had, difficulty breathing. this progressed over the next day when she had a second syncopal episode and her dyspnea and confusion worsened EMT was called and she was brought to the hospital. she was in flash pulmonary edema and with her history of severe aortic stenosis she was admitted to the cardiac icu. she had no prior history up to that time of pulmonary edema and was functioning without distress in her home. she had a history of covid in early april, manifesting primarily as severe confusion, from which she recovered.
3/2/2021	1068888		88	M	2/26/2021	2/27/2021	DEATH
3/2/2021	1068887		90	M	1/6/2021	2/13/2021	DEATH Narrative: UNSURE DETAILS OF EVENT, NO DOCUMENTATION IN PROGRESS NOTES
3/2/2021	1068886		67	M	1/26/2021	1/26/2021	DEATH Narrative: Pt he reports he developed chills SOB body aches the same night as receiving the COVID vaccine on 1.26.2021-pt is currently reporting CheSt tightness and SOB Admitted to hosp: ICU with Bilateral Pulmonary Emboli, LLE DVT, NSTEMI, Arrhythmia.

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3/2/2021		1068884		85	M	2/8/2021	2/22/2021	DEATH Narrative: Presented to ED via EMS c/o increasing shortness of breath, O2 sat mid to high 80s on 4L. When EMS arrived , pt was in distress, intubated by EMS and transported to ED. Pt had a PEA arrest en route but resuscitated w/ return of spontaneous circulation after receiving a dose of epinephrine and chest compressions. Pt was hypotensive on arrival to ED. He was started on sepsis protocol , volume resuscitation and empiric antibiotics. Once stabilized, he was admitted to icu at hospital. Removed from respirator 2/22/21
3/2/2021		1068882		85	M	1/12/2021	1/29/2021	DEATH Narrative: Son stated that patient was doing well, still working and driving places. He stated that he called his son and stated that he wasn't feeling well and died shortly after that.
3/2/2021		1068762		76	M	1/11/2021	3/2/2021	DEATH Narrative: patient's wife reported he had gone in an outside hospital, had held his brilinta as advised anticipating shoulder surgery "and he threw a big clot and died.~~
3/2/2021		1068761		82	M	1/12/2021	2/6/2021	DEATH Narrative: patient was placed on hospice care following vaccine, unclear cause of death, not documented
3/2/2021		1068743	TN		M		2/9/2021	Bamlanivimab treatment under Emergency Use Authorization(EUA): Bamlanivimab treatment under Emergency Use Authorization(EUA). Patient received 1st dose of COVID vaccine on 01/28/2021, but he began to have COVID symptoms on 02/04/2021 and tested positive on 02/05/2021. The patient was treated with banlanivimab on 02/08/2021, and he passed away on 02/09/2021.
3/2/2021		1067358	TX	64	M	1/23/2021	1/25/2021	1-25-2021- Phone call: pt had cold and cough prior to vaccine. cough worsened 1-28-2021 Phone call: pt requesting provider visit, cough is same and taking tessalon pearls 1-29-2021 Provider in office visit: pt complain of cough and SOB for 6 days. Getting worse. Temp 101.2, pulse ox 87%, BP 128/70. level of distress- leaning forward to breath. appeared ill. diffuse rales throughout both lung fields, more at bases. Diagnosis Pneumonia due to COVID 19 virus. Sent to ER

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3/2/2021	1066322	MI	83	M	2/15/2021	2/15/2021	Patient was vaccinated approx 9a. Later that evening, patient was having trouble breathing so they called son who lives down the road to come, 20 mins after the call the patient has passed. Per medical examiner, pt died due to possible PE, MI, or his aortic aneurysm ruptured.
3/2/2021	1068885		98	M	1/15/2021	2/17/2021	DEATH Narrative: PRIOR TO DEATH, spoke with pt's daughter and she reported that pt is unable to keep his appt for the second Covid vaccine appt because is sick today. Per daughter, pt has been lethargic, not enough sleep last night because of frequent urination at least every 30 to 45 minutes looks exhausted and with poor appetite. Pt has not been drinking fluids at least 6 to 8 glasses a day and daughter tries to make sure pt drinks fluids, the best he can. Per daughter, pt's vitals signs are as follows: BP: 93/48mmhg PR: 93/min. Temp: 98.1 F and O2 sat: 95%.
3/2/2021	1066307	LA	95	F	1/27/2021		Patient is not a patient of our clinic. When called to confirm appointment for second dose, we were notified patient was deceased.
3/2/2021	1067125	TX	86	M	2/26/2021	2/26/2021	was reported to staff at Health Department that client passed away hours after receiving Moderna vaccine, also reported that client had multiple health conditions.
3/2/2021	1066332	PA	66	U	1/21/2021	1/25/2021	death
3/2/2021	1066344	LA	88	M	1/28/2021		This not a patient of our clinic. When called to confirm his second dose vaccine, is when we learned patient is deceased. Unable to reach anyone regarding date of death.
3/2/2021	1066484	MS	65	M	2/26/2021	2/26/2021	Received vaccination at 14:20 2/26/21. Was observed until discharged at 15:15. Discharged per wheel chair to lobby in alert/stable condition, to wait on bus to take him home. At 18:00 his neighbor heard him fall, could not get patient to answer phone, found him unresponsive. Neighbor called 9-1-1, ambulance personnel could not revive patient. Coroner's office ruled his death as Natural Causes due to Hypertension, Cardiac disease, Diabetes, ESRD. There were no indication of anaphylactic reaction noted when I questioned the coroner's office. The Coroner's office/EMS were aware the patient had received the Moderna COVID 19 vaccination that day.

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3/2/2021	1066770	IL	97	M	1/25/2021	2/9/2021	died
3/2/2021	1066829	WA	88	M	2/25/2021	3/2/2021	Patient passed away in his sleep that evening after he recieved his COVI vaccine. Patient had not been ill. No other information is known.
3/2/2021	1066852	KY	76	M	2/24/2021	2/28/2021	History of terminal cancer, entered hospice care 1/2021, expired 2/28/2021. No reported adverse events from patient or family after receiving vaccine
3/2/2021	1066906	NY	92	M	12/30/2020	2/1/2021	92 year-old male with PMHx of vascular dementia, BPH, MDD, sleep disturbance , basal cell carcinoma of neck, osteoarthritis, BLE edema, Guillain-Barre syndrome 30 years prior, s/p COVID positive on 1/11/21 and received IV Bamlanivimab. Sent to hospital on 2/2/21 for altered mental status, generalized weakness with inability to lift bilateral UE and difficulty moving his BLE. He was treated for UTI with 7 days of Cefepime for Morganella Morganii. He was followed by neurology with MRI of the brain and CT of the spine without acute findings. Lumbar puncture unable to be obtained. He received 5 day course of IVIG for presumed Guillain-Barre . EMG showed generalized sensory motor polyneuropathy both axon loss and demyelinating type severe in degree. However, he did not recover from his GBS symptoms, was transferred back to the nursing home and died on 2/15/2021.
3/2/2021	1067036	HI	88	M	2/25/2021	2/26/2021	Patient received dose 1 of Moderna Vaccine on 1/14/21 administered by pharmacy. Patient was hospitalized on 1/31/21 due to shortness of breath and diminished O2 sats down to 88%. Patient was in atrial fibrillation. Patient discharged from hospital on 2/25/21 to home. Patient received dose 2 of Moderna Vaccine on 2/25/21 prior to discharge from hospital. Last hospital note stated that patient was pleasant and cooperative with good motivation. Patient passed away after discharge from the hospital on 2/26/21. Patient's son called the hospital to report his passing.
3/2/2021	1066715	IL	85	M	12/29/2020	1/21/2021	epistaxis.

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3/1/2021		1061911	OH	45	F	1/28/2021	1/28/2021	Died at home; Gasping for air/difficulty breathing; Soreness; A spontaneous report was received from a physician concerning a 45 years-old, female patient who experienced soreness/MedDRA PT: pain, gasping for air/difficulty breathing/MedDRA PT: dyspnoea and subsequently died/MedDRA PT: death. The patient's medical history included blood pressure (disorder not specified), thyroid disorder, depression and anxiety. Concomitant product use included blood pressure medication, thyroid medication and possibly depression and anxiety medication. On 28 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (Lot #007M20A) (route of administration and injection site not provided) for prophylaxis of COVID-19 infection. On 28 Jan 2021, following the vaccination, the patient was fine but had experienced some soreness. Per patient's coworker, the patient did not take any medication as it made the patient sick. The physician was not aware of any complaints from the vaccine. On 13 Feb 2021 at 3:31am, the patient called 911. Per the 911 call, the patient was gasping for air on the call and having difficulty breathing. The patient subsequently died on 13 Feb 2021 at home. The physician inquired whether Moderna gets involved with the autopsy and logistics of the death of patients and wanted to know the time frame for reporting a death of a patient who received the vaccine. The physician did not know who administered the patient's vaccine. Action taken with mRNA-1273 in response to the events was not applicable as the patient deceased. The event died was fatal. The outcome for the events soreness and gasping for air/difficulty breathing was unknown. The patient died on 13 Feb 2021. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding the event of dyspnea and death has been provided at this time. Further information has been requested. Patient's medical history of blood pressure is considered a risk factor. Based on the current available information and temporal association between the use of the product and the onset of the pain, a causal relationship cannot be excluded.; Reported Cause(s) of Death: Died at home

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3/1/2021	1063457	MA	63	M	2/27/2021	2/28/2021	On date on second dose, 2/27/2021, the pt began have fatigue and diarrhea at around 10:30 am. This continued to the following day. On 2/28/2021, the patient was last seen around 4:20 pm by his wife in their residence. She found him unresponsive at 5:30 pm in their bedroom. EMS was called and the decedent was declared deceased. The pt had his first dose on 2/9/2021. Both doses were given at the hospital. Per family, the pt had no adverse affects following the first dose.
3/1/2021	1063201	TX	62	M	2/8/2021	2/9/2021	The recipient was feeling well immediately after the vaccination, all day on 2.8 and in the morning of 2.9. His daughter in law text him at 0930 and he did not respond to the text (atypical) and then he missed a morning meeting. His wife was downstairs in a meeting herself and after the meeting was over she called to him and he did not respond. She found him with no pulse and was not breathing. She called 911 and attempted CPR. They did not complete an autopsy, they stated that they believe the cause of death was either an embolism, Heart attack or aneurism. The wife stated that she does not believe the death was due to the vaccination; however, there were no tests completed to prove or disprove.
3/1/2021	1063000	WI	79	M	1/25/2021	2/27/2021	Patient passed away within 60 days of receiving a COVID vaccine
3/1/2021	1062895		90	F	1/11/2021	2/28/2021	patient passed away within 60 days of receiving a COVID vaccine
3/1/2021	1062830	TX	92	F	2/25/2021	2/25/2021	92 yo female who received her first dose of Moderna vaccine on 1/11/2021 with no known adverse effects. Admitted to the hospital on 1/17/21 with a spine compression fracture. Discharged and readmitted on 1/19 /21 with nausea and vomiting. Found to have new atrial flutter and elevated troponin attributed to NSTEMI. Discharge on Aspirin and Plavix. No cath. Second dose of Moderna vaccine 2/25/21. No immediate reaction. One hour later began to feel progressively weak. EMS called shortly after getting home. Intubated in the field. Died at 0658 on 2/26/21 s/p PEA arrest without ROSC.

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3/1/2021	1062666	TX	68	M	2/22/2021	2/25/2021	2-24-21 patient with development of cough, fatigue, increasing on chronic disability worsening debility and falls. scheduled for office visit 2-25.21 0900 call from spouse 0210 am patient was not breathing and lvdad alarming low flow alarm on arrival of ems confirm asystolic not breathing and dead
3/1/2021	1062550	AL	63	M	2/17/2021	2/18/2021	Patient's daughter called to report that about 30 hours after receiving the vaccine he passed away at home. She said she didn't know the cause of death but she felt like she should let us know about it.
3/1/2021	1061909		85	F	1/29/2021	1/29/2021	Massive stroke; A spontaneous report was received from a consumer (patient's daughter), concerning an 85-year-old female patient, who received Moderna COVID-19 vaccine and death occurred in two days. The patient's medical history was not provided. No relevant concomitant medications were reported. No information on allergies. She states that her mother was physically and mentally healthy before vaccination. On 29-JAN-2021, prior to the onset of events, the patient received her first of two planned doses of covid-19 vaccine for the prophylaxis of Covid-19 infection. There were no complaints on any side effects from the patient for 6 hours after vaccination. Next day, she was found unresponsive on her bed by her neighbor after they were sent to check on her by her daughter. Her heart was beating, and she was breathing at that time, but did not have consciousness. According to her daughter, the patient had a massive stroke in her sleep sometime between 8:pm on 29-JAN-2021 and 9:30 am on 30-JAN-2021. Her life saving measures were taken out at 1:15 am on 31-JAN-2021 and she died approximately at 1:45am. No information available on hospitalization and treatment received with this event. It is not known whether autopsy was done. Action taken with 2nd dose of Moderna Covid-19 vaccine was not applicable. The outcome of the event stroke is fatal.; Reporter's Comments: Based on the current available information and temporal association between the use of the product and the onset date of the event of stoke, a causal relationship cannot be excluded. Patient's elderly age is considered a risk factor.; Reported Cause(s) of Death: Massive stroke

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3/1/2021	1062260	NY	99	F	2/17/2021	2/17/2021	Developed acute facial droop and slurred speech 2h after 1st dose of the vaccine on 2/17, found with R MCA stroke. Then became unresponsive on 2/27 and was found with an acute L MCA stroke. Was transferred from another hospital, was not a candidate for intervention, and was made comfort and died on 2/28
3/1/2021	1061910	PA	65	M	2/11/2021		Passed away; A spontaneous report was received from a Pharmacist concerning a 65 years-old, male patient who passed away/MedDRA PT: death, days after receiving the second dose of the Moderna COVID-19 vaccine. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. The patient received their first of two planned doses of mRNA-1273 (Lot #012L20A) on 12 Jan 2021. On 11 Feb 2021, the patient received their second of two planned doses of mRNA-1273 (Lot # 030M20A) (route of administration and injection site not provided) for prophylaxis of COVID-19 infection. On an unknown date, days after receiving the second dose of the Moderna COVID-19 vaccine, the patient passed away. The patient did not come to the hospital; therefore the Pharmacist had very little detail of the situation but believed it was due to aspiration based on report received from the patient's boss. The Pharmacist reported there was no report of any issues from the first vaccine. The patient was found at home by spouse and had yellow stuff on face and chest. Action taken with mRNA-1273 was not applicable as the patient deceased. The patient died on an unknown date. The cause of death was reported as unknown. Plans for autopsy were not provided.; Reporter's Comments: Very limited information regarding the event of death has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Death days after receiving the second dose of the Moderna Covid-19 Vaccine

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3/1/2021	1063812	IL	79	M	1/13/2021	1/13/2021	Resident had severe CAD, DM type 2, and hx of RBKA and left 5 digits on foot amputation. Hx of osteomyelitis post surgical. After last surgery, resident did not have a good appetite, more restless, increased confusion with dementia. Significant other passed away on 12/30/20, resident began refusing meals, decreased eating. Vaccinated on 1/13/21. On 1/25/21 Resident labs showed kidney failure. Dr. spoke with family and transitioned to Comfort care, on 2/5/21 went hospice. Patient passed away on 2/13/2021.
3/1/2021	1063522	MI	71	M	2/23/2021	2/23/2021	1. Fatigue ? day 1 - Tuesday 2. Loss of appetite ? day 1 Tuesday 3. Fever 102.0 ? day 2 - Wednesday 4. Chills ? day 2 - - Wednesday 5. Weak ? day 2 - - Wednesday 6. Non-ambulatory (unusual) ? day 2 - - Wednesday 7. Two emergency service ambulance assessment ? day 2 - - Wednesday 8. Symptoms improved ? day 3 - Thursday 9. Ambulatory - day 3 - Thursday 10. Symptoms worsened ? day 4 - Friday 11. Chills ? day 4 - Friday 12. Non-ambulatory again ? day 4 - Friday 13. Fever 102.0 ? day 4 - Friday 14. Left side flank pain ? day 4 - Friday 15. CPR and declared decease at home by paramedics - day 5 - Saturday morning @ 1:32am

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3/1/2021	1062350			M	1/23/2021	1/25/2021	Death; A spontaneous was received from a consumer concerning a male patient, who received Moderna's COVID-19 vaccine and who died. The patient's medical history was not provided. No relevant concomitant medications were reported. On 23-Jan-2021, prior to the onset of the event, patient received their first of two planned doses of mRNA-1273 (Lot number:013620A) intramuscularly for prophylaxis of COVID-19 infection. On 25-Jan-2021, approximately 2 days after injection, patient Died. On 26-Jan-2021, neighbor Reporter called in to report a potential AE death. She shared that she lives in a condo building with other elderly. She shared that she and 2 other neighbors went to a vaccination site in Miami at a fire department. She shared that she is fine but that her neighbor died two days after shot. She shared that she didn't know if he had symptoms and that she knows that he had a lot of medical issues and was on about 15 medicines. She shared that she didn't know his age but guessed 70. She said we can contact his wife, but it must be a Spanish speaking agent because she speaks little English. She is concerned because they all received the vaccine at the same time. She wanted to reiterate that she was fine but believed we should know about the neighbor's death. No treatment information was provided. Action taken with the second dose of mRNA-1273 in response to the event death is not applicable. The patient died on 26-Jan-2021. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding this event/s has been provided at this time. Further information has been requested. The cause of death was not provided.; Reported Cause(s) of Death: Unknown
3/1/2021	1063950	OH	62	M	2/26/2021	2/26/2021	Patient remained at baseline until noted at 2130 unresponsive and abnormal VS. Sent to ED and patient passed away in ED
3/1/2021	1063727	MT	79	M	1/21/2021	2/23/2021	Called pt for Dose 2 appt. Pt had passed away.

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3/1/2021		1063561	IL	92	F	1/7/2021	2/7/2021	Patient was a Resident on our LTC wing. Per the LTC Manager: Resident had hx of CVA with deficits in speech and extremities. Hx of decreased circulation to BLE's which resulted in wounds to bilateral feet on and off that needed treatment. Average meal consumption 25-50% of meals, started refusing more often in December and January. Would consume small amounts 60-120mL of fluids here or there. Vaccinated on 1/7/21. Stopped eating 1/18/21. Attempted bolus NS fluid 1/25/21. Resident refused all treatment afterwards. Went hospice on 2/3/21 and passed away on 2/7/21.
3/1/2021		1064413	OH	82	F	1/4/2021	1/9/2021	My mom received the Pfizer Covid 19 vaccine on 1/4/21. On 1/12/21 I received a call from the nursing home that my mom had stopped eating and drinking and that she had nothing to eat or drink for 3 days. I asked them why they didn't call me sooner but they did not have an answer. I was told to come in because she was very lethargic and possible dehydrated. They tested her for Covid the morning of 1/12/21 and she tested negative. I went into see my mom and she was barely conscious. They gave her fluids intravenously but it had no positive affect on her condition. On 1/14/21 she tested positive for covid and was moved to their covid unit. I called in Hospice comfort care on 1/15/21. My. mom died on 1/17/21.
3/1/2021		1064294	CA	92	F	2/26/2021	2/28/2021	Death on 2-28-21. Not felt by this provider to be likely related to vaccination.
3/1/2021		1063980	CA	91	F	2/9/2021	2/17/2021	1/26 /2021 - pt went to ER for chest pain 2/9/2021 - pt received Pfizer COVID vaccine 1st dose 2/17/2021 - cardiac arrest with death
3/1/2021		1063903	TX	69	M	1/9/2021	2/10/2021	NO SPECIFIC ADVERSE EVENT DUE TO THE VACCINE BUT THE PATIENT PASSED AWAY 02/10/2021 DUE TO COVID
3/1/2021		1063863	IL	85	M	1/13/2021	2/23/2021	Resident had Hx of DM T2, Hx of prostate CA. Started having swallowing difficulties in November. Increased c/o nausea and decreased appetite. 25% per meal average. Decreased energy to participate in activities and refused getting out of bed or meals. Was vaccinated on 1/13/21. Hospice care started on 1/25/21. Resident passed away 2/23/21.

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3/1/2021	1063846	IL	91	F	2/4/2021	2/22/2021	Hx dementia, CVA, CAD. 2-3 year history of only consuming 25% of 1-2 meals daily. All meds d/c early 2020 because of refusing to eat or drink anything. Suddenly began drinking april/may, gained weight back. Vaccinated on 1/7/21 & 2/4/21. On 2/22/21 had significant changes in respiratory status. Passed away 2/23/21.
3/1/2021	1063758	OH	61	M	2/24/2021	2/25/2021	Patient died on 2/25/21 in the AM after receiving his COVID-19 Moderna vaccine #1 at approximately 2:30P on 2/24/21. I do not have a time of death. I contacted the County Medical Examiner's office who stated that they received his body after he was determined to be deceased at the shelter. No autopsy was performed and his body was released to a funeral home on 2/26. The ME's office said that "permit for burial/cremation is pending" and no other information on COD was available. Per staff, he was also tested for COVID as part of shelter protocol on 2/24 and PCR was negative. He arrived to the shelter on 2/19/21.
3/1/2021	1064433	AL	72	M	2/27/2021	3/1/2021	Cardiac Arrest
3/1/2021	1063681	NV	75	M	1/27/2021	2/4/2021	Pt got his vaccine 1/27 and was found dead at his residence on 2/7/21. I heard from our county health officer who talked to the coroner who said that they estimated that the patient had been deceased for 2-3 days prior to when they were found. No apparent cause of death was found.
3/1/2021	1063674	MI	68	M	2/5/2021	2/21/2021	EMS responded to a call at his home; he was found unresponsive by family slumped over in a chair
3/1/2021	1064265	AR	77	M	2/22/2021	2/22/2021	Death

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2/28/2021		1061434	MN	97	F	2/11/2021	2/15/2021	I am the patient's daughter as well as an RN-BSN. My mother was given the Moderna vaccine on Feb 11, 2021 and on Feb 15, 2021 she had a CVA and MI. She was found on her apt. floor unconscious. She was transferred to the Hospital by ambulance where a CT scan and other tests were done. It was determined she had a stroke and heart attack. My mother was in great health, took no medications, and lived alone in her apt. before this incident. The medical professionals determined she would not recover so she was admitted to hospice and died on Feb. 21, 2021. I believe there is a relationship between the vaccine and the CVA and MI.
2/28/2021		1060401	IL	73	F	2/6/2021	2/9/2021	Site: Pain at Injection Site-Mild, Systemic: Cardiac Disorder (diagnosed by MD)-Severe, Systemic: Chest Tightness / Heaviness / Pain-Severe, Systemic: DEATH-Severe, Systemic: Heart Attack-Severe
2/28/2021		1061059	CA	77	F	1/29/2021	1/30/2021	Do not know if patient informed her physician that she received vaccine on 1/29/2021. She had appt at 3:15 pm on 1/29 and afterwards stated she received the Moderna vaccine. Reporter is uncertain if this was at a health office or clinic. She drove herself to the ER at about 3am on 1/30/2021 with increased cramping and pain.
2/28/2021		1060833	NC	74	F	2/24/2021	2/25/2021	Severe headache, nausea and vomiting
2/28/2021		1060858	TX	61	M	2/22/2021	2/22/2021	had lack of appetite before second dose. When received the second dose, he started vomiting on the way home. Was sick on and off for the next few days. Died suddenly on 2/23/2021
2/28/2021		1061040	CA	70	M	2/20/2021	2/21/2021	Text message from patient : 2.37 pm Saturday 02/20/2021 had the vaccine , waiting for 15 minutes & 2nd dose due 3/18/2021 Test message 9.44 am Sunday :feeling little sick with stomach ach No answer to phone calls on Cell/ Landline on Sunday No answer to phone call/ or text message No further communication.
2/28/2021		1061064	SD	85	F	2/26/2021	2/27/2021	Unable to breathe and died. Doctors unable to save her upon arrival

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2/28/2021		1061077	CO	86	F	2/25/2021	2/26/2021	Day after second dose decedent had fever and tremors, subsided on day three (less than 72 hours) after dose with exterm wekness followed by death less than 72 hours after second dose
2/28/2021		1061184	CA	70	M	1/14/2021	2/5/2021	Possible heart attack on 2/5/21. Complaint: " On Feb 5th I believe I experienced a mild hear attack" (Comment: He said he felt "clammy, sweaty, excruciating pain on my left side - including his left arm, and left leg, dizzy, exhausted." This happened after work, and after taking a shower. He said that was the first time he's experienced it, and that it has not happened since then. He said he has constant headaches, "It just went away yesterday.~~
2/28/2021		1061303	CA	78	F	2/1/2021	2/21/2021	Death. Patient was found unresponsive in the morning hours after her shot.
2/28/2021		1063174		85	M	2/10/2021	2/12/2021	Narrative: Patient received COVID/Pfizer #1 2/10/21 in L deltoid. (Patient home bound). On 2/12/21 reported left flank rash. 2/13 rash spread to entire abdomen/chest and UEs. Continued with fluctuations in BP/HR, fluid retention. On 2/16 labs ordered and Medrol dose pack. seen in home on 2/19 by MD - RUE swelling; diffuse rash over entire body; additional labs ordered (order to home infusion company). Patient passed in AM of 2/20/21. Reported no urine output the prior evening. Additional labs not performed due to death of patient prior to lab company arrival.
2/28/2021		1061226	MI	74	F	2/1/2021	2/6/2021	death
2/27/2021		1059825	AZ	90	M	2/24/2021	2/25/2021	30 hours after the first Covid vaccination, the resident was lethargic, non responsive with shortness of breathe.
2/27/2021		1059421	MN	91	F	2/10/2021	2/11/2021	After the second vaccine dose she reported not feeling well with unspecified symptoms for a few days. On February 18th, 2021 she visited her doctor with numbness in her hand. They thought it may be carpal tunnel and sent her home. The morning of March 18th , 2021 she had a severe stroke and was transferred to Hospital and then to other hospital. She was in the hospital until Tuesday March 23rd when she was transferred back to her home for hospice care. She died on March 26th, 2021.

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2/27/2021	1059207	AL	73	M	2/22/2021	2/23/2021	Unknown symptoms overnight. Appears patient passed away sometime after waking up next morning after receiving vaccine.
2/27/2021	1059344	KY	74	F	1/16/2021	2/25/2021	death 2/25/21
2/27/2021	1059356	PA	85	M	2/6/2021	2/7/2021	Pt fell within 24 hours after vaccine. was sent to hospital. pt was found to be hypoxic with multifocal opacities on CT scan
2/27/2021	1059360		90	M	1/22/2021	2/5/2021	Cardiac arrhythmia, EMS on site within minutes, outcome of death.
2/27/2021	1060529		88	M	2/16/2021	2/17/2021	Hypoxia, Decreased responsiveness, Narrative: 86yo male with PMHx HTN, Afib not on AC after head trauma, CVA, and colon cancer who was brought to the ED by his family on 2/17. Per documentation the pt was in his usual state of health until 2/16. Received Moderna covid vaccine #2 on 2/16/21 at 0900, and was monitored for 15 minutes following immunization no noted issues. Later that night, had myalgias and took Tylenol. Per the family he slipped on the ice and fell on his butt. Overnight, had several dark stools and vomitus. was brought to the ED by his family because he was being less responsive. Pt arrived to the emergency department in extremis. No pulse identified. CPR immediately initiated for several rounds lasting about 25-30 minutes. ROSC unable to be achieved. Patient expired on 2/17 at 1941. Of note, per previous documentation had waxing and waning mental status at baseline. No symptoms noted with 1st dose of Moderna vaccine, which was administered on 1/16/21.
2/27/2021	1059501		57	F	2/27/2021	2/27/2021	Nausea, hot flashes, cleared by medic
2/27/2021	1060080	CA	101	F	1/13/2021	1/16/2021	Death
2/27/2021	1060190	CA	70	M	2/27/2021	2/27/2021	Patient received Covid Vaccine Moderna at 1145, multiple syncopal episodes at pharmacy, sent to ER. Outcome Death
2/27/2021	1060520		87	M	1/15/2021	1/26/2021	Pt expired 11 days after receiving vaccine. No indication his passing was related to the vaccine. Narrative: No updated notes regarding cause of death. Patient's wife called to notify the facility of his passing on 1/26/2021

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2/27/2021	1060521		65	F	1/15/2021	1/30/2021	Pt passed away 15 days after vaccine, no indication death was related to vaccine. Narrative: Patient was a 64 yr old female with stage 4 serious ovarian cancer with extensive lung metastases no longer on treatment with severe CAD, HFpEF who was transitioned to comfort care on 1/23/21.
2/27/2021	1059745	OH	80	M	2/23/2021	2/23/2021	Per Patients Wife - Same day - Flu like symptoms, Nausea, Headache. Restless that night. Next day - Weak, shortness of breath. Wife called squad to get him out of his wheelchair but patient refused hospital as it gets him agitated. Patient passed away around 11 AM the day after vaccination.
2/27/2021	1060084	AL	66	M	2/19/2021	2/27/2021	Death in the field approximately 1 week after unknown covid vaccination. Unknown time of death. Found by family who hadn't spoke to pt in almost a week.
2/26/2021	1057853	CA	64	M	2/18/2021	2/21/2021	on 2/218/2021 the patient was at home and developed chest pain. Patient was transported by family to urgent care then to the ED where the patient later died.
2/26/2021	1057547	TX		M			86 year old manager received the two doses of the Moderna vaccine and died; A spontaneous report was received from a consumer, concerning an 86-year-old, male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unspecified date, the patient received their doses of mRNA-1273 (Lot number: unknown) through an unknown route in an unknown arm for prophylaxis of COVID-19 infection. On an unspecified date, it was reported that the patient passed away after receiving both doses. The cause of death was unknown. It was unknown if an autopsy was performed. The patient received both scheduled doses of mRNA-1273 prior to the event; therefore, action taken with the drug in response to the events is not applicable. The outcome of event "86 year old manager received the two doses of the Moderna vaccine and died" was fatal.; Reporter's Comments: Very limited information regarding this event has been provided at this time. No autopsy report provided. Further information has been requested.; Reported Cause(s) of Death: 86 year old manager received the two doses of the Moderna vaccine and died

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2/26/2021	1057750	PR	69	M	1/20/2021	2/8/2021	<p>Started feeling unwell; Headaches; Body aches; Chest pain; Didn't had wishes to eat; Diarrhea; COVID-19 pneumonia; A spontaneous report was received from a consumer concerning a 69-year-old male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced COVID-19 pneumonia, feeling unwell, headaches, body aches, chest pain, decreased appetite and diarrhea. The patient's medical history high blood pressure which was controlled with medication. Concomitant product use included nifedipine and fenofibrate. On 20-JAN-2021, approximately a week and a half or two prior to the onset of the symptoms, the patient received their first of two planned doses of mRNA-1273 (Batch number 030L20A) intramuscularly in the right arm for prophylaxis of COVID-19 infection. A week and a half or two later the patient stated feeling unwell, headaches, body aches, chest pain, decreased appetite and diarrhea for which patient was hospitalized on 06-FEB-2021. Since everything seemed to be fine the patient was discharged on an unknown date in FEB-2021 however, patient's family was not notified that it was a late reaction to the vaccine's first dose. Later, due to shortness of breath he was hospitalized again on 08-FEB-2021 and was diagnosed for pneumonia and was intubated on the same day. Due to COVID-19 situation patient's family could not be in the facilities and that there wasn't any follow up of the patient given to the family, so family did not have much information. During the first hospitalization(06-FEB-2021) the patient had a blood test which showed a normal result and was tested for COVID-19 and Influenza, both were negative. During second hospitalization (08-FEB-2021) the hospital said that the patient was stable. The patient's family did not know the results of the tests conducted at the time. The action taken with the vaccine in response to the events is not applicable. The outcome of COVID-19 pneumonia was fatal. The patient died on 14 Feb 2021. The cause of death was reported as COVID-19 related pneumonia. The autopsy was not done.; Reporter's Comments: Very limited information regarding this event has been provided at this time. The cause of death was reported as COVID-19 related pneumonia. Based on the current available information and the mechanism of action of mRNA-1237 vaccine, the events are assessed as unlikely related. Further information has been requested.;</p>

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							Reported Cause(s) of Death: COVID-19 pneumonia
2/26/2021	1057795	OH	82	F	1/20/2021	2/22/2021	Death 02/22/2021.
2/26/2021	1057348	TX	88	F	1/26/2021	1/28/2021	Extreme Fatigue, slurring speech, unable to stand, eat. Death on 2/5/21
2/26/2021	1057828	NC	66	M	2/3/2021	2/17/2021	Patient unexpectedly died on 2/17 after 14 days of receiving first dose of COVID-19 vaccine. EMS presumed it could be from possible myocardial infarction.
2/26/2021	1056842	FL	78	F	2/11/2021	2/15/2021	The medical facility did not treat patient as her primary care, but were informed that she passed away on 15 February 2021 of a stroke. I do not have further information on the medical aspect of this as we were not her treating provider but did administer the vaccine on 12 February.
2/26/2021	1057956	CA	67	M	2/16/2021	2/16/2021	Heard through a family member had some feeling badly and some respiratory symptoms. We do not have any real information. This is a coroners case.
2/26/2021	1057802	KY	86	M	1/19/2021	1/31/2021	Patient was transferred from hospital for further evaluation and care by pulmonologist. He started having symptoms a week before with fatigue, emesis, decreased p.o. intake, shortness of breath, vomiting and diarrhea. The two previous takes before death required increasing oxygen and family wanted everything done including intubation. He was transferred to ICU.
2/26/2021	1057281	MD	77	F	2/5/2021	2/19/2021	patient's husband reported her death that happened after first COVID-19 vaccine
2/26/2021	1057997	SC	69	M	2/25/2021	2/26/2021	~~Feeling Hot" without fever and nausea 10 hours post vaccine and resolved within 1 hour. Seizure, Hypotension, Unresponsive followed shortly by cardiac arrest and pulseless electrical activity 21 hours post vaccine. Pronounced dead 22 hours post vaccine
2/26/2021	1056845	OH	87	F	1/20/2021	1/23/2021	Three days after second COVID-19 vaccine, patient became lethargic. Due to advance directive that instructed that no life saving interventions to take place, patient continued to decline and expired on 29 January 2021.

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2/26/2021	1057704	FL		F	1/16/2021	1/16/2021	High grade MDS; Multiorgan failure; Pancytopenia; shortness of breath; Inflammatory marker increased; Chills; Fever; Fatigue; A spontaneous report was received from a healthcare provider concerning a 71Years-old female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and who experienced chills, fever, fatigue, pancytopenia, shortness of breath (dyspnoea), multi organ failure, and myelodysplastic syndrome (MDS). The patient's medical history was reported to include Breast Cancer and mastectomy. No relevant concomitant medications were reported. On 16 Jan 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch:unkown) intramuscularly for prophylaxis of COVID-19 infection. On 16 Jan 2021, The patient experienced events like chills, fever, and fatigue. On an undisclosed date, the patient was admitted to the hospital for shortness of breath. Laboratory details include Bone Marrow biopsy with abnormal results such as showed high grade MDS with 19% blasts. Blood work done with normal results. Body temperature results came out 103 degrees Fahrenheit. On 30 Jan 2021 the patient experienced worsening shortness of breath and was intubated. Her IL-6 was very high, and she had profound liver failure. She ended up needing pressors and requiring continuous renal replacement therapy. Treatment included steroids. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 12 Feb 2021. The cause of death was reported as high grade MDS. An autopsy was planned.; Reporter's Comments: Very limited information regarding these events has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: unknown cause of death

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2/26/2021	1056669	NV		U			She knows one person did die; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received BNT162B2, via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The reporter mentioned that 'she knows one person did die' on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: She knows one person did die
2/26/2021	1056660	CA	73	M	2/17/2021	2/17/2021	Cardiac Event MI or Stroke; Cardiac Event MI or Stroke; This is a spontaneous report from a contactable consumer (Son in law). A 73-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at left arm on 17Feb2021 14:00 at single dose for covid-19 immunisation. Medical history included atrial fibrillation (AFib), prostate cancer Survivor. Concomitant medication included alirocumab (PRALUENT), escitalopram oxalate (LEXAPRO), apixaban (ELIQUIS), nitroglycerin and Ca channel blocker. The patient received the first dose of BNT162B2 on an unknown date for covid-19 immunisation. The patient experienced cardiac event myocardial infarction (MI) or stroke on 17Feb2021. Adverse event result in Doctor or other healthcare professional office/clinic visit. It was unknown if treatment received for the events. Prior to vaccination, the patient was not diagnosed with COVID-19 and since the vaccination, the patient was not been tested for COVID-19. The patient died on 19Feb2021. It was unknown if an autopsy was performed. The outcome of the events was fatal. The reporter didn't know if this was associated or not. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Cardiac Event MI or Stroke; Cardiac Event MI or Stroke

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2/26/2021		1056659	NJ		M			heart issue; This is a spontaneous report from a contactable consumer. A male patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunization. The patient medical history and concomitant medications were not reported. The patient passed away after taking the vaccine. He was healthy but developed heart issue after taking vaccine. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Reported Cause(s) of Death: heart issue
2/26/2021		1056518	NJ	84	M	1/18/2021	2/13/2021	The coroner said it was some type of heart attack; A spontaneous Report Received from a Health care professional concerning a 84 year old male patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and who experienced a heart attack / myocardial infarction. The patient's had undergone triple bypass surgery years ago. Concomitant medications were vitamins. On 18-Jan-2021 prior to onset of events the patient received his first of first two planned doses of (mRNA-1273) COVID-19 vaccine of unknown batch no, unknown route and unknown site of administration for prophylaxis of COVID-19 infection. On 13-Feb-2021 the patient experienced death 27 days after the first dose of the vaccine. The coroner said it was some type of heart attack and think he expired sometime Saturday 13-Feb-2021. On 16-Feb-2021 the patient was supposed to have his second dose of (mRNA-1273) COVID-19 vaccine. The event, heart attack, was fatal.; Reporter's Comments: This is a case of death to heart attack in a 84-year-old female subject with a hx of triple bypass surgery, who died 27 days after receiving first dose of vaccine. Very limited information has been provided at this time. No death certificate provided. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of Death

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2/26/2021		1056196			M	1/11/2021	1/15/2021	<p>He collapsed due to a cardiac arrest on Friday 15Jan and passed away on 19Jan; He collapsed due to a cardiac arrest on Friday 15Jan and passed away on 19Jan; his cardiac arrest was caused by an arrhythmia; This is a spontaneous report from contactable pharmacist via Pfizer Sales Representative. A 45-year-old male patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number not reported), via an unspecified route of administration on 11Jan2021 at single dose for covid-19 immunisation. Patient had a long history of congenital heart issues. He had been stable and closely monitored for the past 20 years. He had no history of arrhythmia. The patient's concomitant medications were not reported. Patient collapsed due to a cardiac arrest on Friday 15Jan2021 and passed away on 19Jan2021. The doctors feel that his cardiac arrest was caused by an arrhythmia. Reporter reported this through the v safe app. And received a message stating reporter would be contacted by the cdc. After patient passed away reporter replied stop to v safe. But still had not been contacted by anyone. This may or may not be related. Reporter have no way of knowing. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The Company cannot completely exclude the possible causality between the reported "collapsed due to a cardiac arrest", "cardiac arrest was caused by an arrhythmia" and the administration of COVID-19 vaccine, BNT162B2, based on the reasonable temporal association. The patient's pre-existing long history of congenital heart issues might have provided alternative explanations. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.; Reported Cause(s) of Death: He collapsed due to a cardiac arrest on Friday 15Jan and passed away on 19Jan; his cardiac arrest was caused by an arrhythmia; He collapsed due to a cardiac arrest on Friday 15Jan and passed away on 19Jan</p>

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2/26/2021		1056011	TX	75	M	2/7/2021	2/10/2021	My grandpa had a stroke on the 15th of February. He claimed he had been feeling "off" for a few days, but didn't say anything. A blood clot had formed in his brain. He was doing better and about to go to rehab to strength his right side of his body. On the 22nd he took a turn for the worst. He was having trouble breathing and they sedated and partially paralyzed him to put a tube in his mouth. I believe another blood clot had formed and oxygen wasn't properly going through his body. They could not stabilize him, and he passed away the same day.
2/26/2021		1057082	KY	86	M	1/30/2021	2/8/2021	Pt admitted to Hospital on 2/8/21 with 2-3 days of SOA and cough. His wife was diagnosed with COVID-19 at approximately the same time when the patient received 1st COVID-19 vaccine. Pt had not felt well since receiving the vaccine and had some changes in taste or smell. He became acutely worse 2-3 days p/t admission with DOE, productive cough, H/A, N/V, profound weakness and bilateral infiltrates on CXR. He was hypoxic on room air. During hospitalization, has gone back and forth from BiPAP to HFNC. Unable to prone. Pt and wife discussed goals of care and decided on comfort measure approach. Pt expired on 2/19/21.
2/26/2021		1059623	AR	73	M	2/11/2021	2/17/2021	Possible Stroke per Medical examiner but Reported symptoms after covid vaccine 2/11 therefore being considered poss Covid vaccine related also. No hospitalization prior to death. (Symptoms reported to office 2/17) Fatigue, decreased appetite-
2/26/2021		1057363		89	M	2/13/2021	2/13/2021	Patient with severe dementia in Hospice Care
2/26/2021		1058033	CA	94	F	2/16/2021	2/18/2021	Patient had a stroke two days after vaccine. Received TPA for treatment of stroke due to acute onset of altered mental status. Had a history of afib, not on anticoagulation, which is likely cause of stroke. Family opted for comfort measures given poor neurologic status. Passed awaiting hospice placement
2/26/2021		1062962		61	F	1/28/2021	2/4/2021	[COVID-19 mRNA vaccine (Pfizer-BioNtech)] treatment under Emergency Use Authorization (EUA)

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2/26/2021	1062961	NJ	90	M			Called patient to refill medication and spoke with daughter. She stated that her father had passed away last week.
2/26/2021	1060525		84	M	1/19/2021	1/20/2021	death Narrative: This was reported to VAERS by another entity and records were requested.
2/26/2021	1059048	TX	72	F	2/22/2021	2/22/2021	Fever, chills, fatigue, muscle aches, nausea, death 48 hours after injection
2/26/2021	1059001	HI	91	F	1/21/2021	2/22/2021	Patient had declining health for the past 6 months, dementia and unable to walk. Patient had decreased appetite starting 1/1/21. After 1st vaccine shot patient appetite decreased further. After 2nd vaccine shot patient fatigue increased to the point where she could not get out of bed and had minimal appetite. Patient passed away 10 days after receiving 2nd shot on 2/22/21. Patient did not go to ED and was not hospitalized.
2/26/2021	1058976	MI	72	M	2/12/2021	2/26/2021	Unknown the exact event, but patient has passed away.
2/26/2021	1058963	WI	91	F	2/5/2021	2/18/2021	2/18/2021: Witnessed cardiorespiratory arrest with PEA arrest upon EMS arrival
2/26/2021	1058192	NE	90	M	2/18/2021	2/24/2021	2/24/21 Patient Died. 02/23/21. Patient came to ED for weakness/falls. Patient had fallen on 02/21 and 02/23. UA was done in LTC, and he was started on ciprofloxacin 02/22/21. Treatment was to put patient on comfort cares (morphine + lorazepam)
2/26/2021	1058160	NE	97	M	2/11/2021	2/25/2021	Resident expired on 2-25-21

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2/26/2021		1060527		74	M	2/17/2021	2/18/2021	loss of consciousness;febrile Narrative: Patient received his 2nd vaccine at 10am 2/17. That evening he felt subjectively febrile and then suffered a ground level fall at 0400 on 2/18. He did not lose consciousness or injure his head. EMS was contacted and assisted him into bed. At 0600, wife noted increased work of breathing, which prompted another EMS call, who found him hypoxic with fever of 106. He was transported to a community hospital, where he was found to have temp 102.9 and blood pressure in 70s-80s systolic. He was transferred to hospital at 1300 on 2/18/21, requiring norepinephrine for pressure support after fluid resuscitation. He c/o stiffness and soreness all over but presenting ROS was otherwise negative. Patient was treated with 4L IV fluids and vancomycin and piperacillin/tazobactam at the outside ER. Here at the hospital he was treated with vancomycin, piperacillin/tazobactam and levofloxacin along with IV fluids and norepinephrine. Despite this he had several fevers with Tmax 103.5F the night of 2/18-2/19 and he required norepinephrine plus vasopressin overnight to maintain blood pressure. Piperacillin/Tazobactam was discontinued in favor of meropenem. His last fever was at 6am on 2/19. ID consult was obtained 2/19/21 and vancomycin and levofloxacin were weaned off. Ultimately his blood pressure improved and he was weaned off of all vasopressors the morning of 2/20. Notably, he never developed severe hypoxemia at rest while in the ICU, but did require BiPAP non-invasive ventilation at night instead of his usual CPAP to keep his oxygen levels > 90% while sleeping and additionally had desaturations into the low 80% range with exertion from which he was slow to recover. His oxygen saturation was >90% on 30-40% FiO2 via aerosol mask overnight and 3L (his current baseline) NC during the day. He was transferred out of the ICU on 2/21 based on hemodynamic improvement, stable oxygenation, and improved mentation and symptoms. Unfortunately, on the morning of 2/22/21, patient had an abrupt change in status and was found to be unresponsive with hypercarbic respiratory failure and hypotension. ABG during this event was 7.16/121/65. BiPAP was initiated as patient's code status was DNR/DNI. CXR with no significant change from 2/18/21. CT of head without contrast was negative for acute processes. Based on lack of rapid improvement, the decision was made by wife to transition to comfort care.

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						Patient died at 1446 on 2/22/21. **Of note: patient was admitted for 1 week for covid 19 pneumonia November 2020. During this hospitalization he was found to have chronic R sided PE, no acute PE.
2/26/2021	1058845 TX	88 F	2/24/2021	2/26/2021		Pfizer-BioNTech COVID- 19 Vaccine EUA Patient received COVID-19 Vaccine dose #2 on February 24, 2021. On February 25th at 10:36 AM, Patient's son called physician to report some side effects to second dose of Covid vaccine. She had diarrhea when she came home yesterday. Son has been up all night with her as patient has had a "hacking cough, feels terrible, and now has had diarrhea x2". Patient has taken Advil and will be taking tylenol periodically through out the day for her side effects. Patients son notified physician at 09:55 AM on February 26 that the patient has expired.
2/26/2021	1058190 DE	71 F	2/22/2021	2/23/2021		On the evening of 2/23/221 at 9:00 pm, resident reported feeling SOB, BP 80/44, Pulse 53, O2Sat 95% on 3L oxygen, hands cold, pulse weak. Temp 92.5F MD notified. EMS activated. EMS arrival and HR 20. Family refused transport to ER. Resident expired at 2:40 am on 2/24/21 Meds continued: duloxetine, VITd2, hydralazine, synthroid, lisinopril, mag ox, folplex, pantoprazole, potassium chloride, ellipta, ensure, hydrocortisone cream, boost, deprox, xanax, morphine, lorazepam, tylenol, albuterol inhalation, ventolin inh.
2/26/2021	1058171 IN	89 M	1/22/2021	2/7/2021		Death
2/26/2021	1058266 ID	72 M	2/20/2021	2/24/2021		Pale, not eating, no urine output
2/26/2021	1058447 PA	47 M	2/23/2021	2/24/2021		Moderna COVID- 19 Vaccine EUA Patient was found deceased in the community near his home address on 2/24/21. The Medical Examiner's cause of death is currently listed as "Drug Intoxication - Accidental Overdose." Per the MEO, post mortem urine toxicology was positive for cocaine and fentanyl. His death is believed to be related to a cocaine product that was adulterated with fentanyl and is not believed to be related in any way to the Moderna COVID-19 vaccine. This was explicitly stated by the Medical Examiner's Office.
2/26/2021	1058464 WI	72 M	1/25/2021	2/8/2021		Pt tested Covid positive 2/8/2021.

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2/26/2021		1058569	AR	55	M	2/25/2021	2/25/2021	PATIENT DIED IN HIS SLEEP NIGHT AFTER ADMINISTRATION
2/26/2021		1058793	OK	66	M	2/24/2021	2/25/2021	Pt had only complained of a sore arm after receiving the vaccine- pt died on 2/25/21 from what they feel was a massive heart attack- unsure if related to vaccine at all
2/25/2021		1054434	KY	83	M	1/29/2021	2/24/2021	Patient reported to emergency room on 2/20 with increasing of shortness of breath, quantitated unable to walk from room to room in his house. Patient was admitted.
2/25/2021		1054694	NM	83	M	1/29/2021	2/13/2021	Pt received vaccine on 1/29/2021 and died on 2/13/2021. Wife called agency and noted the pt received his 1st dose of vaccine and was having "side effects and began declining". It is unknown what side effects he was having.
2/25/2021		1054551	KY	70	M	1/16/2021	2/18/2021	Resident expired on 2/29/21.
2/25/2021		1054592	KY	68	M	1/16/2021	2/24/2021	Resident expired on 2/24/21, under hospice care.
2/25/2021		1054435	AL	89	M	1/27/2021	1/28/2021	Patient passed on 01/28/2021 per family member.
2/25/2021		1054698	KY	89	F	1/18/2021	1/30/2021	THE RESIDENT WAS ROUTINELY TESTED FOR COVID ON 1/29/21 AND POSITIVE RESULTS RETURNED ON 1/30/21; WAS ASYMPTOMATIC AT FIRST, BUT DEVELOPED SYMPTOMS ON 1/31/21 THAT PROGRESSED AND THE RESIDENT DIED ON 2/7/21
2/25/2021		1054699	WI	82	M	1/20/2021	1/21/2021	Patient was found at 6 AM on 01/21/2021 - he passed away during his sleep
2/25/2021		1054859	IN	102	M	1/15/2021	1/22/2021	No details - patient died on 1/22/2021
2/25/2021		1054337	DE	90	M	2/16/2021	2/17/2021	FOUND DEAD IN HIS OWN BED
2/25/2021		1053758	TX	58	F	2/2/2021	2/2/2021	Systemic: Brain aneurysm-Severe, Systemic: Headache-Severe
2/25/2021		1054813		82	M	1/8/2021	1/29/2021	Chest clear - Hospitalized for a UTI
2/25/2021		1054192	AZ	71	M	2/16/2021	2/23/2021	Pt's wife reports death 2/23/2021

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2/25/2021		1054175	VA	71	M	2/17/2021	2/23/2021	Resident found unresponsive, CPR initiated and EMS called. EMS called time of death after arrival.
2/25/2021		1054171	VA	80	M	2/17/2021	2/21/2021	Resident found unresponsive in his room. CPR performed and patient expired.
2/25/2021		1054160	IL	36	M	2/11/2021	2/12/2021	2/12/2021 woke up with sore arm and back. 2/13/2021 woke up with headache around 1am. Headache and nausea all morning. Mid-late afternoon started having seizures. Admitted to Hospital 2/15/2021 expired. Reported per wife on 2/25/2021.
2/25/2021		1054114	IL	102	F	1/27/2021	2/22/2021	Patient was hospitalized 15 days after receiving vaccine. Admission was not due to vaccine and was admitted for acute ascites and patient had reported fever and hypoxia. Patients admission resulted in death 7 days after being admitted to hospital.
2/25/2021		1053694	TX	62	M	2/8/2021	2/17/2021	Sudden Death on 2/17/2021
2/25/2021		1054080	MI	67	M	2/18/2021	2/21/2021	cardiac arrest, death: 2/21/21
2/25/2021		1054966	NC	79	M	2/12/2021	2/16/2021	Mentation has declined since hospital discharger for fall on 2/6/202021. Patient has also had significant poor oral intake. Brought in due to apneic episodes. Abdominal pain - diffuse tenderness (right sided) Elevated liver enzymes - likely secondary to dehydration Increased serum creatine kinase - likely due to dehydration
2/25/2021		1053978	GA	77	F	2/23/2021	2/24/2021	pt woke up at 0400 with fever, chills, and body aches progressing over 4 hours to the point when she became unresponsive. husband called 911, pt was declared dead at the time of EMS arrival around 1200
2/25/2021		1053788	TN	93	F	2/2/2021	2/15/2021	Received call that patient is now deceased
2/25/2021		1055791	IN	82	F	1/11/2021	1/15/2021	Was given without consent from POA patient got severely sick and never recovered later passed away only live 1 month POA did not allow second vaccine to be given just wanted to report this vaccine was given illegal without POA knowledge
2/25/2021		1053879		67	F	1/20/2021	1/30/2021	Shortness of breath - related to chronic comorbidities

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2/25/2021	1059621	MA	71	F	1/12/2021	1/14/2021	1/14/21 - Resident complained of SOB. SPO2 66% on RA, vs 105/66-96-20 T98.2 O2 administered Pox 97% Binax test revealed (+) COVID results. Resident transferred to COVID wing. Family (HCP) updated and declined transfer to hospital Resident continued with fever, hypoxia and lethargy. Family elected CMO and Hospice notified. Resident died on 1/16/2021 @ 930AM.
2/25/2021	1055009	IL	87	M	2/4/2021	2/9/2021	Patient deceased 2/9/2021 when called for second dose vaccine appointment
2/25/2021	1055629	WA	96	F	2/5/2021	2/12/2021	Pt tested positive for COVID-19 on 2/10/2021, and deceased on 2/12/2021, per caregiver at.
2/25/2021	1059622	MA	85	M	2/2/2021		Resident rec'd COVID vaccine #2 on 02/02/2021 and was hospitalized on 02/03/2021. Diagnosed with UTI & Metabolic Encephalopathy. He was re-admitted to facility on 02/05/2021. On 02/08/2021 resident was found to be unresponsive with small amount of tan emesis in mouth and on bed. CPR initiated and resident was transferred to ER. ER MD notified facility that resident had died.

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2/25/2021		1055819	AZ	83	F	1/26/2021	1/27/2021	On January 1, 2021, patient was admitted to Medical Center with COVID. Tested positive on January 2, 2021. Spent 10 days in hospital. Once recovered from pneumonia and fever gone, on January 10, 2021, she was transferred to Rehabilitation Center for continued treatment. She spent 16 days there. She developed UTI and CDIF infections and was on/off oxygen. She started physical therapy. She was scheduled to be released to go home on January 27, 2021. On January 26, 2021, the day before going home, Rehabilitation Center gave her the Moderna vaccine. On January 27, the day she went home, she started feeling very weak and couldn't walk. My dad tried lifting her and they both fell to the ground. My dad called 911 and she was taken to Medical Center, with high fever and possible stroke symptoms (which later was negative). Two days later, she had difficulty breathing and was put on a ventilator. She was on a ventilator for about three days. They took it off and she slowly started recovering. The doctors did all kinds of tests (blood clot in lung, heart, etc.) and all was negative. The only thing they could trace it to was an adverse reaction to the vaccine. After spending 11 days at hospital and treating her for various infections, her heart stopped and she passed away suddenly.
2/25/2021		1055691	MI	93	M	1/19/2021	1/20/2021	Massive ischemic stroke with aspiration, unable to arouse on the morning of 1/21/2021 and placed on Hospice with death 1/24/2021
2/25/2021		1055618	WA	80	F	2/5/2021	2/16/2021	Pt tested positive for COVID-19 on 2/10/2021, and was deceased on 2/16/2021 at.
2/25/2021		1055613	WA	97	F	2/5/2021	2/10/2021	Pt tested positive for COVID-19 on 2/10/2021 and was deceased on 2/16/2021 per the caregiver.
2/25/2021		1055588	WA	83	F	2/5/2021	2/15/2021	Pt tested positive for COVID-19 on 2/10/2021 and was hospitalized on 2/15/2021 and deceased on 2/18/2021 at the hospital of admission, per caregiver.
2/25/2021		1055563	WA	93	F	2/5/2021	2/18/2021	Pt tested positive for COVID-19 on 2/10/2021 and died from illness related to COVID-19 on hospice at home on 2/18/2021, per care facility.
2/25/2021		1055418	TN	71	F	2/15/2021	2/24/2021	Patient suffered a stroke and passed away

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2/25/2021	1055107		91	F	12/29/2020	1/15/2021	No documented vaccine reaction Hospitalized due to co-morbidities

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2/25/2021		1055298	IL	71	F	1/20/2021	2/6/2021	Emergency Room HPI: The patient is a 71 y.o. female with a PMH notable for COPD, hypertension and anxiety and depression who presented on 2/6/2021 for evaluation of shortness of breath. Patient presented to our emergency room yesterday morning from local nursing facility rehab nursing staff reported that she had had a increased shortness of breath for the last 3 days she has been diagnosed with COVID-19 on 2-2-2021. Patient has also received both COVID-19 vaccines. Patient presented to the emergency room with labored respirations conscious awake and was on a non-rebreather at 15 L. upon arrival to our emergency room patient's temperature 101.6°, pulse 169, respirations 40 to blood pressure 142/91 and oxygen saturation 100% on 15 L non-rebreather. Patient received a chest x-ray that showed chronic emphysema and fibrotic changes in the lung no acute processes identified. Patient's white count 12.8, glucose 197, creatinine 1.2, lactic acid 4.6, cardiac enzymes negative, D-dimer 1180, patient has urine culture pending. Patient has received about 3 L normal saline boluses patient was having hypotension 86/52. Patient also received IV acetaminophen a 1000 mg IV in the emergency room along with Decadron 10 mg IV piggyback. Patient was admitted acute care for the need of IV fluids and IV antibiotics for COVID-19 and sepsis 2/12 admit Brief history and initial physical exam: Patient is a 71 year old long-term resident of Rehab and Healthcare. Unfortunately, she contracted coronavirus (COVID-19) at the nursing home. Her respiratory status started to decompensate and so she was brought into the hospital. Initial workup showed significant bilateral pleural effusions and ground-glass opacity of both lungs. She had a significant supplemental oxygen requirement. She was admitted for further evaluation and treatment. Hospital course: The patient was admitted and started on IV Remdesivir. She was given IV Decadron. She was given immune support vitamins. Despite this, her sepsis worsened. When it became apparent that the patient was not going to recover, her daughter did make her comfort care only and hospice was consulted. The patient was found to be appropriate for general inpatient hospice and was made comfort care. Her requirement for morphine and Ativan did slowly rise. Eventually, the patient did succumb to her respiratory failure. Time of death was called at 10:00 p.m. on February 15, 2021

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								Discharge Condition: expired. Presume cause of death with cardiopulmonary arrest secondary to acute respiratory failure secondary to coronavirus (COVID-19) pneumonia Disposition: Deceased
2/25/2021		1055290	MI	94	F	2/8/2021	2/11/2021	Death occurred 02/14/2021
2/25/2021		1055267	VA	91	M	2/24/2021	2/25/2021	Death
2/25/2021		1055203	OH	67	M	2/17/2021	2/18/2021	Began having SOB and cough on 2/18/21, the day after his first vaccine. Had a routine physician appointment for diabetes on 2/15/21 with no documentation of these complaints. Presented to the hospital on 2/23, soon after required intubation. Admitted with severe pneumonia, diffuse colitis, and sepsis. Condition continued to worsen until patient passed away on 2/24/21 @ 1632.
2/25/2021		1055149	MI	95	M	2/16/2021	2/17/2021	This is a hospice patient under the care of Hospice at an affiliated nursing home. Pt received the vaccination around noon on 2-16-21 by a representative from Pharmacy. The following afternoon 2-17-21 at 14:45 the pt started to experience severe SOB resp rate 36, audible wheezing and use of respiratory accessory muscles. BP180/80, 113 pulse temp 98. Pt was given morphine and ativan. The respiratory distress was eased however pt never returned to baseline and died 2-22-21 around 4am.
2/25/2021		1055122	ID	88	F	2/20/2021	2/21/2021	Pale, Short of Breath, Hypoxic, Lethargic within minutes became unresponsive and died.
2/25/2021		1055027	IL	81	M	1/29/2021	2/15/2021	patient deceased no show to 2nd appointment notified by family
2/25/2021		1060524		79	M	2/23/2021	2/24/2021	Death, unknown cause Narrative: Patient received COVID19 vaccine on 2/23/2021 at 14:27. On 2/24/21, patient's family found patient deceased at 12:08am. The local coroner had called the MC to let us know on 2/24/21 at 12:55am. Coroner did not suspect foul play.
2/25/2021		1055070	OR	41	F	2/19/2021	2/21/2021	Client died on 02/21/2021 and had received the second dose of the vaccine series on 02/19/2021.

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2/25/2021	1055341	CA	91	F	1/29/2021	2/13/2021	Sudden death two weeks after first dose of vaccine was administered. No previous symptoms or signs. Family opted not to do an autopsy so cause of death (stroke or heart attack) not known.
2/24/2021	1051942	NY	84	M	2/11/2021	2/18/2021	Hepatorenal syndrome- Death
2/24/2021	1051975		86	F	1/19/2021	2/23/2021	Patient passed away within 60 days of receiving a COVID vaccine
2/24/2021	1051993	NY	95	F	2/5/2021	2/14/2021	Notified on 2/24/2021 that patient passed away on 2/14/2021. Other cause of death - non-covid -19 related
2/24/2021	1052014	TX	91	F	2/6/2021	2/15/2021	Extreme difficulty breathing upon exertion, collapsed shortly after walking started, loss of consciousness, and death
2/24/2021	1051923		97	F	1/31/2021	2/21/2021	Patient passed away within 60 days of receiving a COVID vaccine
2/24/2021	1052049	MN	67	M	2/23/2021	2/23/2021	Patient was into the clinic on the afternoon of 2/23/21 for a COVID-19 vaccine. He had a podiatry clinic visit after his vaccine same day. It was reported by the patients family physician that patient stated he didn't feel well and suddenly collapsed at home at approximately 4:45 pm. Emergency medical personnel were not able to revive him. Patient died at approximately 4:45 pm on 2/23/21.
2/24/2021	1052070	NJ	95	F	2/22/2021	2/22/2021	2/22/2021 10:09 pm resident reported 1 episode of being nauseous and having dry heaves, no temperature, MD notified and nurse was told to continue to monitor, no new orders, daughter made aware. Vital signs being done every 4 hours. 2/23/2021 3:04am resident complains of nausea, scant BM amount x 2, MD notified and no new orders, continue to monitor and encourage fluids, vital signs continue every 4 hours.
2/24/2021	1052045		85	F	2/12/2021	2/22/2021	Patient passed away with in 60 days of receiving the COVID vaccine series
2/24/2021	1051803	GA	47	F	1/8/2021	1/15/2021	unknown, was informed by Health Director that person had passed away
2/24/2021	1051699	OH	91	M	1/27/2021	2/15/2021	Death on 02.15.2021.

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2/24/2021	1051675	WI	78	F	1/28/2021	2/1/2021	Patient passed away on 2/1/21 at the Health System. She was there for congestive heart failure (CHF) which had been a problem for her since contracting COVID-19 (symptoms began 10/29/20 and tested positive 10/30/20). She had been to see her medical provider several times after her isolation period as well as a few trips to the hospital for, what they called "CHF flare-ups". Her last hospitalization began on January 30, 2021. Her social worker reported on 1/31/21 that "she would likely be returning in another day or two".
2/24/2021	1051451			F			died 15 min later; This is a spontaneous report from a Pfizer Sponsored Program. A non-contactable consumer reported that a female patient (mother) of an unknown age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) at single dose via an unknown route on an unknown date for Covid-19 immunization. Medical history and concomitant drug were not provided. The reporter stated her mother took the vaccine and died 15 min later. No follow-up attempts are possible. Information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: died 15 min later

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2/24/2021	1051267	FL	72	M	2/4/2021	2/4/2021	<p>Passed away; Slight soreness in arm; A regulatory report was received from a pharmacist concerning a 72-year-old male patient who received Moderna covid-19 vaccine and death occurred 4 days after the vaccine and also experienced soreness in his arm after the vaccine administration. The patient's medical history includes diabetes mellitus, Hypertension, Hypercholesterolemia, CVD, previous stroke and Depression. No relevant concomitant medications were reported. No information on allergies. On 4-FEB-2021 at 10:43 am, prior to the onset of events, the patient received his first of two planned doses of covid-19 vaccine for the prophylaxis of covid-19 infection. He had soreness in his arm the day following the shot, but he had no other symptoms. He passed away on 08-FEB-2021 at 10 am. As per his wife, they never made it to the hospital, and he had poor health prior to vaccination. Action taken with 2nd dose of Moderna Covid-19 vaccine was not applicable. The outcome of the event death is fatal.; Reporter's Comments: This is a 72 year old male with hx of diabetes mellitus, hypertension, hypercholesterolemia, and CVD who died 4 days after the vaccine was administered. No autopsy report provided. No further information is expected in this regulatory report case.; Reported Cause(s) of Death: Unknown cause of death</p>

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2/24/2021		1051263	PA	71	F	1/27/2021	2/1/2021	Passed away; Found unconscious; Coma; Lack of oxygen to the brain; A spontaneous report was received from a consumer, concerning his mother, a 71-year-old female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and passed away, prior to death, patient experienced lack of oxygen to the brain and was found unconscious and went to coma. The patient's medical history reported included seizures. Concomitant medications included phenobarbital, lamotrigine and levetiracetam. On 27 Jan 2021, approximately six days prior to the onset of events, the patient received their first of two planned doses of mRNA-1273 (lot number: 030L20A) intramuscularly for prophylaxis of COVID-19 infection. On 01 Feb 2021 at 4 am, the patient was found to be unconscious on the couch, hence she was rushed to the hospital with lack of oxygen to the brain. Later, she went into a coma, hence she was in hospital for 30 hours and then was transferred to a different hospital for a second opinion on 06-Feb-2021, where she was passed away at 02:20 PM. Treatment information was not provided. Action taken with mRNA-1273 in response to the events were not applicable. The outcome of events, lack of oxygen to the brain, found unconscious and coma were considered unknown. The outcome of event passed away was fatal as she died on 06 Feb 2021 at 2:20 pm. The cause of death was not provided. Plans for an autopsy were unknown.; Reporter's Comments: This is a case of 71-year-old female subject with a history of seizures who died 6 days after receiving first dose of vaccine. Very limited information has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Passed away
2/24/2021		1052106	OR	53	F	2/11/2021	2/17/2021	While at counseling appointment on February 17 patient had witnessed sudden cardiac arrest and was not able to be resuscitated. She was pronounced dead at 12:09. At the time of death her glucose was about 500.
2/24/2021		1051651	NY	58	M	2/23/2021	2/23/2021	Abdominal pain, nausea and vomiting, shortness of breath, acidosis, hypoglycemia, death. Onset of abdominal pain was 30 minutes after administration of the vaccine followed by 20+ episodes of vomiting and dry heaving.

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2/24/2021	1051666	OH	85	M	1/29/2021	1/29/2021	Pt presented to ER with SOB on 01-29-2021. He was admitted to Healthcare with acute CHF exacerbation, elevated lactate, anemia and elevated d-dimer. Pt reports getting SOB getting up to go to the bathroom. Pt was intubated. He developed pulmonary edema. Pt expired on 02-02-2021 at 10:13 PM.
2/24/2021	1053393	NM	76	M	2/3/2021	2/4/2021	Patient felt achy, tired starting the day after the vaccine. Per his wife, he was very tired and "losing stamina". On 2/13/21, he woke up feeling dizzy and weak. His wife asked him if he wanted to go to the doctor and he declined. He ate breakfast and went to rest in his easy chair. He passed away an hour later.

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2/24/2021	1051445		61	F	1/28/2021	1/28/2021	chest x-ray shows numerous bilateral patchy opacities; catastrophic brain bleed; Brainstem reflexes were lost; Patient died; shortness of breath; nausea; diarrhea; worsening shortness of breath/numerous bilateral patchy opacities; immunosuppressed status; This is a spontaneous report from a contactable pharmacist and a contactable other health professional. A 61-year-old female patient (not pregnant) received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL9261), intramuscular at arm right on 28Jan2021 (at the age of 61 years) at single dose for COVID-19 immunization. The patient medical history included bilateral lung transplant on 23Jun2017, lymphangioleiomyomatosis, hepatocellular carcinoma, antibody mediated rejection of lung transplant , bronchiolitis obliterans syndrome, grade 0P, major depressive disorder, RLS (restless legs syndrome), chronic insomnia, long term current use of systemic steroids OSA (obstructive sleep apnea), iron deficiency anemia, bilateral sciatica, hoarseness of voice, memory change, laryngeal stridor, pure hypercholesterolemia senile nuclear cataract, bilateral myopia of both eyes, osteoporosis without current pathological fracture, alopecia, immunosuppressed status, all from an unknown date and unknown if ongoing. Concomitant medication included acyclovir (formulation: capsule, strength: 200 mg) oral at 200 mg twice daily, salbutamol (ALBUTEROL HFA) as needed (MCG/ACT inhaler take 2 puffs by inhalation every 4 hours as needed) for wheezing (shortness of breath), atorvastatin (LIPITOR, formulation: tablet) oral at 80 mg once a day, azithromycin (ZITHROMAX, formulation: tablet)oral at 250 mg (every Monday, Wednesday, Friday), bupropion hydrochloride (WELLBUTRIN XL, formulation: tablet, strength: 150 mg) oral at 150 mg once a day, calcium citrate/cholecalciferol (CALCIUM + VITAMIN D, formulation: tablet) oral at 2 dose form once a day (every morning), everolimus (ZORTRESS, formulation: tablet, strength: 1 mg) oral at 2 mg twice a day, fluticasone propionate/salmeterol xinafoate (ADVAIR, strength: 500 ug/ 20 ug) twice daily (1 puff by inhalation), gabapentin (NEURONTIN, formulation: capsule, strength:100 mg) oral at 300 mg daily (by mouth nightly), loratadine (CLARITIN, formulation: tablet, strength: 10 mg) oral at 10 mg as needed, metoprolol tartrate (LOPRESSOR,

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formulation: tablet, strength: 25 mg)oral at 50 mg twice daily, minoxidil (ROGAN, strength: 5%) topical apply 1 cap full every other day to affected area on scalp for alopecia, ondansetron (ZOFran, formulation: tablet, strength: 4 mg) oral at 4 mg as needed for nausea, pantoprazole sodium sesquihydrate (PROTONIX, formulation: tablet, strength: 40 mg) oral at 40 mg once a day, prednisone (DELTASONE, formulation: tablet, strength: 5 mg) oral at 5 mg daily (every morning), sertraline hydrochloride (ZOLOFT, formulation: tablet, strength: 100 mg) oral at 100 mg twice a day (every morning), sulfamethoxazole/trimethoprim (BACTRIM) 400-80 mg per tablet (1 tablet by mouth every Monday, Wednesday, Friday), tacrolimus (formulation: capsule) at 3 mg daily (2 mg every morning and 1 mg at night), salbutamol sulfate (PROVENTIL HFA) as needed for wheezing (shortness of breath), salbutamol sulfate (VENTOLIN HFA) as needed for wheezing (shortness of breath) , salbutamol sulfate (PROAIR HFA) as needed for wheezing (shortness of breath), ascorbic acid/ferrous fumarate/folic acid/ retinol (PRENATAL, formulation: tablet) oral daily. The patient previously took NSAIDs and voriconazole and experienced drug allergies. It was reported that the patient presented to emergency department (ED) on 04Feb2021 with chief complaint of worsening shortness of breath, nausea and diarrhea for past week since receiving since receiving COVID-19 vaccine. Full viral panel including COVID-19 was not detected. All blood cultures and respiratory cultures were negative. Patient chest x-ray shows numerous bilateral patchy opacities which is significantly different from her previous chest x-ray here. Empiric rejection treatment initiated including high dose methylprednisolone, plasmapheresis, IVIG, thymoglobulin. She continued to decline and ultimately required intubation, proning and paralyzing on 08Feb2021 and then VV ECMO cannulation on 13Feb2021. Acute pupil exam changes in the early am hours of 15Feb2021 prompted urgent head CT which revealed catastrophic brain bleed. Brainstem reflexes were lost soon after. Despite placing an EVD emergently at bedside, brain stem reflexes were not recovered. The events were all serious. The patient outcome of the events was fatal. The patient died on 15Feb2021. It was not reported if an autopsy was performed.; Sender's Comments: Based on available

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						information, a possible contributory role of the subject product, BNT162B2 vaccine, cannot be excluded for the reported events due to temporal relationship. However, the reported event may possibly represent intercurrent medical conditions in this patient. There is limited information provided in this report. Additional information is needed to better assess the case, including complete medical history, diagnostics, counteractive treatment measures and concomitant medications. This case will be reassessed once additional information is available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: Chest x-ray shows numerous bilateral patchy opacities; Catastrophic brain bleed; Brainstem reflexes were lost; shortness of breath; nausea; Diarrhea; Worsening shortness of breath/numerous bilateral patchy opacities
2/24/2021	1052108		91 F	1/28/2021	2/19/2021	Patient passed away within 60 days of receiving the COVID vaccine series
2/24/2021	1060528		95 M	1/14/2021	1/22/2021	Death due to underlying condition for hospice pt. Narrative: This was a 95 yo patient residing at home with daughter. Patient reported to PCP on 1/4 c/o poor appetite and weight loss. Daughter reported that patient was very frail and requested a hospice referral. Outside medical records indicate that patient was dx with pneumatosis of the cecum and peritonitis. Patient also had severe atherosclerotic disease with near complete occlusion of the infrarenal abdominal aorta. Due to age and frailty, patient was placed in hospice care where he passed away on 1/22/21.
2/24/2021	1053322 MO		76 F	12/29/2020	1/31/2021	Pt had passed away before second dose

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2/24/2021		1053191	IN	67	F	2/8/2021	2/11/2021	Vaccine administered 02/08/2021 , by Thursday 02/11/2021 patient almost nonverbal, by Monday 02/15/2021 patient went to the hospital with bruising, sores on her stomach and clots reported as thrombocytopenia, deceased by Friday 02/19/2021.
2/24/2021		1052972	MO	87	F	2/23/2021	2/23/2021	RESIDENT EXPIRED
2/24/2021		1052820	OH	73	F	1/25/2021	1/26/2021	Approximately 2 weeks after the first COVID vaccine she developed shortness of breath that was much more significant than she had previously. This was the first time she had expressed this symptom to me as being something she was concerned about and difficult for her to manage (we have spoken almost daily for many years). Within 24 hours of the second dose of the mRNA vaccine, they called an ambulance to get her and she was taken to the hospital and diagnosed with bacterial pneumonia. The doctors said it was unrelated, but I found a study with a different vaccine (LAIV) that also seemed to increase the incidence of bacterial pneumonia. They hypothesized through diverting the immune system. So while I don't think the vaccine gave her the bacteria, I do think it may have caused her immune system to be temporarily compromised allowing the bacteria to grow out of control. I feel this is important to report to look for these types of patterns as perhaps it can help others avoid the death spiral that happened to my mother. There were also intervening events between her hospitalization and her death including two successful surgeries (one for a broken hip and another to put in stents in her leg). So to summarize, the first vaccine was within about 2 weeks of the onset of her breathing problems. Within 24 hours of the second vaccine she was hospitalized and diagnosed with bacterial pneumonia. As she was battling bacterial pneumonia in the hospital she broke her hip and was found to have reduced peripheral circulation and had 2 surgeries to correct those. They were successful according to the surgeons, however she died within a week or so of the surgeries. She had other comorbidities as well which I'm sure predisposed her such as diabetes, hypertension and cancer for many years.
2/24/2021		1052809	CA	73	M	2/16/2021	2/17/2021	Patient passed away

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2/24/2021	1052179		77	M	1/25/2021	2/21/2021	Patient passed away within 60 days of receiving a COVID vaccine
2/24/2021	1052738	VA	95	M	2/5/2021	2/6/2021	He vaccine on 2/5/2021 I went to see my husband the next day he was shaking and his mouth was open shaking, and he had fever of 105, they gave him Tylenol suppositories and he passed away 2 hours later. They should not have given him should not have given him the vaccine that is on hospice, it was not the right decision. I am worried about the elderly and those very sick.
2/24/2021	1052172	MI	55	M	2/18/2021	2/19/2021	Agency contacted 2/19 In evening by employer representative- client Died Suddenly after work~~
2/24/2021	1052217	CA	81	M	2/18/2021	2/18/2021	Elevated heart rate, flushing of the face and ears, vomiting, trouble breathing, pulmonary edema
2/24/2021	1052226	MS	62	M	2/11/2021	2/13/2021	Patient discovered unresponsive in cell, blue coloration to skin, vital signs, undetectable. CPR initiated, Ambulance summoned. Following EMS arrival with additional unsuccessful attempts to revive patient, patient was determined to have expired.
2/24/2021	1052273		77	M	1/26/2021	1/27/2021	Patient admitted to the hospital the day after receiving a COVID vaccine x 5 days. Patient passed away on 2/23/2021.
2/24/2021	1052645	IL	77	F	2/6/2021	2/10/2021	Cardiogenic shock occurred on 2/10/2021, approximately 12 hours after patient received her 12th dose of pemetrexed/pembrolizumab and 4 days after COVID vaccine. Coronary angiography was done on 2/10/2021 and no significant coronary narrowing or blockage were noted. Baseline troponin on 2/10/21 was 0.02 and later on 2/10/21, troponins were 9.99 & 25.27. Creatinine increase from 1.2 to 3.4 within 24hours, and AST/ALT increased from 23 & 31 to 4,220 & 4,786 respectively on 2/11. Patient expired on 02/11/2021.
2/24/2021	1052700	TN	71	M	1/27/2021	2/1/2021	71 year old male patient recived the Moderna vaccine on 12/28/2020 and 1/27/2021. Tested positive for Covid-19 on 2/1/2021 (aysmptomatic). Passed away on 2/23/2021. Report came from facility.

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2/24/2021	1052164	TN	78	M	2/23/2021	2/24/2021	911 called to patients house for trouble breathing and abdominal pain. Patient coded, wife presented DNR paperwork. Patient presented to Hospital DOA at 0958.
2/24/2021	1052990	TX	73	F	2/20/2021	2/22/2021	Likely not be related directly to vaccine adverse event other than Fatigue and sleepiness reported 2/22/2021. Patient missed her clinic appointment and we called in to check in with her. She had no other symptoms. She rescheduled her appointment to come in for her clinic visit to Tuesday, 2/23/2021 but did not arrive. We could not contact her thereafter on Tuesday. We were able to reach her medical power of attorney on Wednesday morning who with the help of EMS was able to enter her home. We do not know what other symptoms patient was experiencing. We also had the major winter storm between 2/11 /2021 and 2/19/2021. This affected are elderly severely. Unclear what utility she had or how she managed. On 2/20/2021 patient had only come in for her Covid vaccine appeared tired on that day but most of was struggling through the winter storm and not recovered yet. Patient was found deceased by her friend and officer who assisted her to enter patient's house. Unknown time or circumstances of patient demise.

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2/23/2021		1049428	NH	70	F	1/28/2021	2/7/2021	2/7/21 Increased difficulty chewing, swallowing, evaluated by SLP and dietician. Diet texture downgraded x 2 with poor appetite and recent 6lb weight loss. 2/8/21-APRN updated regarding poor appetite and difficulty chewing as well as downgraded texture of diet. Also informed of increased s/s of discomfort and increased use of PRN Oxycodone for pain. 2/9/21-elevated temp 100.7. 2/9/21 Covid pcr test negative. 2/9/21-N.O.'s APRN BMP, Albumin and Pre-albumin Level in am. 2/11/21-elevated temp 100.4. Covid rapid test negative. 2/12/21- CBG recorded at 517 at 5:20 am. Resident also has an elevated temp of 100.9. Tylenol administered per order. Vital signs include resp 24, radial pulse 134, O2 sat 83%. Supplemental oxygen administered via nasal cannula. Head of bed elevated. DR. notified at time via telephone. Order given for sliding scale for CBG. Guardian updated regarding changes in residents condition, poor prognosis. Guardian requests Hospice eval and admit. Guardian requests comfort care no hospitalization, no IV's, no G-tubes, no labs etc, D/C of Palliative services. ARNP informed. 2/12/21 Acute Telehealth visit with APRN due to increased lethargy, elevated CBG's despite poor appetite and insulin administration. Resident unresponsive to verbal and noxious stimuli at time of visit. N.O. Morphine sulfate 20mg/ml, give 2.5mg PO/SL Q4hr PRN pain/shortness of breath. 2/12/2021-Admitted to Hospice, Lethargic, diaphoretic, T 98.1 P 130's R 18 O2 high 80's to low 90's via O2 mask at 3L. 2/12/2021- Resident legs and arms noted to feel cool this afternoon, O2 sat was 97% with O2 on @ 3L with mask Noted resident with sob and increased pulse. Prn morphine 0.25ml sl. given with good effect. Resident was less restless and quiet in her bed. Checked on resident several times this shift for needs. Resident noted to not move in her bed @ 8:15pm and noted she was not breathing. Supervisor called and pronounced resident deceased.

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2/23/2021		1048686	CA		F	1/1/2021		died just 10 days after being given the vaccine/ put sepsis on her medical records; This is a spontaneous report from a contactable consumer report for Aunt. A 59-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration in Jan2021 at single dose for COVID-19 immunization. Medical history included schizophrenia and depression. The patient's concomitant medications were not reported. Consumer's aunt (patient) was housed in a facility. She was being treated for schizophrenia and depression. This was one of the facilities that chose to house Covid patients during the pandemic. Many of the patients here contracted covid19 during this time and they had to do a full facility lockdown and quarantine. The patient tested positive in Nov2020 and was quarantined to her room for 10 days. 3 weeks ago (in Jan2021), she received the Pfizer vaccine. Consumer's family was not given notice of this and we are sad to report that she died just 10 days after being given the vaccine. They put sepsis on her medical records and have not connected this to the vaccine. Consumer stated aunt was just 59 yrs old, though she was being treated for her mental illness, she was physically healthy. Consumer's family gravely concerned that this facility neglected her health by administering the vaccine without considering possible reactions from the medication she was taking, or the fact she had Covid just months prior. Patient died on an unspecified date. it was unknown if an autopsy performed. Information on Lot/Batch number has been requested.; Reported Cause(s) of Death: died just 10 days after being given the vaccine/ put sepsis on her medical records
2/23/2021		1048917	MN		92 M	2/17/2021	2/18/2021	Resident yelling for assistance in apartment. Nursing personnel found resident on floor at 6:10 AM on 2/18/2021. Resident was transported to Hospital on 2/18/2021. Status update on 2/18/2021 from son, resident CT & X-rays were done all normal. Labs done and WBC count was elevated and awaiting results. Resident stable and admitted to hospital for observation. Resident passed away on 2.21.2021.

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2/23/2021		1049389	ID	74	M	2/9/2021	2/20/2021	Patient passed away Saturday at 14:04pm. Patient's wife reports his death was sudden, he passed away sitting in his chair his heart just stopped she said. They tried to perform CPR, 911 was called and paramedics arrived at the scene and he was given medication but never had any return of vital signs and so his death was called at the scene. Wife reports he was not ill, did not have any symptoms prior to the event. They are not going to be doing a autopsy. She wanted us to know based on timing that there may be some possible correlation with his COVID19 vaccine. He obtained the vaccine on 02/09/2021 - wife reports he had no symptoms, not even arm soreness after the vaccine. Had no fever, shortness of breath. Did not complain of chest pain. We can update chart to reflect the patient is deceased and lets make a card for the family.
2/23/2021		1049284	VA		F			Died; A spontaneous report was received from a consumer concerning a 58-year-old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and patient was died. The patient's medical history was reported as underlying health issue. Concomitant product use was not provided by the reporter. On an unknown date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 (lot/batch: if reported or unknown) intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, patient with underlying health issue died after getting the Moderna COVID-19 vaccine. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on an unknown date. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns a 58-year-old female who died on unknown date after first dose of mRNA-1273, lot # unknown. Very limited information regarding this event has been provided at this time, therefore it is difficult to assess a cause and effect relationship. No further information will be available. Of note, patient's medical history included unknown underlying health issues.; Reported Cause(s) of Death: Unknown cause of death

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2/23/2021	1049012	AZ	72	F	2/12/2021	2/19/2021	Patient was given vaccine on friday, one week later she passed away. The family called the pharmacy to inform us on Saturday, Feb 20, 2021. After the phone call was over, we saw in her pharmacy profile that she had received the vaccine one week prior
2/23/2021	1048947	VA	83	M	2/16/2021	2/17/2021	Patient experienced an episode of emesis and loss of consciousness several hours after vaccine on 2/16/21. He was taken by EMS to the hospital and was noted to be hypoxic and hypotensive. He was admitted to the hospital and subsequently intubated. He was also found to have a small bowel obstruction and a nasogastric tube was placed to decompress the bowel. He required pressor support as well. He expired on 2/17/21.
2/23/2021	1048882	MA	71	F	2/1/2021	2/12/2021	Vaccine was administered 2/1/2021 at approximately 9am. Due to self reporting of allergic reaction (hives) to Augmentin, patient was monitored on site for 30 minutes. After the monitoring period, she was cleared to go with no issues reported at the time. We were later informed that the patient passed away from a pulmonary embolism on 2/12/2021.
2/23/2021	1048745	MD	66	F	2/8/2021	2/12/2021	Death on February 12, 2021 acute cardiac tamponade
2/23/2021	1048399	PA	102	F	2/1/2021	2/10/2021	Stopped eating and drinking and died

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2/23/2021	1048688	NY	94	F	1/27/2021	1/28/2021	My mother had a stroke on 28Jan2021 sometime after 9:30 AM the morning after getting the first dose of the Pfizer Covid vaccine; Cerebral infarction; This is a spontaneous report from a contactable consumer (reporting for mother). A 94-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number and expiry date unknown as not available or provided to reporter at the time of report completion) via an unspecified route of administration on 27Jan2021 in right arm at single dose for COVID-19 immunization. Medical history included coronary artery disease and hypertension. There were no concomitant medications. The patient was not pregnant. No other vaccine was received in four weeks. The patient did not have covid prior vaccination and not have covid tested post vaccination. The patient had a stroke on 28Jan2021 sometime after 9:30 AM the morning after getting the first dose of the Pfizer Covid vaccine and was hospitalized due to stroke for 6 days from Jan2021. The patient then experienced cerebral infarction in 2021 and died due to it on 04Feb2021. Treatment received for events stroke and cerebral infarction included tPA injection. The outcome of events stroke and cerebral infarction was fatal. An autopsy was not performed. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Cerebral infarction

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2/23/2021	1048672		89	M	12/29/2020		<p>Pass away; Got COVID; A spontaneous report was received on from a consumer, concerning an 87-year-old male patient, who received Moderna's COVID-19 (mRNA 1273) vaccine and experienced pass away (death) and COVID (COVID-19). The patient's medical history was not provided. No relevant concomitant medications were reported. On 29 Dec 2020, the patient received their first of two planned doses of mRNA-1273 injection for the prophylaxis of COVID-19 infection. Two days after mRNA-1273 injection, the patient's daughter was diagnosed with COVID-19 infection. The daughter states that her mother also got infected with COVID. On an unknown date, the patient got COVID. It was reported that he passed away. Treatment for the event was not provided. The cause of death was not provided. The plans for an autopsy were not provided. .; Reporter's Comments: Although the onset date of COVID-19 and the fatal outcome is lacking, Based on the natural history of COVID-19, the reported event, it is assessed as unlikely related with mRNA-1273. The actual cause of death cannot be ascertained but assessed as not related and most likely due to the COVID-19 infection.</p>

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2/23/2021	1048665	NY		M			Died; Internal bleeding and died; A spontaneous report was received from a nurse concerning a male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced internal bleeding and died. The patient's medical history was not provided. No concomitant product use was reported. On unknown date, the patient received their first of two planned doses of mRNA-1273 (Lot number: not provided) intramuscularly for prophylaxis of COVID-19 infection. On unknown date, a nurse reported she read about a doctor who received the COVID-19 vaccine and died 3 days later. She stated she read that the doctor had internal bleeding. It started with bleeding in his hands and feet, then went to his brain and died 3 days later. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not provided. The outcome of the events, internal bleeding and died, was considered fatal.; Reporter's Comments: Very limited information regarding the events has been provided at this time and is insufficient for causality assessment. Further information has been requested.; Reported Cause(s) of Death: Internal bleeding
2/23/2021	1049648	WA	87	M	2/2/2021	2/20/2021	I was notified on 2/22/21 that this patient passed away over the weekend. I do not know the details, nor can I confirm anything beyond what I was told. I believe the death occurred on 2/20/21 due to a massive stroke.

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2/23/2021		1048690	IL	89	F	2/10/2021	2/12/2021	<p>presumed cardiac failure; This is a spontaneous report from a contactable nurse. An 89-year-old female patient (not pregnant) received second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL9261), intramuscular at arm left on 10Feb2021 (at the age of 89 years) at single dose for COVID-19 immunization. The patient medical history included congestive heart failure, coronary artery disease, hypertension, hyperlipidemia, osteoarthritis, presence of prosthetic heart valve and allergies, all from an unknown date and unknown if ongoing. The patient's concomitant medication included amlodipine besilate/benazepril hydrochloride, amlodipine, acetylsalicylic acid (ASPIRIN E.C.), atorvastatin, benazepril, carvedilol, ubidecarenone (COQ10), furosemide, acetaminophen and potassium chloride. The patient previously received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL0142), intramuscular at arm left on 20Jan2021 at single dose for COVID-19 immunization. The patient experienced presumed cardiac failure on 12Feb2021 at 03:30 with fatal outcome. The patient died on 12Feb2021. An autopsy was not performed.; Sender's Comments: Based on the current available information, the event Cardiac failure is most likely related to an intercurrent or underlying condition which is not related to the suspected drug BNT162B2. The patient medical history of congestive heart failure, coronary artery disease, hypertension, and hyperlipidemia provide plausible explanations for the event. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: presumed cardiac failure</p>
2/23/2021		1050201	MT	77	M	2/2/2021	2/9/2021	<p>Died 7 days after receiving 2nd dose of Moderna vaccine. Had underlying hx Lung CA w/mets.</p>

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2/23/2021	1049406	FL	86	F	1/26/2021	2/21/2021	Patient rcvd 1st covid 19 vaccine on 1/26/2021. Patient had house guests on 1/30/21. Those house guests tested positive for covid on 2/1/2021. Patient started getting symptoms on 02/2/2021. Patient tested positive on 2/4/2021. Patient was hospitalized 2/7/2021. Patient passed away on 2/21/21.
2/23/2021	1049724	IL	72	F	12/30/2020	1/11/2021	Emergency room 1/11/21 Patient is a 72 year old female who presents with decreased level of consciousness. The patient is a nursing home patient and had an episode of choking yesterday that was treated with a Heimlich maneuver. Nursing staff at the nursing home reports that she seems to be a bit less responsive today. However, the patient has been for the most part unresponsive for 3-4 months time following a COVID-19 infection. Of note, her oxygen saturation on room air is 72%. The patient is also febrile to 100.8°. She was unable to provide any information and the aforementioned information is gathered from nursing home staff report.
2/23/2021	1050441	VA	86	M	2/20/2021	2/21/2021	Vaccination and observation period successfully completed without adverse event. The patient's significant other reported neither of them were feeling well on 2/21/2021. Approximately 28 hours after vaccination, the patient was found unresponsive in the bathtub. EMS arrived within 5 minutes, resuscitation attempt was unsuccessful, CPR terminated at 1503 and the patient pronounced dead. The Medical examiner refused the case on the basis of lack of jurisdiction, and the remains were moved to a local funeral home. No autopsy was performed. This event is not thought to be related to the vaccination event or the vaccine, the death is thought to be from natural causes.
2/23/2021	1050281	CA	66	M	2/9/2021	2/1/2021	Per family, patient has been feeling sick since he was vaccinated, patient went to ER on 02/15/2021, and after few hours at ER patient passed away.

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2/23/2021		1050172	WA	96	F	2/5/2021	2/5/2021	Individual developed severe body aches, severe shoulder discomfort, high fevers (documented max temp. 103.7 F). Daughter reported that she became non-responsive with high fevers, and when the fevers decreased she was more lucid. Her condition rapidly progressed to nausea vomiting, diarrhea and patient died on 2/9/2021.
2/23/2021		1050158	CA	83	M	1/28/2021	2/23/2021	Resident is a Hospice patient. On 1-23-2021 am shift resident was observed by nursing have chest congestion and had a emesis times 1 with SOB, Zofran 4 mg was given. HOB (O2 sats 88%) was elevated resident on O2 via nasal canula with O2 sat now @ 90% . no respiratory distress noted. MD was called with response pending for orders. @ 1400 resident with no signs of life. vs 90%-24-97/71-97.6. Hospice on site and time of death 1436
2/23/2021		1050137	LA	89	M	2/21/2021	2/22/2021	Pt received second Moderna Vaccination on 2/21/21 at 1:00 pm at Pharmacy. Pt present on 2/22/21 to ER via ambulance at 1940. Upon presentation C/C hypotension Post COVID vaccine. Nurse notes states that Home Health nurse sent patient to ER secondary to hypotension and hyperglycemia. Pt states back ached and was holding his head. Nurse noted pt had random petechiae over body and bruising to abdomen following injections received during recent hospitalization. (unknown hospitalization). Patient was treated with IVF bolus in addition to initiating Dopamine for hypotension, patient became agonal and daughter at bedside presented Adv. Directive, pt was DNR. Pt pronounced time of death was 2110pm. (Pt only reported a sore shoulder secondary to vaccine).
2/23/2021		1049787	CA	69	F	2/22/2021	2/22/2021	Without showing any side effect symptoms, patient suddenly fell unconscious and passed away within an hour. Though 911 was called and Paramedic was trying to revive the patient.

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2/23/2021	1049997	SC	89	F	1/8/2021	1/8/2021	Vaccine was administered at Nursing Facility. Patient is an 89-year-old female with prior medical history of CVA with dysphagia, history of possible dementia, GERD, hyperlipidemia, and a pacemaker. She is a resident from town. She was sent for hypotension with a blood pressure of 90/52, tachypnea respirations of 54, possible aspiration pneumonia. Status post Covid vaccine earlier today. History is limited as patient is nonverbal on my exam. Death within 24 hours of vaccination
2/23/2021	1049963	CA	56	M	1/12/2021	1/22/2021	Found lying face down without respiration or pulse, believed to be within 5 minutes of event. ACLS procedures unsuccessful. Unable to get autopsy. Believed to be heart attack secondary to COVID infection, but unconfirmed. Relative contribution of recent vaccination unknown.

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2/23/2021		1049864	IL	77	M	1/22/2021	1/27/2021	<p>1/27/21 Emergency room: HPI Patient is a 77 y.o. male who presents after a syncopal episode with cyanosis and shortness of breath. Patient came from rehab where they stated he was sitting on his bed, his oxygen saturation dropped down to 76% on 4L and he became cyanotic. By the time EMS arrived, patient was back to 95% on 4 L. On arrival to the ER, he is 98-100% on 4L. He has a history of COPD and has a chronic cough due to this. Currently, he has no pain, no shortness of breath, no weakness, no cyanosis. He is afebrile and sitting comfortably in bed. 2/10/21 emergency room HPI Patient is a 77 y.o. male who presents with in full cardiac arrest. Patient is resident of local nursing home. According to nursing home staff, a tech was in his room talking with him as patient was laying in bed. Tech began walking out of patient's room and turned around to tell him one last thing when the tech noticed patient had gone unresponsive. Patient had no spontaneous respirations or pulse, subsequently CPR was started immediately. 911 was called. This occurred around 5:30 a.m.. Upon EMS arrival on scene, they found a male unresponsive with CPR being performed. There was no spontaneous respirations or circulation. Thus, ET tube was placed and life support guidelines initiated. Patient was found to be in PEA, and according to EMS, patient was given a total of 6, 1 mg epinephrine IV push and 1, 1 Amp sodium bicarb. Patient was worked on at the scene for approximately 40 min before being transferred to ER. Upon arrival to ER trauma room 1 patient is still in full arrest. ET tube in place with good ventilation. Patient remains in PEA. Chest compressions and life support guidelines initiated. In reviewing patient's chart and nursing home notes, patient is a full code. Patient has a significant cardiac history including known coronary artery disease with 4 vessel CABG. Patient also has history of 3rd degree heart block and pacemaker placement. Patient has history of ischemic cardiomyopathy but last echo performed in 2020 shows ejection fraction of 45%.</p>

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2/23/2021	1049852	AZ	71	M	2/2/2021	2/5/2021	When calling to get billing information we were notified that patient had passed away. Patient's daughter said patient was having cvd a/s on 2.1.2021 got vaccine 2.2.2021 and passed away 2.5.2021. Cardiologist said not related
2/23/2021	1050128	WV	70	M	2/6/2021	2/7/2021	02/07/21 through 2/13/21 slightly fatigued, took all his prescribed medications, ate breakfast, lunch and dinner was drinking eight 10 oz bottles of water. On 02/14/21 was very tired had a difficult time breathing after taking the normal meds. He took a breathing treatment with his prescribed Ipratropium Bromide and Albuterol Sulfate via home nebulizer. This did not improve his breathing. He was very weak and breathing was labored. 911 was called by wife. 911 EMT checked pulse and breathing. Informed him they would give him a breathing treatment. He started to go limp. EMT's got him to Ambulance and to Medical Center to the ER. Heroics done. He died. Pulmonary and Cardiac Arrest
2/23/2021	1050431	FL	80	M	1/26/2021	2/2/2021	Since I was not with my husband I can only tell you what was told to me. He walked out of the store toward our car. Someone watched him, concerned, because he was walking very slowly (normally has a slow gait because of leg braces and toe amputations so I don't know if it was unusually slow). The woman saw him fall and she ran to help-administered CPR immediately-and told me he died instantly. Medics tried to resuscitate and failed to bring a pulse. (My husband left our home around 11:15 to drop a package off at store. The store is one mile from our home. At around 12:30 a deputy came to my door and when I saw him my knees buckled. I knew something horrible happened.
2/23/2021	1049773	GA	51	F	2/12/2021		Patient died on 02/20/2021. Cause of death was pulmonary embolism.
2/22/2021	1046317	OH	86	M	2/11/2021	2/12/2021	Patient passed away from chronic respiratory failure with cardiogenic shock 24 hours from 2nd dose of vaccine. Patient with longstanding history of pulmonary HTN and heart failure with desire for comfort care only. Entering into VAERS out of abundance of caution.

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2/22/2021	1046347	NJ	79	M	1/20/2021	1/1/2021	When family members came to receive the second dose of their COVID vaccine, they informed us that the above patient had passed away.
2/22/2021	1046397	AK	94	F	1/7/2021	2/20/2021	Death
2/22/2021	1046447	NM	38	F	2/12/2021	2/13/2021	2/12/2021 Vaccine 2/13/2021 Weakness, oral ulcers 2/17/2021 Brought to ER for loss of consciousness, altered mental status, rectal bleeding; work up showed sepsis, UTI, anemia, pneumonia, pleural effusion, pancytopenia, hypotension; persistent hypotension and respiratory failure 2/18/2021 Passed away at 5:54AM
2/22/2021	1046542		82	M	1/2/2021	2/15/2021	patient passed away with in 60 days of receiving a COVID vaccine
2/22/2021	1046666	OK	92	M	2/20/2021	2/20/2021	Patient had no adverse events during the observation period after vaccine. He was conscious and having conversation with facility staff. He was observed for 15 minutes at least. When the facility staff returned later, approximately 60 to 90 minutes, patient had passed away.
2/22/2021	1046265	WA	85	M	2/19/2021	2/19/2021	Received 2nd dose of COVID19 Pfizer vaccine at 1103 am on 2/19/21, was last seen at 1159, found around 1615 by kitchen staff who were serving dinner.

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2/22/2021	1045635	MO	74	M	2/4/2021	2/9/2021	Death; Passed out; Stomach was bothering; Constipated; Difficulty breathing; Weakness/Event: Weakness was reported as worsened; a temperature of 99.4 degrees; Sweaty; Cold; Muscle ache; Body Aches; Diarrhea; Nausea; Vomiting; Fatigue/Tiredness; His raspy throat felt like he had mucus stuck in his throat; Cough; Raspy throat/worsened; This is a spontaneous report from a contactable consumer reporting her husband. A 75-year-old male patient received the second dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/lot number: EM9810, Expiry Date: Jun2021) at the age of 74- year-old via an unspecified route of administration on 04Feb2021 09:15 at single dose in Arm, Right for COVID-19 immunisation. Medical history included type 2 diabetes mellitus for about 20-25 years, ongoing kidney disease from 2005, ongoing chronic kidney disease, cardiac pacemaker insertion. The patient was diagnosed with kidney disease in 2005, but it was about 1 to 1-1/2 years ago that his kidney disease progressed to Stage 4 Kidney Disease. She said the Veterans Administration diagnosed her husband with his kidney disease, but her husband saw a private doctor, as well as, a VA doctor for his care. There were no concomitant medications. The patient previously received the first dose of BNT162B2 (Lot Number: EL3248; Expiration Date: Apr2021) at the age of 74- year-old Intramuscularly at approximately 08:45AM on 15Jan2021 in right arm for COVID-19 immunisation and had no reaction. There were no additional vaccines administered on same date of the Pfizer suspect. There were no Prior Vaccinations within 4 weeks. The patient had symptoms start earlier in the day of Tuesday, 09Feb2021, after his second COVID-19 Vaccine shot (04Feb2021). The reporter said she and her husband didn't think anything of his symptoms at first. The patient had a temperature of 99.4 degrees on 09Feb2021. She didn't check her husband's temperature again after that time because the nurse at her husband's doctor's office said her husband's temperature was not at an area of concern. The patient was sweaty, off and on, starting 09Feb2021. She clarified he would be sweaty and the cold, but nothing extreme. The patient developed muscle aches, body aches, diarrhea, nausea, and vomiting on 09Feb2021. She clarified her husband had fatigue, tiredness, and had trouble with a raspy throat. His raspy throat started Tuesday evening (09Feb2021).

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His raspy throat felt like he had mucus stuck in his throat, and he was unable to clear the mucus from his throat. The reporter called her husband's primary care doctor on the morning of 10Feb2021 because her husband was having trouble with a raspy throat, and difficulty breathing. She said on Tuesday night (09Feb2021) her husband had to sleep sitting up because he couldn't lay down with his breathing. He was able to eat breakfast (clarified as oatmeal and an orange), lunch (clarified as soup and a salad), and dinner (clarified as soup and half a sandwich. She said her husband ate all the meat and half of the bread on the sandwich) on 10Feb2021. Her husband's primary care doctor wasn't available to speak to on Wednesday morning (10Feb2021), but the doctor's nurse said it sounded like her husband was having a reaction to his second COVID-19 Vaccine shot. The reporter said her husband's doctor instructed her later in the day to take her husband to the Emergency Room or Urgent Care if he didn't feel any better. Her husband's throat raspiness got worse in the evening of 10Feb2021. His breathing also became worse after dinner in the evening of 10Feb2021. The patient leaned forward over a couple pillows while sitting on their couch as it was easier for him to breath by doing that. They decided at 11:00PM that her husband should go to the Emergency Room. She said her husband was getting very weak, so she and her husband debated if she should call # for an ambulance, or if she should drive him to the Emergency Room. She said her husband was able to dress himself, but with some difficulty, and she assisted walking him from their house to their car. She said she had turned to walk away from her husband while he was at the side of their car, and then she heard her husband make a noise. He had appeared to have passed out. She clarified in the past, her husband had passed out prior to his pacemaker. She said she dialed #, and the # operator told her how to tell if her husband was still breathing. She said she couldn't tell if her husband was still breathing. She said when the ambulance arrived at her house, the ambulance staff worked on her husband for a long time. The reporter thought her husband had died at the time he had collapsed at the side of their car. The patient took a sugar free cough syrup Tuesday night (09Feb2021), and then again a couple times on Wednesday (10Feb2021) as treatment. The patient had thrown up a couple times,

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						but found that the sugar free cough syrup soothed his cough the night before (09Feb2021). She said her husband had taken 2 TUMS early on Wednesday morning at approximately 2:00AM (10Feb2021). He had said his stomach was bothering him on 10Feb2021. He said he thought he may be constipated, so he took 1 Senokot (Clarified as GeriCare Senna-Plus Natural Vegetable Laxative with Stool Softener) on 10Feb2021. She clarified her husband had diarrhea on 09Feb2021, but felt on 10Feb2021 he may have been constipated. There were no adverse events required a visit to Emergency Room since Patient's wife stated she was getting her husband to their car, so she could drive him to the Emergency Room, when her husband collapsed and died or to Physician Office as they spoke with the nurse at her husband's primary care doctor's office. Weakness was reported as worsened. The outcome of events Sweaty, Cold, Muscle ache, Body Aches, Fatigue/Tiredness, Raspy throat/worsened, Difficulty breathing, Weakness was not recovered; and of the remaining events was unknown. The patient died on 11Feb2021. The patient's official time of death was Thursday, 11Feb2021, at 12:08AM. Cause of death was unknown. An autopsy was not performed and it would take 3 weeks for a death certificate to be issued. The reporter stated she thought it was important to notify Pfizer of her husband's passing because his side effects fell within the expected time period after receiving his second COVID-19 Vaccine.; Reported Cause(s) of Death: Death
2/22/2021	1046613		70 F	1/28/2021	2/22/2021	patient passed away within 60 days of receiving a COVID vaccine
2/22/2021	1046230 OK		68 M	2/4/2021	2/20/2021	Death. My father-in-law was found unexpectedly deceased in his home Saturday morning. He worked the previous day.
2/22/2021	1046179 OH		48 F	2/15/2021	2/16/2021	patient was not vaccinated at hospital. Caregiver reports that patient was vaccinated with second dose on Monday 2/15/21. Tuesday patient experienced n/v/d. Went to an ED on Wednesday and was cleared and sent home. Thursday reported shortness of breath to her caregiver and then collapsed. Patient was brought to as PEA arrest and ultimately died.

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2/22/2021	1045972		78	F	2/6/2021	2/16/2021	patient passed away within 60 days of receiving a COVID vaccine
2/22/2021	1045895	FL	89	M	2/21/2021	2/21/2021	He was found deceased in his home by Sheriff and paramedics evening of 2/21/21.
2/22/2021	1045894	MN	84	M	12/31/2020	1/27/2021	COVID infection, death
2/22/2021	1045842	OH	88	M	1/21/2021	1/24/2021	A few days after the vaccination my father had a sore throat and slight cough. This progressed into pneumonia like symptoms and he died on 2/11/21.
2/22/2021	1045150	SD	59	M	2/10/2021	2/20/2021	Patient found in home deceased.
2/22/2021	1046698		63	M	1/26/2021	2/20/2021	patient passed away within 60 days of receiving a COVID vaccine
2/22/2021	1047634	GA	91	M	1/25/2021	2/9/2021	Patient was admitted to hospital on 2-9-21 for urinary tract infection and tested positive for Covid. Developed pneumonia and expired on 2-12-21.
2/22/2021	1045803	VA	89	F	2/15/2021	2/15/2021	Patient was found with no pulse no heart rate by a staff member around 11 pm. Earlier that day seen by myself for fatigue, sorethroat, nausea.
2/22/2021	1047183	MO	82	F	1/14/2021	1/1/2021	Pt had expired before second dose was delivered.
2/22/2021	1046722	WY	67	M	2/11/2021	2/14/2021	No symptoms or signs on the day 1st dose of vaccine was received (2/11/2021). 3 days later, (2/14/2021) patient experienced chills for approximately 6 hours, followed by severe (visible) chest spasms, and then cardiac arrest. 911 was called upon witnessing chest spasms, but cardiac arrest/death occurred before patient could be transported to the hospital.
2/22/2021	1047455	MT	93	F	2/19/2021	2/21/2021	Resident deceased

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2/22/2021		1048786	KS	87	M	2/11/2021	2/12/2021	Was given vaccine around 1:30Pm on 2-11-2021. He and his wife waited in the building for 15 minutes and then left. he denied complaint. (He was waiting to have both Covid shots before he went to cardiologist Re: CAD.) He had an alarm going off in his house, was going to basement to check it out. Police officer heard alarm, came into house, & heard a thud when Doc fell. He was in PEA (Pulseless Electrical Activity) when brought into ER. Given 5 "rounds of Epinephrine with no response.
2/22/2021		1047571	WA		F	2/10/2021	2/11/2021	Death after stroke .
2/22/2021		1047434	WA	88	M	2/10/2021	2/13/2021	Patient died 3 days after receiving his first dose of the Covid vaccine. He saw his doctor 2 weeks prior to his death with absolutely no complaints, very healthy. He had no prior heart conditions and was pronounced dead of a heart attack.
2/22/2021		1047351	OK	55	M	1/29/2021	2/17/2021	Patient was tested for covid on 2/2/21 with positive resulted. Presented to Hospital ER on 2/10/21 with c/o of abdominal pain. Diagnosed with gastritis, prescribed metoclopramide and famotidine and dc home. Returned to ER on 2/13/21 with c/o of weakness, diarrhea, foot ulcer, and loss of appetite. Diagnosed: 1) Dyspnea and hypoxia secondary to Covid-19 2) Extensive bilateral lung infiltrates secondary to Covid-19 3) Increased Cr 4) Increased LFTs, ferritin, d-dimer, troponin secondary to Covid-19 5) Elevated procalcitonin placing the patient at high risk for sepsis 6) Chronic appearing Right foot wound without signs of secondary infection Patient transferred to a different hospital in another city.
2/22/2021		1047326	MI	96	F	1/25/2021	1/25/2021	According to patient's caregiver, patient presented with symptoms of fever (101.6 F) and purple blotches all over the body within an hour. Since patient was in hospice , caregiver called Hospice and a pharmacy and was told to give patient Benadryl and Tylenol. Patient was given both medications and the fever subsided in a few days but the purple blotches never went away. Patient passed away at the facility a week later.
2/22/2021		1047197	KS	84	M	2/12/2021	2/20/2021	death

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2/22/2021		1047169	TX	83	F	2/6/2021	2/13/2021	jaundice->hemolytic anemia-> hemorrhagic shock->multi organ failure->death pt admitted to ICU 2/16 with Hgb=3.4, treated with steroids, supportive care , pressors, pt died 2/20/21
2/22/2021		1047072	CA	62	M	2/13/2021	2/14/2021	Patient had sore arm on the day of vaccination. Per patient's nephew , the next morning patient experienced body pains, aches, headache . Onn Tuesday patient had fever. Patient's condition progressively got worse. He had difficulty breathing by Wednesday night. He had low oxygen levels at 80 per pulse ox reading. Patient was coughing up blood. Family took him to hospital on Thursday morning due to breathing difficulty and patient died 2.18.21 at 10 am
2/22/2021		1046915	IA	66	F	2/21/2021	2/21/2021	Resident received the 2nd dose of the Covid vaccine approximately around 1105 by pharmacy through the pharmacy LTC partnership vaccination program. Resident had no adverse effects until around 8:00 pm she began complaining of body aches, and chills, Tylenol was given at this time. Around 9:30pm resident was sleeping in bed. Around 12:00 am the CNA called nurse into room to assess resident as the resident stated she did not feel good. Temperature at that time was 102.2, and vomiting. RN came to assess @ 1220 am She was noted to be vomiting, diaphoretic, pale and having trouble breathing. Temp was 97.3 after vomiting, Pulse 53, Resp 20, o2 sats were 40-45%, unable to obtain Blood pressure, Applied 5 L of oxygen at this time and had LPN call 911 immediately. Resident was repsonsive and able to follow staff members instructions but was only answering yes or no simple questions at the time time of assessment. Paramedics arrived at 0040 and resident was sent to Hospital. @ 0130 ER nurse called to nursing facility to notify resident had coded in the ER and passed away @ 0110.
2/22/2021		1046881	CA	91	F	2/18/2021	2/19/2021	Code blue called at 11:00pm. Patient had code status of Do Not Resuscitate.
2/22/2021		1046845	VA	84	F	2/17/2021	2/18/2021	Deceased 02/18/2021 with an unknown cause of death

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2/22/2021		1046795	TX	64	F	2/12/2021	2/21/2021	Per ED note: Brought in ED by EMS at 1945 for acute shortness of breath and hypotension. Patient was placed on supplemental oxygen and covid test completed. Patient was placed on BiPAP to maintain oxygen greater than 90%. Found to be in metabolic acidosis. Patient became unresponsive and pulse could not be palpated. Chest compressions were initiated. ACLS medications given and pulses regained. Patient lost pulse 30 mins later and never regained pulse. Per ED noted; likely developed a PE. Passed away at 2127
2/22/2021		1046763	OH	84	F	1/23/2021	1/23/2021	1/23 - Mild injection site discomfort. Appetite loss compared to previous day. Beginning loss of mental acuity compared to previous day. 1/24 - Continued loss of appetite. Near complete loss of ability to move. Continued decline of mental acuity. Very little speaking. 1/25 - Stopped speaking completely. Loss of bowel control in the evening and continued until death. Complete loss of appetite. 1/26 - Near complete loss of ability to swallow. Moved to hospice 4:00pm. 1/27 - Died 4:00am
2/22/2021		1046752	KS	70	M	2/8/2021	2/9/2021	Pt was hospitalized Jan 18, 2021 after he had fallen outside overnight and lay there approximately 12 hours until he was found. Hypothermic & rhabdomyolysis diagnosis. Gradually improved w/ strength & mental status - was in swing bed @ hospital. He got his first Covid 19 shot on 2-8-21. Was fine @ 0300 on 2-9-21 and @ 0430 he was found unresponsive. Dx: probable arrhythmia & pronounced dead @ 0454. Noted on pain scale @ 2/8/21 @ 21:11, clients pain was a 7/10 They offered pain med & he refused They repositioned & distracted him @ 2047 on 2/8/21 Pain had decreased to 3/10 and nothing given. Then @ 0300 check he was sleeping and @ 0430 unresponsive.
2/22/2021		1047282	FL	83	F	2/5/2021	2/6/2021	Patient felt fine on Friday afternoon and evening after shot. Felt fine on Saturday until the afternoon when she started feeling fatigued and chilled. Decided to take a warm bath at about 6pm. Was found dead in bathtub at approximately 7pm with blisters on arms, legs, and face.

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2/21/2021	1044459	NY	96	F	2/7/2021	2/7/2021	Grandmother had trouble breathing the night she got the vaccine. She went to the hospital. They found pneumonia and a partial bowel obstruction. The obstruction cleared but she died from the pneumonia on 2/16/21.
2/21/2021	1044352	IL	64	M	2/8/2021	2/14/2021	Stomach upset, sudden heart failure, death
2/21/2021	1044704	WV	69	M	2/19/2021	2/20/2021	Light headedness, fatigue, nausea
2/21/2021	1044247	OH	84	F	1/21/2021	1/26/2021	Moderna COVID 19 Vaccine: Patient started with symptoms of covid 5 days after first vaccine. She was hospitalized and passed due to COVID 19 on 2/6/21. Patients family informed us when she was due for the second dose.
2/20/2021	1043880	IN	59	F	2/19/2021	2/20/2021	Pt received second Moderna COVID-19 vaccination administered in left arm at her assisted living facility by Pharmacist at 1153 on 2/19/2021. Pt was monitored for vaccine reaction with no known adverse reaction. Approximately 18 hours post-vaccine, she was found deceased in her sleep at 0540 on 2/20/21. Per circumstances/pt history, it is presumed that the patient aspirated while sleeping, perhaps secondary to a seizure. Coroner was notified and declined as coroner's case. VAERS notification being made due to pt death within 24 hours of receiving a vaccine.
2/20/2021	1043690	ID	76	M	2/18/2021	2/19/2021	Ventricular fibrillation/sudden death
2/20/2021	1043482	PR	62	M	2/3/2021	2/5/2021	Noted red blotchy areas 2 days post vaccination on bilateral inner thighs. Patient states he has yellow drainage if he expresses the areas. Has a photo of the rash. They are circular individual areas about 1 cm circumference. Each individual area is bright red with a open pinpoint area in the center. Some have a crusty area. He denies itching, burning. Denies rash in any additional areas post vaccination. Referred to see physician.

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2/20/2021	1043302	TX	73	M	2/5/2021	2/6/2021	My dad received the Pfizer vaccination on 2/5/21. He was admitted into the hospital the next day for C-Diff bacterial infection. He had been on dialysis treatments for kidney failure treatment since 2017 and had recently been diagnosed with stage 3 colon cancer in June 2020. He had completed his final treatment of chemotherapy on 2/4/21 and several weeks prior had been determined cancer free. On Tuesday 2/9/21 he was released from the hospital and went home. Early Thursday morning 2/11/21 @ approximately 1:30 am CST his eyes rolled back in head and he stopped breathing and was non responsive. My mother called 911 and attempted CPR. Paramedics arrived and were able to successfully get a pulse then transferred him to the hospital. He was put on a ventilator @ the hospital and then transferred to a different hospital a few hours later. He lost pulse/heartbeat several times @ the 2nd hospital he was transferred to. We were not allowed to travel with him or see him b/c of all of the COVID restrictions. We were communicating with the ICU doctor by phone who ultimately communicated to us that there was nothing further that could be done to save his life. He subsequently passed away @ approximately 8:55 am CST on 2/11/21.
2/20/2021	1043123	WI	65	F	1/28/2021	2/6/2021	Death
2/20/2021	1042967	VA	87	M	2/13/2021	2/18/2021	Patient called son around 6:30am on 2/18/21. When son tried to contact patient around 8:30am, he was not able to get a hold of patient. Son sent someone over to check on patient. They found patient on the floor. He was coherent at first but then lost consciousness. It believed he experienced a stroke sometime around 8:30-9:00am of 2/18/21. Patient was taken to hospital and then transferred to another hospital. He was put in a medically induced coma. He passed between 4:00 and 4:30 pm on 02/19/21.
2/19/2021	1040633	CA	52	F	1/30/2021	2/6/2021	Death due to hemorrhagic stroke.
2/19/2021	1041333	MN	78	M	2/5/2021	2/9/2021	He developed a fever on 1/8, become unable to swallow and bedbound. He was already end of life and Hospice care at the time of the vaccine.

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2/19/2021	1041276	IL	87	M	2/12/2021	2/13/2021	on 2/13 at 7:30am resident was observed congested, foaming at the mouth. transferred to the hospital, verbal report from hospital nurse stated the resident was admitted for hypercalcemia and dehydration. The resident expired on 2/14/21 at 9:30am. Died on 2/14/2021
2/19/2021	1041230	SC	75	M	1/22/2021	1/26/2021	Patient received first dose of covid vaccine on 1/22/2021. Patient had no immediate reaction. Patient presented to the Emergency Department on 1/26/2021 c/o shortness of breath and chest pain. ECG showed a ST elevation myocardial infarction. Patient was treated and transferred to a cath lab where he died. Patient had significant coronary artery disease.
2/19/2021	1041200	FL	87	M	1/26/2021	1/27/2021	Patient described feeling nervous, anxious the next morning (Wednesday) after the vaccine. He later fell in the bathroom after using the restroom, his legs gave out (his words) and consequently was on the ground for 23 hours before being transported to the hospital. That was Thursday afternoon. He was diagnosed with COVID-19 on Saturday night and died the following Friday morning.
2/19/2021	1041191		99	M	1/24/2021	1/25/2021	Decedent had unwitnessed fall out of wheelchair 1/25/21 around 9:43am, denied head strike, pain, discomfort. Around 10:02pm, 1/25/21, decedent noted to have slurred speech and fluctuating HR, transported to Hospital and made cmo.
2/19/2021	1041185	IL	86	M	1/4/2021	1/18/2021	Death within 30 days
2/19/2021	1041064	IA	88	M	2/4/2021	2/11/2021	CLIENT EXPIRED 1 WEEK FOLLOWING THE VACCINE.

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2/19/2021	1040927	NY	86	F	1/16/2021	1/23/2021	<p>Patient previously had dizzy spells, but about a week after receiving the vaccine her dizzy spells began to get worse. The whole prior she kept saying I am just not right. On the 2/7/21 she a COVID test done, a nurse came to her house and preformed. On the morning of the 8th patient was on the phone with someone else and patient asked this person to call me and go check on her. Within 5 minutes I was over at her house, and I found her on the floor, she on her belly facedown. It looked like she was on the toilet, and it looked like she fall getting her off, she was still wet, she still felt warm. I called the ambulance and immediately began CPR. When EMS arrived they took over the CPR and transported her to the Hospital. The EMS was there for about 40 minutes and used an machine to preform the compressions. She was pronounced deceased at the hospital. No autopsy was done.</p>

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2/19/2021	1040802	OH	88	F	1/20/2021	1/20/2021	Toileting and had expired while doing so; Severe abdominal pain; Diarrhea; Vomiting; Mild injection site pain; A spontaneous report was received from a healthcare professional concerning an 88-year-old , female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced the events, toileting and had expired while doing so (death), mild injection site pain, severe abdominal pain, diarrhea, and vomiting. The patient's medical history was not provided. No relevant concomitant medications were reported. On 20 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (Lot number: 029L20A) intramuscularly in the left arm for prophylaxis of COVID-19 infection. On 20 Jan 2021, the patient felt mild pain at the injection site after receiving the vaccine. On 21 Jan 2021, the patient reported severe abdominal pain, diarrhea and vomiting. These symptoms were intermittent for a week and no other adverse events were noted. On 27 Jan 2021, the patient passed away while toileting. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 27 Jan 2021. The cause of death was unknown. An autopsy was not performed.; Reporter's Comments: The gastrointestinal events were consistent with increased risk associate with elderly age of patient. The cause of death was unknown. Autopsy was not performed. Very limited information regarding the events is available at this time. Based on the current available information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded.; Reported Cause(s) of Death: unknown cause of death
2/19/2021	1041990	KY	83	F	12/28/2020	1/15/2021	PATIENT WAS ADMITTED TO ER FOR ALTERED MENTAL STATUS / UTI SEPSIS WITH SEPTIC SHOCK / COVID AND COVID PNA PATIENT WAS ADMITTED TO ICU AND DIED . POA WISH TO WITHDRAWL EXTRME MEASURES
2/19/2021	1041656	OH	103	F	2/6/2021	2/12/2021	she died 2/12/2021 at close to 2pm

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2/19/2021		1040877	HI	58	F	2/18/2021	2/18/2021	unknown if related to vaccine. patient received 2nd vaccine at 0830, observed 15 minutes, discharged, arrested at 0915 upon entering her home. vaccine was administered by DOH at their community location. patient was pronounced lifeless in the ED.
2/19/2021		1042351	NC	67	M	2/11/2021	2/16/2021	death
2/19/2021		1041832	WV	74	M	2/17/2021	2/18/2021	Patient was found unconscious without a pulse. Patient remained in asystole without pulse or respirations despite CPR.
2/19/2021		1041719	WV	92	F	2/17/2021	2/17/2021	Pt received moderna vaccine #2 at 1:30pm. No s/s of adverse reactions. Ate dinner at 4pm. She was in her room at 430pm and she slid out of her chair and was laying on her Right side. She reported she slid out of her chair because she needed to go urinate per staff. She denied pain. At 630p complained of right hip pain. mobile xray was ordered. At 825pm resident was sleeping x 30 mins in her bed when she was found to have no pulse or respirations. She ceased to breathe. Mobile xray did not make it on time.
2/19/2021		1060523		93	M	12/31/2020	1/25/2021	contracted covid after first dose Narrative: First covid vaccine dose 12/31/2020, tested positive for covid 1/7/2021, died from complications 1/25/2021
2/19/2021		1042412	FL	83	F	2/5/2021	2/7/2021	Days 3, 4, 5, 6: Inability to move head in any direction (up/down or L/R) without SEVERE pain. Neck unable to support head unless directly above shoulders. Leaning forward slightly to sit or stand up caused unbearable pain. Unable to lift head from pillow to roll over. Could only swallow food, if neck muscles held tightly with hand to prevent movement. Severe pain caused Vasovagal syndrome fainting. Asymptomatic fever 99.7-100.5 for Days 3, 4, 5. No chills, weakness or aching. Day 7: In A.M., slightly increased head movement possible for first time without pain. By P.M. even better, but still only very limited movement of a few inches possible. Improved daily thereafter. Day 15 (today): Mild stiff neck persists.

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2/19/2021		1042145	NC	82	F	1/29/2021	2/6/2021	<p>Patient reported feeling weak, fatigue, fever (102), and loss of appetite. Patient subsequently went to the ER 2/6/2021 and tested positive for COVID-19 on 2/7/21 (collection date). See following discharge summary from ED: 82 y.o. female who initially presented to the ED with complaint of generalized weakness, fatigue, fever, and loss of appetite x at least 4 days since receiving Covid 19 vaccine. Her workup in the emergency room was significant for hypoxia with O2 saturation 88% on 2LPM (home nocturnal O2 requirement) with improvement to mid-90s on 4LPM. Blood sugar was 47, Cr 1.61. CXR showed extensive R lung and moderate left lung opacities. She was started on empiric ceftriaxone and azithromycin and admitted to the hospitalist service for further workup and mgmt. During her stay in the hospital, pt did test positive for Covid 19. She developed rapidly progressive respiratory failure, felt to be secondary to ARDS. There was also question of contributing pulmonary edema, however this was refractory to lasix and thus ARDS was felt to be the most significant factor. She had requested DNR/DNI status, thus as her O2 requirement escalated she was transitioned to 15LPM NRB and then to BiPAP support. Unfortunately, she continued to suffer greatly with the BiPAP in place, and therefore made the decision to transition herself to comfort measures only after visitation from her family. Her other medical issues were supported as appropriate during her stay, with dextrose infusion for hypoglycemia and AKI, also hyponatremia felt to be due to IVVF. Unfortunately, am unable to find any documentation regarding how pt was feeling when she received the vaccine compared to her baseline state of health. thus am unable to say whether the severity of her illness represents vaccine- enhanced disease or the much more common cytokine release syndrome leading to ARDS. Regardless, she developed ARDS as result of her Covid 19 illness. Time of death: 1408 on 2/9/21. Cause of death: ARDS due to Covid 19 pneumonia.</p>
2/19/2021		1042012	NY	51	F	2/1/2021	2/14/2021	Patient died suddenly 2/14/2021
2/19/2021		1041839	WV	72	F	2/14/2021	2/14/2021	Death- ~ 7 hours after vaccine

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2/19/2021	1041789	NY	77	F	1/15/2021	1/17/2021	As per patient daughter - patient had some minor chills on the day of the vaccination - Friday 1/15/21; felt well next day -Saturday, than she was found slumped and lifeless on the couch on Sunday 1/17. Cause of death on death certificate was reportedly put as COPD, Lung Ca and ASHD.
2/19/2021	1041784	WI	73	M	1/23/2021	1/25/2021	On the 25th he was home alone, he called 911 and let them know he thought he was having a stroke. EMS arrived and transported him to Hospital. It was massive stroke, he was not able to comprehend anything, he was put into Hospice the following day and passed away on the 27th. There was no autopsy preformed.
2/19/2021	1041740	MN	70	M	1/6/2021	2/13/2021	Patient died on 2-13-21
2/19/2021	1060522		87	M	2/17/2021	2/19/2021	death Narrative: 86 year old MALE with PMH of Afib s/p AICD/PPM, HFrEF (EF< 20% 10/2019), DM2, HTN, HLD, BPH, Depression. Was stable and feeling well when he was administered Covid-19 vaccine on 02/17/2021- Pfizer COVID-19 Vaccine 0.3 ml IM. MVX (Manuf); PFR; Lot#; EL9267; Exp Date:05/31/2021 Administration Anatomic site: Right Deltoid; Pt was monitored for 30 minutes after administration and had no adverse effects. He was called later in the day and reports he feels well and has had no adverse reactions, he endorsed his arm is a little sore at injection site. ON 02/19/2021- his dgther found him on the floor, next to his bed, dead. She reported on 2/19/2021- that she was out with him to dinner on 2/18/2021, and he stated he did not feel well, that his insides did not feel right. He proceeded to have dinner and 2 drinks. HE was doing ok, when she took him home.

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2/18/2021	1038527	SD	71	F	2/17/2021	2/17/2021	Per EMS/Hospital report patient had difficulty breathing and cardiac arrest with prolonged CPR (greater than 45 mins in the ER) who was resuscitated. Family subsequently arrived including son and daughter and all family members were in the ER room are in agreement that patient would not want further aggressive cares given her extremely poor prognosis in light of chronic debilitation with numerous medical issues and now a very long period of CPR. Hospital Course After updating family they stated patient would not want further aggressive cares given her grim prognosis and chronic severe and debilitating medical issues. She continued to have myoclonic jerking. She was extubated to comfort cares in the ER and did not pass immediately therefore brought to a room. She received comfort cares and passed away at 0450 with family present.
2/18/2021	1037720			U			Suicide; A spontaneous report was received from a consumer concerning a patient, of unknown age/gender, who received Moderna's COVID-19 vaccine and experienced suicide. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. On unknown date, the patient received mRNA-1273 (Lot number: unknown) intramuscularly for prophylaxis of COVID-19 infection. On an unknown date the patient experienced suicide. Treatment information was not provided. Action taken with the mRNA-1273 in response to the event was not reported. The patient died on unknown date. The cause of death was reported as suicide. Plans for an autopsy were not provided.; Reporter's Comments: Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Suicide
2/18/2021	1038561	CO	79	M	2/15/2021	2/16/2021	(02/15/2021): vaccine (02/16/2021) : severe body aches and weakness, increased congestion and mucous production. (02/16-17/2021) : death possibly during the night

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2/18/2021		1038253	FL		M	1/12/2021	1/13/2021	Died the next day; A spontaneous report was received from a consumer concerning a male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and died the next day. The patient's medical history was not provided. Concomitant medication use was not provided by the reporter. On 12 Jan 2021, approximately one day prior to the event, the patient received one of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On 13 Jan 2021 the patient died. No additional information was provided in regards to the event. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on 13 Jan 2021. The cause of death was unknown.; Reporter's Comments: This case concerns a male patient of unknown age. The medical history and concomitant medication were not provided. The patient died approximately one day after receiving their first of two planned doses of mRNA-1273 (Lot unknown). Very limited information regarding this event has been provided at this time.; Reported Cause(s) of Death: Unknown cause of death
2/18/2021		1038517	MN	68	M	2/3/2021	2/17/2021	Pt. received vaccine on 2/3/2021. Coded at home on 2/17/2021.
2/18/2021		1038442	IL	56	M	1/4/2021	1/6/2021	Death within thirty days of vaccine. Multiple co-morbidities and placed on hospice 12/28/20.
2/18/2021		1038290	IL	68	M	2/3/2021	2/3/2021	Death on same day as vaccination

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2/18/2021	1038257	NM	63	M	1/14/2021	1/16/2021	<p>Passed away; tired; nonresponsive; cold; difficulty breathing; swelling; sore arm; feeling weird and funny; A spontaneous report (United States) was received from a consumer concerning a 63 year old male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and the patient experienced limb discomfort, feeling abnormal, dyspnea, fatigue, swelling, unresponsive to stimuli, body temperature abnormal and the patient passed away . Medical history included treatment for tuberculosis and dialysis. Concomitant medication included calcium acetate, Renvela, glipizide, omeprazole, aspirin, vitamin D, losartan, furosemide, rifampin, and Sensipar. On 14 Jan 2021, the patient received the first of their first planned doses of mRNA-1273 (lot number 030L20A) for prophylaxis of COVID-19 infection. On 13 Jan2021, the patient tested negative for COVID-19). On 16 Jan 2021, the patient experienced a sore arm, and feeling weird/funny. On 17Jan2021, the patient experienced difficulty breathing and swelling. On 18 Jan 2021, the patient declined dialysis, was tired and wanted to lay down. At 8 am, the patient was found nonresponsive and cold and is believed to have passed away around 4 am. The coroner tested the deceased for COVID-19 and the test was positive. No autopsy was reported. No death certificate was issued at the time of the report but the reporter believes it will list cause of death as COVID complications. Action taken with the mRNA-1273 was not applicable. The outcome of the events of limb discomfort, feeling abnormal, dyspnea, fatigue, swelling, unresponsive to stimuli, body temperature abnormal, was fatal. On 18 Jan 2021, the patient was died. Cause of death was COVID-19. Autopsy details were not provided.; Reporter's Comments: The events developed on four days after first dose of mRNA-1372. Dyspnea, unresponsive to stimuli, and death were consistent with infection in pandemic set up confounded by age of patient and refusal of dialysis Cause of death was reported as COVID-19. Autopsy details were not provided. Based on reporter's causality the events are assessed as unlikely related to mRNA-1273.; Reported Cause(s) of Death: COVID-19</p>

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2/18/2021	1038234	MA	84	F	1/14/2021		First dose Pfizer given at assisted living on 1/14/21 she was subsequently admitted to hospital and got her second dose but Moderna was given instead of Pfizer on 2/8/21. She had been improving but in the days following the Moderna vaccine she developed fever and then her mental status declined. She was discharged back to assisted living. Suspected UTI, and moderate dementia, placed on hospice (2/12/21). Died on 2/13/21.
2/18/2021	1038225	AK	83	M	1/11/2021	2/17/2021	Death, 2-17-21 at 1802 hours
2/18/2021	1038147	TN	86	F	1/28/2021	1/30/2021	Patient went into new-onset atrial fibrillation, resulting in a catastrophic stroke. Patient passed away on 2/11 as a result of the stroke.
2/18/2021	1038042	OH	53	F	2/5/2021	2/6/2021	Patient expired 02/06/2021. COD as ruled by Coroner "Hypertensive and Atherosclerotic Cardiovascular Disease.~~

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2/18/2021	1037878	OH	70	M	12/22/2020	12/30/2020	Is patient deceased: Yes; Low pulse; This is a spontaneous report from two contactable nurses reporting for a patient. A 70-year-old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE; lot number EL0140 expiration date Mar2021) intramuscular on 22Dec2020 at 10:30 at single dose in right arm for COVID-19 immunisation. The patient was vaccinated at Nursing Home. Patient age at time of vaccination was 70 years. Patient's Medical History included ongoing Type 2 Diabetes Mellitus Without Complication onset date: admission 22Oct2020, ongoing morbid obesity due to excess calories onset date: admission 22Oct2020, cardiac disorder, essential hypertension, hypertension, schizophrenia, hyperlipidemia, benign prostatic hyperplasia (BPH), Gastroesophageal reflux disease (GERD), depression, hypothyroid, epilepsy, pain, dry eyes, anxiety, restlessness, 17Jan2020 Slid out of chair to floor, no injury, on 27Jan2020, 28Jan2020, 29Jan2020 diarrhea noted. Concomitant medications included acetylsalicylic acid (ASPIRIN EC) for Cardiac Health, atenolol (ATENOLOL) for Essential Hypertension, atorvastatin calcium (ATORVASTATIN CALCIUM) for hyperlipidemia, finasteride (FINASTERIDE) for benign prostatic hyperplasia, tamsulosin hydrochloride (FLOMAX) benign prostatic hyperplasia, insulin glargine (LANTUS) for diabetes mellitus, lithium carbonate (LITHIUM CARBONATE) for Schizophrenia, losartan potassium (LOSARTAN POTASSIUM) for hypertension, lurasidone hydrochloride (LURASIDONE HYDROCHLORIDE) for Schizophrenia, omeprazole (OMEPRAZOLE) for gastroesophageal reflux disease, sertraline hcl (SERTRALINE HCL) for depression, levothyroxine sodium (SYNTHROID) for hypothyroid, ergocalciferol (VIT D) for supplement, haloperidol (HALOPERIDOL) for Schizophrenia, levetiracetam (KEPPRA) for epilepsy, paracetamol (TYLENOL EXTRA-STRENGTH) for pain, propylene glycol (ARTIFICIAL TEARS) for dry eyes, lorazepam (ATIVAN) for a anxiety or restlessness. As antipyretic use was reported Tylenol ES (500 mg) Tab, 2 Tabs by Mouth Routine use three times a day given at time of vaccination and after. It was reported the patient was Covid+. He was tested on 21Dec2020 and was not admitted to hospital. Event Onset Date was reported as 24Dec2020 (clarification pending). On 30Dec2020 the

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patient was started on O2 at 2L for low pulse. O2 was increased over time to eventually O2 at 8L on 03Jan2021. Morphine Sulfate was started on 03Jan2021 at 5 mg sl/by mouth every 2 hours as needed for pain or air hunger. The patient deceased on 03Jan2021. The cause of death was unknown. It was not reported if an autopsy was performed. The AEs did not require a visit to Emergency Room or Physician Office. Outcome of Low pulse was unknown.; Sender's Comments: Based on the information available the events Death (unknown cause) and Heart rate decreased are attributed to patient's multiple underlying medical conditions including Type 2 Diabetes Mellitus, morbid obesity, cardiac disorder, hypertension, epilepsy etc. However, based solely on a vaccine-event chronological association, contributory role of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) to the above mentioned events cannot be completely excluded. The case will be reevaluated should additional information, including the cause of death, 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: Is patient deceased: Yes

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2/18/2021	1037865	FL	89	M	1/10/2021	1/27/2021	respiratory failure from COVID19; presented to the ER with COVID symptoms and was diagnosed/died on 09Feb2021 from respiratory failure from COVID19; presented to the ER with COVID symptoms and was diagnosed/died on 09Feb2021 from respiratory failure from COVID19; This is a spontaneous report from a contactable physician. An 89-year-old male patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration in 10Jan2021 at 12:00 at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient had no COVID prior to vaccination. The patient received one dose of Pfizer vaccine on 10Jan2021. The patient was presented to the ER with COVID symptoms and was diagnosed on 27Jan2021. Patient subsequently died on 09Feb2021 from respiratory failure from COVID19. It was unknown if autopsy was done. The patient was tested for COVID post vaccination via nasal swab: covid-19 virus test positive on 27Jan2021. The events resulted in emergency room/department or urgent care, hospitalization, and patient died. No follow-up attempts are possible, information about batch number cannot be obtained. No further information is expected.; Sender's Comments: The Company cannot completely exclude the possible causality between the reported COVID post vaccination and respiratory failure with fatal outcome, and the administration of COVID 19 vaccine, BNT162B2, based on the reasonable temporal association. More information on the underlying medical condition in this 89-year-old male patient is required for the Company to make a more meaningful causality assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.; Reported Cause(s) of Death: presented to the ER with COVID symptoms and was diagnosed on 27Jan. Patient subsequently died on 09Feb from respiratory failure from COVID19; presented to the ER with COVID symptoms and was diagnosed on 27Jan. Patient subsequently died on 09Feb from

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2/18/2021		1040170	OR	37	F	2/6/2021	2/13/2021	Received vaccine on 2/6/2021. was a bit off all week per caregivers - low grade temp and reporting pain which they treated with Tylenol. She was pretty much herself on morning of 2/13/2021 - got up, had shower. caregivers noted her extremities were cool and face was red. temp was 97.4. She was placed in wheelchair with book in the living room. caregivers noted she was not turning pages of the book as she usually would. She was tracking, so they don't think she had a seizure. Caregiver moved her back to bed with blanket and noted that her lips were blue and at that point called 911. She was found with agonal breathing, CPR started, intubated by EMS, taken to the ER and diagnosed with cardiac arrest upon arrival. CPR was continued until family could be reached and decision was made to stop resuscitation.
2/18/2021		1038579	IN	95	M	2/15/2021	2/16/2021	Death
2/18/2021		1037867			F			Caller's mother received both doses of the Pfizer covid vaccine; within a month of receiving the vaccine, the caller's mother died.; This is a spontaneous report from a contactable consumer reported for the mother. A female patient of unknown age received both doses of vaccine BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection), on unknown dates at single dose for COVID-19 immunization. Medical history and Concomitant medications were not reported. Within a month of receiving the vaccine, the patient died. It was unknown if an autopsy was performed. Information on the Lot/Batch number has been requested ; Reported Cause(s) of Death: within a month of receiving the vaccine, the caller's mother died
2/18/2021		1040005	NY	72	F	2/16/2021	2/17/2021	Patient was found unresponsive and had passed away.

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2/18/2021		1039954			U			Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who dies 15 minutes after receiving the vaccine.; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported similar event for 2 patients. This is 2nd of 2 reports. A 25-year-old patient of unspecified gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The relevant medical history and concomitant medications were not reported. The consumer stated his main concern was even though the vaccine had been authorized. The vaccine was only given vaccine on the side of the road. People were dying from the vaccine more than from the virus. He gave out some percentage of people that could die from the virus vs from the vaccine. The percentage of death rate was 0.00045% from the virus. The percentage of death from the vaccine was 6.6%. There were many people reporting side effects such as bell's palsy, whole body convulsion. Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who died 15 minutes after receiving the vaccine. He said it's sad these were front line worker who were facing all these side effects. The outcome of the event was fatal. Information on the lot/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021155151 same reporter, drug, event, different patient; Reported Cause(s) of Death: Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who dies 15 minutes after receiving the vaccine.
2/18/2021		1038635	SD		97 F	2/5/2021	2/6/2021	The patient fell the day after receiving the Moderna COVID-19 vaccine. She broke her hip in this fall. During surgery to correct the broken hip, she went in to sudden and unexpected cardiac arrest. The anesthetist did not notice any ST changes or A fib; dysrhythmia was very unexpected. The patient had a DNR. She died at 13:00 on 02/07/2021. Causes of death are listed as 1. Cardiac Arrest 2. Recent hip fracture with hip placement 3. History of Breast Cancer 4. Hypothyroid and 5. Dementia

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2/18/2021		1040574	GA	66	F	1/8/2021	1/16/2021	Patient collapsed and could not be revived. There was no prior warning. She was otherwise in good condition for her age. The death was listed as probable cardiac arrest but no autopsy was performed. Since it occurred so close to the vaccine shot I thought someone may want to know.
2/18/2021		1040183	OH	94	F	1/29/2021	1/29/2021	Patient had swelling around her jaw after her second shot of the covid , Pfizer vaccine (.5 ml IM) on the Friday morning, January 29th, I took her to a follow up appointment with the cardiologist at 3:00 pm, as a follow up to a small heart attack event with hospitalization two weeks previously, at the cardiologist she was given the ok/all is well. That next morning early, she had a 911 event at her assisted living apartment and was sent back to the hospital, having had another heart attack. Patient died on the following Thursday, February 4, 2021. I do not know if the vaccination had any cause for my mothers death; but I feel it is necessary to report this series of heart attacks after she received the pfizer vaccine. Her Certificate of Death records the cause of death as "Coronary Artery Disease".

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2/18/2021	1039952			U			<p>Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who dies 15 minutes after receiving the vaccine.; a young premature baby received BNT162B2; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported similar event for 2 patients. This is 1st of 2 reports. A patient of unspecified age and gender (reported as a young premature baby) received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The relevant medical history and concomitant medications were not reported. The consumer stated his main concern was even though the vaccine had been authorized. The vaccine was only given vaccine on the side of the road. People were dying from the vaccine more than from the virus. He gave out some percentage of people that could die from the virus vs from the vaccine. The percentage of death rate was 0.00045% from the virus. The percentage of death from the vaccine was 6.6%. There were many people reporting side effects such as bell's palsy, whole body convulsion. Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who died 15 minutes after receiving the vaccine. He said it's sad these were front line worker who were facing all these side effects. The outcome of the event was fatal. Information on the lot/batch number has been requested.; Sender's Comments: Linked Report(s) : US-PFIZER INC-2021157531 same reporter, drug, event, different patient; Reported Cause(s) of Death: Two report of death related to the vaccine were reported in a young premature baby and 25-year-old young person who dies 15 minutes after receiving the vaccine.</p>

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2/18/2021		1039922		73	F	2/5/2021	2/6/2021	death was from natural causes; collapsed; This is a spontaneous report from a contactable consumer. A 73-year-old female patient received the first dose of the bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on 05Feb2021 at 73-years-old at a single dose for COVID-19 immunization. The patient's medical history included chronic obstructive pulmonary disease (COPD) from an unknown date and unknown if ongoing (on oxygen as needed, but not every day), oxygen therapy from an unknown date and unknown if ongoing. Concomitant medications were not reported. The patient previously received the influenza vaccine (MANUFACTURER UNKNOWN) for immunization on unknown dates (Gets flu shot every year around October). On 06Feb2021, the patient collapsed (medically significant) and experienced death was from natural causes (death, medically significant). The clinical course was reported as follows: The reporter stated that his grandmother received the first dose of the Pfizer COVID-19 vaccine on 05Feb2021 and passed away on the morning of 06Feb2021. The patient went to bed and woke up in the middle of the night around 03:00 to use the bathroom and collapsed and died within 10-15 minutes of collapsing. The patient was pronounced dead at the scene. The reporter asked: "What do you know about the news in the media about reports of death in nursing home elderly patients?" The reporter wanted to know the ingredients of the Pfizer COVID-19 vaccine. The reporter wanted to know about the use of the Pfizer COVID-19 vaccine in patients with underlying conditions. The patient had COPD and was on oxygen as needed, but not every day. The Medical examiner said the death was from natural causes and the family was not doing an autopsy. The patient had been tested for COVID and was negative. The patient underwent lab tests and procedures which COVID test: negative on an unspecified date. The clinical outcome of the event, death was from natural causes, was fatal. The clinical outcome of the event, collapsed, was unknown. The patient died on 06Feb2021 due to death was from natural causes. An autopsy was not performed. The batch/lot numbers for the vaccine, bnt162b2, were not provided and will be requested during follow up.; Reported Cause(s) of Death: death was from natural causes

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2/18/2021	1039597		64	M	1/30/2021	2/14/2021	Death Narrative: Patient received first dose of COVID vaccine on 1/30/21. Reported by his wife to agency that he passed away at an outside hospital on 2/14/21. By report of his wife: "due to sepsis (related to bed sores) and aspiration pneumonia~~
2/18/2021	1039271	WI	90	M	2/11/2021	2/11/2021	Gentleman received his 1st Moderna dose on Thu. 2/11 at 0849. Vaccination protocol was completed. Pt reported feeling fine, no fever, and that he had no allergies which would prevent him from getting the vaccine. Pt played cards with friends later that day 2/11, but left at 1930 (normally plays late into evening) telling his companions he didn't feel well and his neck hurt. A welfare call was completed on Sat. 2/13, and the patient was found deceased in the bathroom by his son. It appears patient fell off toilet and hit his head on the tub. Pressure ulcer present under injection site. The presumed time of death was Thur. evening.
2/18/2021	1039250	WA	93	M	1/30/2021	2/14/2021	Daughter of decedent reported that he quickly declined within 2 weeks of receiving vaccine and developed shortness of breath. Decedent received vaccine 1/30/2021 and died 2/15/2021. Only received first dose of series.

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2/18/2021		1039090	SD	91	F	2/2/2021	2/3/2021	The patient came to the Emergency Room at approx 3:30 am on 02/03/2021 with pain in right arm (same arm the COVID vaccine had been administered in approx 12 hours earlier) and feeling generally unwell. Patient was concerned about possibility of gout flare or that something was wrong with her arm. Elevated blood pressure was noted; this was attributed to anxiety. She was evaluated, given 500 mg Tylenol, and discharged since the pain was decreasing and blood pressure was stabilized. Patient instructed to follow-up with physician. The next day, on 02/04/2021, the patient arrived at the Emergency Room by ambulance; cardiac arrest was the chief complaint. The patient's daughter stated the patient had been "feeling generally poor and then suddenly collapsed." Daughter described "gurgling respirations" and being unresponsive. 911 was called, police arrived within 5 minutes and initiated CPR. Epinephrine, atropine, lidocaine and bicarb administered after arrival to Emergency Room. Shockable rhythm never demonstrated. Patient never recovered spontaneous respiration or movement. The death was called at 23:04. Coronary artery disease with cardiac arrest is the cause from the ER records; the coroner is putting COVID-19 vaccination in Part 1 of the death certificate.
2/18/2021		1039028	IN	59	M	2/17/2021	2/17/2021	Systemic: no issues during observation period-Severe, Additional Details: patient received moderna immunization during the morning of 2/17/2021. patient was found by facility staff at 2:38pm with no pulse CPR was started, aed was used and ems was called. time of death 3:15pm
2/18/2021		1038720	NY	99	F	2/17/2021	2/18/2021	Resident complained about back pain in the middle of the night and when they went to do a blood pressure examination, she passed away at 2:40 am.

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2/18/2021		1039304	CA	73	M	1/29/2021	2/2/2021	Resident getting rehab therapy in the facility and has a long history of Parkinson's Disease. On 01/29/21, he received the COVID vaccine on left deltoid, resident was recently hospitalized due to Pneumonia and was on antibiotic IV and was recently placed on GT feeding due to severe dysphagia from his Parkinson's disease. On 01/31/21, started having increased congestion. On 02/02/21, started having increased temperature and WBC went up >20,000 on 02/03/21, started on Vancomycin IV on 02/04/21 but was transferred to the hospital. Facility was notified today (02/18/21) that resident expired in the hospital.
2/18/2021		1038719	AZ	80	F	1/30/2020	1/18/2021	death attributed to unknown cause
2/18/2021		1038658	DC	86	F	2/1/2021	2/8/2021	86yo female alert, stable with ankle abrasion eating 100% prior to vaccine in assisted living facility. On 2/1/2021, received Moderna vaccine. Starting thereafter, eating 50% on 2/2/21. Temperature was 98 tympanic. On 2/3, the leg abrasion started having moderate bleeding. On 2/4, the caregiver noted patient "not looking good, unable to talk, arms moving aimlessly, grasping". BP 95/41, temperature 98, oxygen on room air 92-93%. POA did not want hospital transfer. 2/5 Hospice started, oxygen given, morphine given. 2/5-2/8 comfort care given, patient responsive to tactile stimuli, resting, not taking oral medications or food. 2/8/2021 patient expired.

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2/17/2021		1036182	CO	80	M	2/12/2021	2/12/2021	<p>Patient received 2nd dose of the COVID-19 Pfizer vaccine, was observed in office x 15+ minutes, and released home. Pt and his son exited the building and when they got to the car, the pt shouted out "oh no!" and collapsed to the ground. The patient was unconscious experiencing agonal respirations, and unresponsive to painful stimuli. There is an Emergency Room at the same location. Their staff came out and helped to transfer the pt to the ED for further evaluation. It was found that the patient had a known Anterior communicating artery aneurysm (7/28/2017) that seemed to have ruptured. The patient was stabilized and transported to our local hospital and upon arrival, he was effectively comatose with a GCS 3. CT Head notated an extensive subarachnoid and intraventricular hemorrhage most probably related to a bleeding anterior communicating artery aneurysm. Neuro-Interventional Radiologist dictation reads "Hunt Hess 5 Fisher grade 4 extensive subarachnoid hemorrhage with intraventricular hemorrhage and early hydrocephalus secondary to rupture of a known anterior communicating artery aneurysm. Initial ICP after EVD placement noted to be in the 120s now 68 treatment complicated by aneurysm rerupture after admission and increased volume of blood although large volume of hemorrhage was seen on initial scan and no change in the patient's clinical exam on her scale was noted due to this rerupture. Patient's exam and prognosis are poor giving extensor posturing lack of extraocular movements to doll's maneuver and weak pupillary reflex as well as cough and gag. Follows no commands or instructions at this time with no spontaneous movement on ventilator set at 12 overbreathing at 14-16 at this time without any sedation." The family opted to discontinue any further treatment to include surgical intervention given the findings. The patient was given comfort care with son and daughter at the bedside. The patient was extubated and expired at 1545h on 2/13/2021.</p>
2/17/2021		1035872	TX	83	M	2/11/2021	2/12/2021	<p>Patient was found unresponsive at 8 am on 2/12; patient was deceased</p>
2/17/2021		1035878	MO	88	M	2/13/2021	2/15/2021	<p>Daughter called to report that the patient died on 02/15/2021. No report of symptoms from the vaccine on 02/13/2021</p>

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2/17/2021		1035897	NE	78	F	2/2/2021	2/1/2021	Patient received her vaccine on 2/2/2021 in the morning. She was observed for over 15 minutes and had no history of any anaphylactic reaction of any sort. She felt fine and went home. 2/15/2021 we were notified by her family that she had passed away on 2/7/2021 at home. The cause of death was stated as myocardial infarct secondary to coronary artery disease. We do not think it had to do with the vaccine administration. The patient had many comorbidities.
2/17/2021		1035943	CA	67	M	2/11/2021	2/13/2021	Patient had no reaction at the time of vaccination. Waited the required 15 minutes and was allowed to go home.
2/17/2021		1035950	OH	78	M	1/21/2021	2/15/2021	Patient found deceased at home on 2/15/2021. There was no known cause of death with no significant medical history.
2/17/2021		1036047	NY	74	M	1/16/2021	1/24/2021	Short version The patient has long-standing health issues. The patient received the first dose of Moderna COVID-19 vaccine on 1/16/2021 (unknown location). The patient suffered an event in his home on 1/24/2021. CPR and treatment was begun and he was transported to the ED. He was pronounced dead in the ED at 0846. Long version 70-year-old male with past medical history of CAD with pacemaker, A. fib, COPD, hypertension/hyperlipidemia presenting in cardiac arrest. 911 call at 0724. Per EMS, patient was witnessed by family to have seizure-like activity and then collapsed and became unresponsive. Patient was noted by family to be pulseless and CPR was started right away. Patient received two doses of epi by police were on scene first (AED defibrillation x2) and six doses of epi (plus 6 more AED shocks) by EMS when they arrived. Patient had CPR performed for 45 minutes prior to arriving at the hospital. On route, patient had episodes of paced rhythm and V. fib. Patient received one amp of bicarb and one amp of calcium en route. Patient also received 300 mg of amiodarone en route. Arrived in ED at 0810 Patient received ongoing compressions, shocks and additional medications (epinephrine x6, lidocaine IV, sodium bicarbonate) until time of death called at 0846 in the ED.

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2/17/2021	1036345	FL	79	F	1/29/2021	1/30/2021	Patient developed lethargy and malaise several hours after vaccine with a low grade fever. The following morning she reported to her husband inability to taste food or drink. She developed nausea and vomiting which persisted from 1/30/21 through her death. She was found deceased in bed by her husband this morning.
2/17/2021	1036174		84	M	2/6/2021	2/7/2021	At midnight developed heart burn, low BP but normal O2; at 4am took Antacid then felt better and BP was normal. Then around 7am asked to go to ER because the discomfort became pain and moved to the side. Went to ER, mild Cardiac issue and at 3pm had heart attack and passed away.
2/17/2021	1035866	IL	74	M	2/11/2021	2/15/2021	Pt died on 2/15/21. On 2/13/21, pt complained of muscle aches.
2/17/2021	1035546	FL	94	F	1/16/2021	1/31/2021	Stroke; This is a spontaneous report from a contactable consumer. A 94-year-old female patient received the 1st dose of bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), via an unspecified route of administration, on 16Jan2021, at single dose, for COVID-19 immunisation. Medical history included ongoing hypertension (took medication). Patient did not have COVID-19 prior to vaccination. Concomitant included unspecified medication for hypertension. The patient experienced stroke on 31Jan2021. The patient was brought to the emergency room and hospitalized due to the event on 31Jan2021. No therapeutic measures were taken as a result of the event. The patient underwent lab tests and procedures which included COVID-19 virus test: negative in Feb2021 (a week before report); investigation: brain bleed and discovered she had a stroke (on unknown date in 2021). The patient died on 03Feb2021 due to stroke and old age. An autopsy was not performed. Patient's family did not attribute her death to the vaccine at all. The information on the Lot/Batch number has been requested.; Reported Cause(s) of Death: stroke; Old age

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2/17/2021	1036418	IL	85	M	1/21/2021	1/25/2021	ER visit 1/25/21 patient walked into a prompt care and collapsed, witnessed and pulseless CPR with ROSC after 6-7mins, no shock no meds. Awake and speaking upon arrival to ER. 2 plus pitting edema ble ER diagnosis Anasarca, cardiac arrest, hypotension, elevated troponin I levels, Acute kidney injury and syncope. ER notes reveal a syncopal episode in the shower prior to collapse at prompt care. Central line placed and plan to ship to another facility, patient continued to decline despite dopamine and dobutamine expired in ER prior to transfer.
2/17/2021	1036098	AR	77	M	1/31/2021	2/7/2021	Patient received the vaccine on 1/31/2021. Patient complained of bleeding 2/7/2021. Went to clinic where labs were conducted. Patient had an INR of 12. Previous INR results were normal prior to vaccination. Patient was also diagnosed with UTI and given antibiotics. Patient was encouraged to go to ER. Patient died on 2/12/2021.
2/17/2021	1035850	NC	67	M	2/4/2021	2/6/2021	Patient woke up on the morning of 2/6 with symptoms of a stroke. Rushed to hospital where clot found in brain. Recovered from initial stroke but then had another major stroke on 2/8 and never recovered.
2/17/2021	1035845	WI	74	F	2/3/2021	2/11/2021	We were informed by EMS that the patient was found deceased on 2/11/2021 at her home. EMS states she was dead for some time, no medical care given.
2/17/2021	1035841	IL	84	F	2/3/2021	2/8/2021	Death on 2/8/2021 unknown signs and symptoms at time of death; multiple co-morbidities
2/17/2021	1035641	KY	47	F	1/24/2021	2/9/2021	Healthcare was advised that this patient expired approximately two weeks after receiving her initial COVID vaccination
2/17/2021	1035597	GA	42	M	12/30/2020	1/17/2021	Death on 1/17/2021. Found at home deceased.

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2/17/2021		1035553		76	F	1/19/2021	1/25/2021	<p>Pt passed soon after; shortly after progressed with other covid symptoms and was admitted / acute resp failure, COVID pneumonia; acute resp failure, COVID pneumonia; Became hypotensive due to massive hamatoma 2' bleeding into abd rectus muscle.; Became hypotensive due to massive hamatoma 2' bleeding into abd rectus muscle.; Became hypotensive due to massive hamatoma 2' bleeding into abd rectus muscle.; This is a spontaneous report from a non-contactable Pharmacist. A 76-years-old non-pregnant female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE lot number EL3247), intramuscular on 19Jan2021 at single dose for COVID-19 immunisation. The patient medical history included COVID symptoms from 16Jan2021 and ongoing. Concomitant medications were not reported. The patient with acute resp failure, COVID pneumonia, that developed symptoms 9 days prior to admit and ultimately received first vaccine 6 days prior to a admit, then shortly after progressed with other covid symptoms and was admitted on 25Jan2021. She decompensated while intp and was transferred to ICU for rising O2 needs, ultimately had to be intubated. Became hypotensive due to massive hamatoma 2' bleeding into abd rectus muscle. Sx and IR consulted and did beside exploration of hematoma. Initially blood pressure responded but overnight continued with refractory hypotension. Maxed out vasopressin and levophed, hemodynamics deteriorated. The patient died on 02Feb2021. It was not reported if an autopsy was performed. No follow-up attempts are possible. No further information is expected.; Sender's Comments: Based on temporal association, the causal relationship between bnt162b2 and the events death, COVID-19 pneumonia, acute respiratory failure, hypotension, abdominal wall haematoma and abdominal wall haemorrhage cannot be excluded. The information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly</p>

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2/17/2021

1035549

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notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: Pt passed soon after

Thrombocytopenia; This is a spontaneous report from a contactable consumer (patient's wife). A male patient of unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient experienced thrombocytopenia on an unspecified date, the seriousness of the event reported as death. The patient died two weeks after receiving a COVID-19 vaccine. Patient's wife said that he died from a condition known as thrombocytopenia, marked by a shortage of the blood platelets that help stop bleeding, after he received BNT162B2. The patient underwent lab tests and procedures which included blood bilirubin: 1.50, blood osmolality: 297, blood pressure measurement: 159/106, blood urea: 22.3, monocyte count: 12.1 %, platelet count: thrombocytopenia, platelet count: platelet count decreased again to 0 on 21Dec2020. The patient died on an unspecified date. It was unknown if an autopsy was performed. The outcome of the events was fatal. No follow-up attempts are possible; information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Thrombocytopenia

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2/17/2021	1035542	UT	82	M	2/8/2021	2/8/2021	passed away; This is a spontaneous report from a contactable consumer (patient's granddaughter). An 82-year-old male patient received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, Batch/lot number: EN9581), via an unspecified route of administration on 08Feb2021 at 14:30 into right arm at single dose for COVID Prevention. Medical history included Heart valve replacement from 5 years before 09Feb2021 (2016), on Oxygen at night (reporter did not know the liter amount that the patient used at night). The patient's concomitant medications were not reported. Patient had no other vaccines on the same day as the COVID vaccine. It was reported that patient received his first dose of the Pfizer vaccine around 14:30 on 08Feb2021 and he was fine before that, and by 16:30, he had passed away on 08Feb2021. Reporter reported that the cause of death was unknown at this time and that the family would be having an autopsy performed but that it had not yet been performed. No investigation assessment could provide. The patient died on 08Feb2021 at 16:30. An autopsy was not performed.; Reported Cause(s) of Death: passed away

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2/17/2021	1035505			U			<p>Passed away with an hour to hour and 1/2 of receiving vaccine; A spontaneous report was received from a consumer concerning a patient who received Moderna's COVID-19 vaccine (mRNA-1273) and passed away with an hour to hour and 1/2 of receiving vaccine. The patient's medical history, as provided by the reporter, included COVID-19. No relevant concomitant medications were reported. On unknown date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, the patient passed away within an hour and a 1/2 of receiving the vaccine. Per the nursing home staff, they did not expect the patient to make it many more days. The patient was unresponsive in the room when the shot was given. The patient was 14+ days post COVID. No treatment information was provided. Action taken with mRNA-1273 in response to the event was not applicable. The patient died on an unknown date. The cause of death was unknown.; Reporter's Comments: This case concerns a patient, who experienced event of death (unknown cause). The event occurred an hour to hour and 1/2 after the first and last dose of mRNA-1273 vaccine administration. Based on the current limited available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded and the event is assessed as possibly related. However, Per the nursing home staff, the patient was 14+ days post COVID and they did not expect the patient to make it many more days. The patient was unresponsive in the room when the shot was given.; Reported Cause(s) of Death: unknown cause of death</p>

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2/17/2021		1034985	KY		U	1/4/2021		4 Nursing home patients Died; A Spontaneous report was received from a pharmacist concerning 4 nursing home patients of unspecified age and gender who received Moderna's COVID-19 vaccine (mRNA-1273) and died. The patients' medical histories were not provided. No relevant concomitant medications were reported. On unspecified dates, 4 nursing home patients received their first of two planned doses of mRNA-1273 (Lot # 039K20A) for prophylaxis of COVID-19 infection. A pharmacist reported that they just learned 4 nursing home patients died after the first dose of the Moderna vaccine. The patients were buried, and no autopsies were conducted. The pharmacist suspected latent Covid-19 on the patients and that the vaccine precipitated this outcome. No treatment information was provided. Action taken with the second dose of mRNA-1273 in response to the event was not applicable. The event 4 nursing home patients died was fatal.; Reporter's Comments: This case concerns 4 nursing home patients of unspecified age and gender who received their first dose of Moderna's COVID-19 vaccine (mRNA-1273) Lot # 039K20A) and died. Very limited information regarding this event has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: died
2/17/2021		1035545	NY		M			Death; This is a spontaneous report from a contactable consumer. A 42-year-old male patient received Covid 19 Vaccine (UNSPECIFIED TRADE NAME), via an unspecified route of administration from an unspecified date to an unspecified date at single dose for covid-19 immunization. The patient medical history was not reported. The patient's concomitant medications were not reported. The reporter was calling about the Covid 19 Vaccine. Reporter stated that she gets information every day from the nursing home. Reporter stated that she will provide the name of the Nursing home, she just forgot to put it down. The patient, within 2 days dead from it, he was perfectly healthy. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information on Lot/batch number has been requested.; Reported Cause(s) of Death: Death

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2/17/2021		1036437	OH	86	M	1/26/2021	2/17/2021	Patient is deceased. Family called the pharmacy on 2-17-21 to let us know he would not be coming for his second appointment. When the pharmacist tried to call the family back for more info, the phone number on file doesn't work.
2/17/2021		1035552			F	12/29/2020	12/29/2020	approximately 1:30 Pm the resident passed away; This is a spontaneous report from a Pfizer sponsored program. A non-contactable consumer reported that a female patient of an unspecified age (reported as 85 without unit) received the 1st dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Lot number: EL0140), intramuscular at left arm on 29Dec2020 11:29 at single dose for COVID-19 immunization. Medical history included dementia, aphasia, type 2 diabetes mellitus (DM), iron deficiency, asthenia, osteoporosis, polyneuropathy, anxiety, Major depressive disorder (MDD). Concomitant medication included gabapentin, memantine. The patient had allergies to codiene, phenobarbital, penicillin. The vaccine was administered with no immediate adverse reaction at 11:29. Vaccine screening questions were completed and resident was not feeling sick and temperature was 98F. At approximately 13:30 on 29Dec2020, the resident passed away. 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: approximately 1:30 Pm the resident passed away
2/17/2021		1036874	KY	64	F	12/17/2020	12/20/2020	Patient developed pneumonia Admitted to hospital on 12/25. Determined to have pseudomonas bacteremia and passed away on 12/27.

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2/17/2021		1035539	OH	88	F	1/19/2021	1/1/2021	Fall; fatigued; arm pain; AML; Sepsis secondary to AML; This is a spontaneous report from a contactable consumer. An 88-year-old female patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot# EL3249), via an unspecified route of administration on 19Jan2021 17:30 in right arm at single dose for covid-19 immunization. Medical history included hypertension, hyperlipidemia, OA (osteoarthritis), cognitive impairment. No other vaccine in four weeks was administered. Concomitant medication in two weeks included atorvastatin, aspirin, calcium, gabapentin, losartan and memantine hydrochloride (NAMENDA). The patient previously took lisinopril and tetracycline and both experienced allergies. The patient had no covid prior vaccination. The patient initially had no symptoms but arm pain in Jan2021, no bleeding or bruising from injection. On 31Jan2021 19:00, patient felt fatigued. Patient suffered fall on 01Feb2021. She was admitted to hospital. All cell lines were down in Feb2021. She was diagnosed with AML (acute myeloid leukemia) in 2021. She expired 07Feb2021. Events resulted in emergency room/department or urgent care, hospitalization, life threatening illness (immediate risk of death from the event) and patient died. The patient received the treatment of blood and platelet transfusions, bone marrow biopsy, cytogenetic testing, antibiotics, intubation for events. The patient died on 07Feb2021 due to sepsis secondary to AML. An autopsy was not performed. Outcome of events were fatal.; Reported Cause(s) of Death: arm pain; fatigued; fall; Sepsis secondary to AML; Sepsis secondary to AML

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2/17/2021		1037207	UT	39	F	2/1/2021	2/2/2021	She had pain in the injection site Tuesday night and then during Tuesday she got worse with nausea and some fever. By Wednesday she was complaining that she could not pee even though she was drinking a lot of fluids. She continued to complain it was the worst she ever felt and then at 0600 Thursday morning she woke us up and said she needed to go to the hospital. We arrived at the hospital just before 0700 and she immediately threw up in the trash can. We went into a treatment room and they took blood and started fluids as she became incoherent. She said she had taken Tylenol so they started a drug to counter that but her liver function was all wrong and they started to look for a hospital that could transplant a liver. She was air evaded about 0930 to Medical center and just over 30 hours later she was dead. There is a pending autopsy. She was a healthy 39 year old mother who got the shots because she worked as a surgical tech and she was the single mother of a 9 year old little girl.
2/17/2021		1037124	NJ	53	M	2/4/2021	2/16/2021	Patient was at a gym watching his daughter. He slumped over unconscious. EMS was called. He was found to be in fine ventricular fibrillation and resuscitation efforts failed. He was brought to Hospital ED where he was pronounced dead. He had underlying cardiac disease but his family requested I report this event as possibly related to the recent COVID vaccination.
2/17/2021		1036440	GA	65	M	1/15/2021	1/27/2021	Patient died at home in hospice care from complications of stage 4 bladder cancer
2/17/2021		1037076	NE	89	M	1/26/2021	1/30/2021	Resident developed increased confusion on 01/30/2021 that may have been related to vaccine or to residents other medical conditions including dementia, anxiety, shortness of breath, history of lung cancer, and COPD. Sustained a fall with fracture and was transferred to Hospital. Surgical intervention performed to repair hip. Resident returned to Skilled Nursing facility. Did not recover after surgery and family chose palliative measures. Resident died/ expired on 02/09/2021.

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2/17/2021		1038633		85	M	2/9/2021	2/10/2021	Moderna COVID vaccine administered 2/9/21. Patient expired in home on 2/10/21, at around 2100. Patient had h/o CVA in2001 with long standing sequelae. On day of administration, team attempted to draw lab specimen with vein finder, but patient was possibly Narrative: Moderna COVID vaccine administered 2/9/21. Patient expired in home on 2/10/21, at around 2100. Patient had h/o CVA in2001 with long standing sequelae. On day of administration, team attempted to draw lab specimen with vein finder, but patient was possibly dehydrated. CG/wife reported to APRN on 2/10/21, patient was sleeping and snoring and then began to sleep more quietly. She checked on patient and found that he had no pulse and had passed away
2/17/2021		1037051	CA	77	F	2/8/2021	2/10/2021	Diarrhea , fatigue on 2/10 Fall 2/12 out to hospital Resident Expired 2/14
2/17/2021		1036993	IA	73	M	2/16/2021	2/16/2021	Patient reported at review of questionnaire had headache that day. Temp was taken, 97.8, okay. proceeded. Conversing customer friend in store afterward. When timer went off, said he was fine, he and his wife left. Daughter called to store Wednesday morning, said Pt had passed away Tuesday, that it was unknown the cause, and just wanted to let us know. We did not take down her phone number and last name. The patient was a long time customer.
2/17/2021		1036881	AK	70	M	1/11/2021	1/20/2021	Myocardial Infarction
2/17/2021		1036787	MN	78	F	2/3/2021	2/5/2021	passed away 2 days after vaccine was given
2/17/2021		1036770	OH	90	F	1/19/2021	2/10/2021	Feb 10th died in her sleep. No apparent reason.
2/17/2021		1036748	IL	83	M	1/13/2021	1/18/2021	Sent to ER 1/14/2021 due to drop in blood pressure with LOC during dialysis. Imaging revealed right lower lobe pneumonia given script for amoxicillin. According to staff patient was on dialysis had pneumonia and was on hospice, dialysis stopped resulting in death.
2/17/2021		1036731	NH	88	F	2/4/2021	2/14/2021	SOB, DOE, oxygen desaturation, nausea. Ems transport to ER for eval

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2/17/2021	1036519	IN	65	M	2/16/2021	2/17/2021	Received first SARS-CoV2 vaccination yesterday at local store Experienced new symptoms of chills, nausea as well as worsening from baseline dyspnea at night. Wife states he had rough morning breathing and had sudden loss of consciousness and unresponsiveness and failed to respond to bystander CPR. He expired at his home.
2/17/2021	1036460	IL	90	M	2/2/2021	2/5/2021	death 2-5-21
2/17/2021	1036935	KY	86	F	1/12/2021	1/25/2021	unkown
2/17/2021	1036480	IL		M	1/26/2021	2/2/2021	Patient passed away on 2/2/21 after being admitted on 1/31/21 after receiving COVID19 Moderna Vaccine on 1/26/21. On initial report to the hospital patient reported having a cough for over 2 weeks (starting approx. 1/17/21). He had a postive COVID19 PCR on 1/31/21. Intubated on 1/31/21 and passed away on 2/2/21
2/17/2021	1036697	IL	69	M	2/3/2021	2/8/2021	Multiple co-morbidities history of COVID-19 6/8/2020 and 12/28/2020. At time of vaccination fighting osteomyelitis. 1st dose 1/13/21, 2nd dose 2/3/2021 expired 2/8/2021.
2/17/2021	1036532	MA	93	F	2/15/2021	2/16/2021	Patient was found unresponsive the following day and then pronounced deceased
2/17/2021	1036585	RI	63	F	2/13/2021	2/15/2021	Patient called EMS approximately 1pm on 2/15 with complaints of generalized weakness. Upon arrival EMS found her to be diaphoretic and she had a witnessed syncopal episode with question of v-fib and seizures. She became unresponsive and had no pulse. CPR was begun and she was transported to ED. She remained asystole throughout. CPR was initially continued in the ED for approximately 30 minutes and then stopped with Time of Death noted at 13:27. ED notes noted "suspect given history that patient experienced massive MI, PE or ruptured AAA". Death certificate notes indicate "significant conditions contributing to death after cardiac arrest; ASCVD".

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2/17/2021	1036634	MD	77	F	2/8/2021	2/14/2021	<p>Patient had COVID in Sept. Minimal symptoms. Received 1st dose 1/18 without adverse reactions. Second dose on 2/8-had complaints of arm soreness several days after then appeared in usual state of health. On 2/14 @ 2 hours after having lunch, patient was found unresponsive with Respirations 60, pulse 130, PO 84%, blood pressure 105/68. Patient with lots of white foam coming out of mouth. Temperature to 101.3. Patient DNR B and family deferred transfer, wanted comfort measures only. Nursing received order for MSIR. Patient continued with temps in 99-100 range with tylenol suppositories. Patient passed on 2/16.</p>

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2/17/2021		1036675	MI	61	F	1/28/2021	2/4/2021	61 yo F with history of bilateral lung transplant 6/23/17 presented to ED on 2/4/21 with chief complaint of worsening shortness of breath, nausea and diarrhea for past week since receiving since receiving COVID-19 vaccine (Pfizer) on 1/28/21. Upon arrival to triage she was obviously dyspneic with significantly low oxygen saturations. O2 sats on arrival were 65%, improved to mid 90's with O2 6 liters per NC. Admitting diagnosis: hypoxic respiratory failure post COVID vaccine. Lab work shows an elevation of the BUN and creatinine at 31 and 1.71 which is slightly higher than her usual baseline levels. BNP is elevated at 2 448 with a mildly elevated troponin. Procalcitonin is also elevated. Patient's white blood cell count is 11.07. Full viral panel including COVID-19 is not detected. All blood cultures and respiratory cultures were negative. Patient chest x-ray shows numerous bilateral patchy opacities which is significantly different from her previous chest x-ray here. Empiric rejection treatment initiated including high dose methylprednisolone, plasmapheresis, IVIG, Thymoglobulin. She continued to decline and ultimately required intubation, proning and paralyzing on 2/8/2021 and then VV ECMO cannulation on 2/13/2021. EGD done 2/14/2021 as unable to pass the TEE probe during cannulation prior day (unable to complete due to abnormal anatomy). Acute pupil exam change in the early am hours of 2/15/2021 prompted urgent head CT which revealed catastrophic brain bleed. Brainstem reflexes were lost soon after. Despite placing an EVD emergently at bedside, brain stem reflexes were not recovered. GOL engaged and patient not an organ donation candidate. Therefore discussion with sister at bedside resulted in decision for cessation of life support. Patient expired shortly after support withdrawn and pronounced dead on 2/15/2021 at 11:11 AM.
2/17/2021		1036678	PA	67	M	2/14/2021	2/16/2021	Resident did not exhibit any side effects from the vaccine. Staff spoke with him in his room at approximately 7:20am and returned to his room just a few minutes later and he was unresponsive. When the RN got to the room he had CTB. Physician documented heart failure and end stage kidney disease on the death certificate.

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2/17/2021	1036683	NY	94	M	2/15/2021	2/17/2021	cardiac arrest in the home.
2/17/2021	1036685	MN	77	F	2/13/2021	2/15/2021	Systemic: Body Aches Generalized-Medium, Systemic: Chest Tightness / Heaviness / Pain-Medium, Additional Details: Unknown if patient experienced adverse effects 2-13 or 2-14, patient called facility 2-15 reporting body aches and chest pressure and was told by facility to seek medical attention, she passed later that day
2/17/2021	1036655	IL	69	F	1/13/2021	1/31/2021	Death on 1/31/2021 multiple comorbidities
2/17/2021	1036479	IL	77	M	2/3/2021	2/8/2021	Fall 2/4 hospital admission 2/7/21 with death on 2/8/2021. Patient continued to decline on Bipap he was a DNR/DNI and family decided on comfort measures and he expired 2/8/2021.
2/16/2021	1032575	NV	56	F	1/19/2021	1/19/2021	Two days later passed away; difficulty breathing, shortness of breath; difficulty breathing, gurgling; Not feeling well; Achiness; Severe fever; Chills; A spontaneous report was received from a physician concerning a 56-year-old female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and developed fever, chills, achiness, shortness of breath, gurgling and unresponsive. The patient's medical history was not provided. Concomitant product use was not provided. On 19 Jan 2021, prior to the onset of the events, the patient received their second of two planned doses of mRNA-1273 (Lot 042L20A) intramuscularly in the left arm for prophylaxis of COVID-19 infection. After receiving the vaccine on 19 Jan 2021, the patient experienced fever, chills, shortness of breath, gurgling and achiness. On 21 Jan 2021, the patient was found unresponsive. Emergency medical services were called to perform life saving measures however, they were unsuccessful. No further treatment information was provided. The patient died on 21 Jan 2021. The cause of death was reported as unknown. An autopsy was planned.; Reporter's Comments: This case concerns a 56-year-old, female, who experienced a serious event of death, with many other events after receiving second dose of mRNA-1273 (Lot# 042L20A). Very limited information regarding these events has been provided at this time. Further information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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2/16/2021	1033323		61	M	1/14/2021	2/13/2021	patient passed away within 60 days of receiving a COVID vaccine
2/16/2021	1033263		69	F	1/27/2021	2/14/2021	patient passed away within 60 days of receiving COVID vaccine
2/16/2021	1033155	SD	64	M	2/11/2021	2/11/2021	Vaccine given in clinic per protocol - patient monitored for 15 minutes, no adverse reactions noted at the time. Patient stated he felt fine following 15 minute monitoring time. Patient left facility- it was later reported that pt had a fall at home. Upon review of pt's medical record - Pt's wife had to initiate CPR and call EMS for transportation and life saving measures enroute to the Emergency Room. Pt was intubated as pt was in asystole upon arrival to the ER, ACLS was continued, pt was noted to have a traumatic brain injury from his fall at home, and pt was pronounced dead at 1620.
2/16/2021	1033131	IL	76	M	2/11/2021	2/14/2021	Patient received initial COVID vaccine on 2/11/2021 at Clinic. Direct observation for 15 minutes and no documentation noting an adverse reaction. On 2/14/2021 was diagnosed with Sepsis secondary to pneumonia, started on antibiotic therapy, cardiac arrested, and expired on 2/14/2021 while at Hospital.
2/16/2021	1033102	WV	93	M	1/7/2021	1/29/2021	Patient received first dose of vaccine on 1/7/21 at a community Public Health clinic. On 1/29/21 he received a second dose at the community Public Health clinic. On 2/5/21, the patient presented to the ED with complaints of shortness of breath worsening over the last 2 weeks. Patient reported that he had decreased exercise capacity and increased coughing with sputum production intermittently. Patient reported that he had been feeling chilled, but no fevers. Patient was admitted and treated with Decadron and Remdesivir. Patient experienced increased oxygen requirement. Patient was a DNI and did not want to be on life support. After discussion with the patient and family, patient was moved to comfort care. passed away on 2/11/21.
2/16/2021	1032880	KY	78	F	1/22/2021	2/4/2021	Received Pfizer 1/22/2021. RNA+ 2/4/2021. S/S SOB, cough, confusion. COVID assoc. resp. failure, stage 4 lung cancer, COPD, HTN, former smoker. patient in hospice and died 2/10/2021.

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2/16/2021	1032662	UT	86	M	1/25/2021	2/5/2021	Death
2/16/2021	1034116	VA	58	F	1/19/2021	1/30/2021	Presented from clinic with 3-4 days of extensive rash. There were multiple areas of skin sloughing on bilateral upper extremities and abdominal wall.
2/16/2021	1033444	CA	80	M	1/16/2021	1/25/2021	symptoms of ongoing congestive heart disease just progressed
2/16/2021	1032873	FL	92	M	2/13/2021	2/14/2021	He had rigors starting 6 pm the day after the vaccination. He was treated with one 500 mg tylenol. He had increased wheezing but did not complain of SOB. At 0400 the next morning, he died.
2/16/2021	1034146	AZ	28	M	2/13/2021	2/14/2021	ARRIVED AT EVENT, CONSENT FORM COMPLETED, DID NOT REPORT HE HAD BEEN ILL, DID NOT REPORT THAT HE TOOK ANY FEVER REDUCING MEDICATIONS
2/16/2021	1033873	IL	25	F	1/20/2021	2/1/2021	PATIENT PASSED AWAY ON 2-1-2021
2/16/2021	1033448	MN	82	F	1/26/2021	1/27/2021	Fever by the next day, difficulty breathing, pneumonia, and then DEATH within a few days. (Died 02/01/2021)
2/16/2021	1034349	CA	90	F	2/10/2021	2/12/2021	Patient awoke on 2/12/21 with altered mental status, confusion, respiratory distress, was taken to hospital by ambulance. Per ED notes from ED attending Pt presented with hypotension and respiratory distress. DNR status, patient given comfort measures and passed away in ED at 11:24 am on 2/12/21.
2/16/2021	1034182	CO	82	M	1/29/2021	2/1/2021	Approximately 2 weeks post vaccination developed rapid AF, CHF. Admitted to Medical Center. Discharged home on hospice. Patient died at home on 2/13/2021. Reported to this reporter at second dose clinic on 2/16/21. Other details not known. Unknown if related to vaccine.
2/16/2021	1034055	MD	52	M	2/11/2021	2/12/2021	Associate developed SOB on 2/12/21. Taken to Hospital on 2/13/21. Reported deceased 2/14/21.

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2/16/2021		1033682	WI	95	M	2/4/2021	2/5/2021	L hand edema, hematoma which burst and caused bleeding sending pt to the ER for pressure dressing and 2 stitches. L hand and arm progressively got more edematous and bruised looking (severely black/blue/purple) and the hand continued to bleed and swell on 2/6/21. Severe arterial and venous issues and apparent blood clots. On 2/7/21 there were also lumps noted on left inner thigh. Pt. stopped eating or drinking on 2/8/21 and expired on 2/12/21.
2/16/2021		1033607	CA	73	M	2/12/2021	2/13/2021	Vomiting, death.
2/16/2021		1033472			U			Resident coded and expired; A spontaneous report was received from a consumer concerning a patient who received Moderna's COVID-19 vaccine (mRNA-1273) and coded and expired. The patient's medical history was not provided. No concomitant product use was reported. On an undisclosed date, the patient received their first of two planned doses of mRNA-1273 (Lot number: not provided) for prophylaxis of COVID-19 infection. On undisclosed date, the patient coded and expired. Treatment information was not provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on an undisclosed date. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: MEDICAL COMMENT: MOD 2021 009822 DEATH NOS This case concerns a patient of unknown age and gender who received their first of two planned doses of mRNA-1273 (Lot number: not provided) for prophylaxis of COVID-19 infection and had died. Very limited information regarding this event has been provided at this time to make a proper medical assessment, therefore, the causality is unlikely related to the vaccine in this case of death not otherwise specified. No contact information provided. Follow up is not expected.; Reported Cause(s) of Death: Unknown cause of death

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2/16/2021	1033466		70	M			70 yo man with multiple severe medical comorbidities received his first dose of Moderna COVID-19 vaccination without incident. 8.5 hours later, he was noted by his family to be in his usual state of health. 9.5 hours after the vaccination, he was found down by his family in cardiac arrest. Resuscitation attempts were not successful, and the patient died.
2/16/2021	1034192	CO	74	F	2/1/2021	2/3/2021	Patient presented with spontaneous IVH of small vessel origin with essentially no past medical history. She then acutely developed mesenteric ischemia. Died due to all dead small bowel which also appeared to be small vessel disease and not embolic/thrombotic. This process started one week after
2/16/2021	1033585	TX	59	M	1/7/2021		The decedent received first Covid vaccine, 12/2020 and second vaccine 01/07/2021. The decedent experienced no known side effects.
2/16/2021	1033585	TX	59	M	1/7/2021		The decedent received first Covid vaccine, 12/2020 and second vaccine 01/07/2021. The decedent experienced no known side effects.
2/15/2021	1031494	IA		F		12/20/2020	Spouse awoke 20Dec and found spouse dead; This is a spontaneous report from a Pfizer sponsored report Corporate (Pfizer) Social Media Platforms. A non-contactable consumer (patient's husband) reported that a female patient of an unspecified age (Age: 89, Units: Unknown) received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Formulation: Solution for injection, Lot number: EH9899, Expiry date: unknown), intramuscular on an unspecified date at a single dose for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. It was reported that spouse awoke and found spouse dead on 20Dec2020. Patient was not transferred to hospital. 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: Spouse awoke 20Dec and found spouse dead

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2/15/2021	1030893	WI	92	F	2/3/2021	2/10/2021	Resident had slight/slow decline in health prior to vaccine but continued to be able to walk around with walker at community. The day of the vaccine she had a fever. 2 days after vaccine resident did not get out of bed all day and refused to eat. She had small amounts of orange juice as her blood sugar level was low due to not eating. Resident was diagnosed with a UTI and began an oral antibiotic. 3 days after and on day 5 after vaccine resident began feeling weak and had a fall on each day. The following day again resident spent the day in bed. The next day she was quite restless, was on the edge of her bed attempting to self transfer often throughout the day. Resident continued to be restless on the 10th of Feb, had further decline on the 11th of Feb. Resident passed away early the AM of Feb. 12th.
2/15/2021	1030132			U			a doctor died of low platelet and brain bleed 16 days after the vaccine; a doctor died of low platelet and brain bleed 16 days after the vaccine; The is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The patient medical history was not reported. The patient's concomitant medications were not reported. The patient (doctor) died of low platelet and brain bleed 16 days after the vaccine. It was not reported if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: a doctor died of low platelet and brain bleed 16 days after the vaccine; a doctor died of low platelet and brain bleed 16 days after the vaccine
2/15/2021	1030701	FL	76	F	2/8/2021	2/12/2021	unknown, husband reported hospitalization 02/12 and deceased 02/15

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2/15/2021	1030852			U			Died; A spontaneous report was received from a reporter concerning a unknown patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unknown date, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, the patient passed away. No treatment information was provided. Action taken with RNA-1273 in response to the event was not applicable. The patient died on unknown date. The cause of death was reported as unknown. Autopsy details were unknown.; Reporter's Comments: This case concerns a patient of unknown age and gender. The patient's medical history was not provided. The fatal, unexpected event of death occurred on an unknown date after the administration of the first dose of mRNA-1273 on an unknown date. The cause of death was reported as unknown. Autopsy details were unknown. Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the event, a causal relationship cannot be excluded. Additional information regarding the autopsy report, date of the mRNA administration, day of death, medical information and details of concomitant product are all required for further assessment of causality.; Reported Cause(s) of Death: Unknown cause of death
2/15/2021	1030787 IL		67	M	2/4/2021	2/6/2021	Pt admitted from home with intermittent nausea, dry heaving, and central chest pressure which self resolve in 2 minutes since 2/6/21. Called 911 on 2/12/21 due to sustained episode that did not resolve. EMS treated with aspirin and nitroglycerin prior to arrival to ED. In ED patient became unresponsive and went into full cardiac arrest -CPR and ACLS care initiated. STEMI with AV conduction block. 2nd degree a-v block type II - significant bradycardia - temporary pacemaker placed - Vfib -PEA. Time of death 0955 on 2/12/21 Patient recieved first dose of Moderna Covid vaccine on 2/4/21
2/15/2021	1030729 AZ		79	M	1/15/2021	2/1/2021	deceased, 2/1/21

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2/15/2021	1030712	MI	74	M	2/9/2021	2/10/2021	2/10: Fever, fatigue, tylenol 2/11 @ 1300: pt made DNR, hospice consulted 2/11 @ 1800 decreased LOC, increased RR, fever, chills - 1/5L NS bolus IV, rectal tylenol. Refusing to eat/drink, PO morphine 2/12 @ 16:30, deceased at facility **resident was not doing well prior to vaccination
2/15/2021	1030599	WY	84	M	1/18/2021	1/22/2021	Systemic: Flushed / Sweating-Mild, Systemic: Other-Death-Severe
2/15/2021	1030586	PA	65	M	2/11/2021	2/14/2021	This individual's employer informed our facility that he passed away at his home on 2/14/2021. Since he was not brought into our hospital, we do not have information regarding other health conditions or active medications. Since this individual received his second covid vaccine three days prior, this was reported to Moderna in addition to this VAERS report being completed. The coroner for County can be contacted.
2/15/2021	1030557	PA	69	F	2/10/2021	2/10/2021	According to her husband, approximately 3 hours after vaccine, patients clasped and was instantly unconscious. She was pronounced dead upon arrival to hospital and physician told husband that she had suffered a burst abdominal aneurysm and passed immediately. Nothing was out of ordinary during vaccination and during 15 minute wait time after.
2/15/2021	1030468	NE	76	M	2/11/2021	2/12/2021	Pt presents to ER with increased weakness, hypoxia, history of COPD, but not oxygen dependent., hypotension. Acute Kidney failure noted in labs, not previously diagnosed, new hyperkalemia. BP 73/39, HR 67. dopamine initiated, and switched to Levophed. Oxygen Sat 86%, requiring 10 L O2. Transferred from this critical access hospital to another Hospital. Expires later 2-13-2021

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2/15/2021	1030011			U			taking Eliquis who died after receiving the Pfizer-BioNtech Covid-19; This is a spontaneous report from a contactable consumer based on information received by Pfizer from Bristol-Myers Squibb (manufacturer control number US-BRISTOL-MYERS SQUIBB COMPANY-BMS-2021-014171), license party for apixaban (ELIQUIS). This spontaneous case was reported by a non-health professional and describes the occurrence of DEATH (taking Eliquis who died after receiving the Pfizer-BioNtech Covid-19) in patient of an unknown age and gender who received apixaban (Eliquis) for an unknown indication. CO-SUSPECT PRODUCTS included Covid-19 Vaccine. On an unknown date, the patient started Eliquis (unknown route) and Covid-19 Vaccine (unknown route). DEATH occurred on an unknown date. The cause of death was not reported. It is unknown if an autopsy was performed. The doctor died after taking Eliquis with Covid-19 Vaccine. For Eliquis(Unknown), the reporter did not provide any causality assessments. This case was linked to US-BRISTOL-MYERS SQUIBB COMPANY-BMS-2021-012621 (Linked Report).; Sender's Comments: BMS Medical Evaluation Comment: This patient died after receiving apixaban therapy. Patient also received COVID-19 vaccine. Based on the limited information available regarding the cause of death and autopsy details, it cannot be ascertained with the reasonable possibility that the apixaban could have caused the event.; Reported Cause(s) of Death: Unknown cause of death

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2/15/2021	1030273			U	12/28/2020	12/30/2020	Death; A spontaneous report was received from a reporter concerning a patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. The patient received their first of two planned doses of mRNA-1273 on 28 Dec 2020 intramuscularly for prophylaxis of COVID-19 infection. On 30 Dec 2020, 2am the patient passed away. Administrator marked as natural causes. No treatment information was provided. Action taken with mRNA-1273 in response to the event was not applicable. The outcome of the event was fatal. The patient died on 30 Dec 2020. The cause of death was reported as unknown. The reporter did not provide an assessment for the event, passed away.; Reporter's Comments: This case concerns a patient of unknown age and gender. The medical history and concomitant medication is not provided. The patient experienced Death. The event occurred approximately one day after receiving their first of two planned doses of mRNA-1273 (Lot unknown). Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. The benefit-risk relationship of Moderna's COVID-19 vaccine is not affected by this report.; Reported Cause(s) of Death: Unknown cause of death
2/15/2021	1031544	IA	90	F	2/11/2021	2/14/2021	Patient family had been noticing onset confusion for a few weeks prior to vaccine and event. Patient was taken to ED when found unconscious and died of a subdural hemorrhage a few days after vaccine clinic at retirement home.
2/15/2021	1030323	WI	66	M	2/3/2021	2/5/2021	Patient had COVID vaccination on 2/3 with no adverse s/s before leaving unit. Upon coming to treatment Friday 2/5 he reported to the RN that he had fallen on thursday 2/4 due to "getting up fast" did not hit head or hurt anything per RN discussion. Began treatment without difficulty. About 3/4 way through treatment was talking with staff and became unresponsive - code was called and pt expired after 30 minute resuscitation efforts.
2/15/2021	1032252	CA	96	M	1/7/2021	1/26/2021	Resident tested COVID-19 confirmed positive a few days after covid vaccination.

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2/15/2021		1031593	GA	81	M	2/11/2021	2/13/2021	On February 11, 2021 around 10:15 am, patient was given the Moderna brand COVID-19 vaccination. After his vaccination, he was instructed to wait around for 15 minutes after the administration of the vaccine. During this time, there were no reported issues with the patient. On February 15, 2021 around 9:15am, patient's wife called the pharmacy and spoke with the pharmacist informing her that patient had passed away in his sleep on Saturday evening. Patient's wife inquired about whether death may have been caused by an adverse reaction to the vaccine. During the call patient's wife mentioned that patient slept a lot the day of the vaccine and the day after. patient's wife mentioned that patient woke up Saturday to eat breakfast and lunch. She states that later that evening, she found patient asleep and cold which she then realized that he'd passed away.
2/15/2021		1030025	OK		M			Death; A spontaneous report was received from a consumer concerning a male patient who received Moderna's COVID-19 vaccine (mRNA-1273) and the patient was died. The patient's medical history was not provided. Concomitant product use was not provided. On an unknown date, the patient received his first dose of mRNA-1273 (Lot number unknown) for prophylaxis of COVID-19 infection. On an unknown date, the patient was died. Treatment of this event was not provided. The patient was died. The cause of death was not provided. Autopsy details were not provided.; Reporter's Comments: This case concerns a male patient (unknown age), who experienced event of death (cause unknown). The event occurred on an unknown date after the first and last dose of mRNA-1273 vaccine administration. Autopsy and cause of death were not reported. Based on the current available limited information and temporal association between the use of the product and the start date of the events, a causal relationship cannot be excluded and the events are assessed as possibly related.; Reported Cause(s) of Death: Death
2/15/2021		1032327	CA	89	F	2/4/2021	2/11/2021	On monitoring for weight loss .
2/15/2021		1032321	CA	87	M	1/7/2021	1/19/2021	Resident has shortness of breath on 1/19/2021 and was transferred to Hospital 1/20/2021

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2/15/2021	1032303	CA	83	F	1/7/2021	2/1/2021	On monitoring for declining in condition, loss of appetite and generalized body weakness on 2/1/2021. Was confirmed COVID-19 positive 4/23/2020.
2/15/2021	1032265	CA	89	F	1/7/2021	1/27/2021	Resident tested NEGATIVE for COVID-19 last 1/25/2021. She was on monitoring for desaturation and low blood pressure on Jan. 27,2021
2/15/2021	1032163	GA	51	F	1/16/2021	2/1/2021	Patient received dose #1 of COVID-19 vaccine on 1/16/21. Within 3 days, she developed petechiae up to ankles, later rising up to her knees. Pt admitted to hospital on 2/6/21 for symptomatic anemia 2/2 vaginal bleeding. Patient received 4 units FFP, 4 units PRBC, 1 unit cryoprecipitate, and vitamin K 5 mg IV. Also started on medroxyprogesterone 20 mg PO TID. Alectinib d/ced due to worsening liver function. Evalauted by OB/GYN and Hematology. Diagnosed with DIC. Patient with worsening bilateral lower extremity edema and purpura with pain and weakness. Palliative care consulted. Patient passed away on 2/11.
2/15/2021	1032161	NH	86	M	1/12/2021	1/13/2021	The day after the 2nd shot, patient developed blisters on his lips and mouth. The care facility said that he had a nut allergy -- but he had never been allergic to nuts. He stopped eating and drinking and his BP had dropped to 60/40. By Jan 16th they called to say he was dying and he passed away on 1/18/21. Patient had COVID19 from Oct 29th - early November. By Nov 21st he had lost 40 lbs. He was 6'3" and had gone from 189lbs to 149 lbs with COVID. By Nov 21st when we could visit, he had recovered from COVID, but was very thin and weak. He could not bathroom alone and kept falling. He didn't seem to have a bad reaction to the 1st COVID shot, But he immediately reacted to the 2nd shot and passed away within 6 days.
2/15/2021	1031993	MN	89	M	2/12/2021	2/12/2021	Patient reported mild flu like symptoms from vaccination later that evening. Next morning LTCF staff found pt deceased

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2/15/2021		1031909	FL	56	F	1/8/2021	1/30/2021	Pt received dose #1 of COVID-19 vaccine (Pfizer-BioNTech) on 12/18/20 and dose #2 (Pfizer-BioNTech) on 1/8/21. On 1/30, patient was evaluated at urgent care due to back pain. No bloodwork done; metronidazole prescribed for 7 days. On 2/8, patient was admitted to outside hospital due to ongoing symptom progression. At time of admission, hgb 5 g/dL and plt 9k. Per Dr. (hematology/oncology), pt with schistocytes, LDH 1500, and elevated reticulocyte count consistent with thrombotic thrombocytopenic purpura (TTP). SCr >2 mg/dL. Patient immediately treated with plasma exchange and steroids, however continued to decline. Patient expired on 2/14/21.
2/15/2021		1031846	WA		F	2/11/2021	2/12/2021	Patient and her husband are elderly, but healthy and live independently. Patient took blood pressure medicine 'off and on' according to family. She was 5'2", 120 pounds and slim and healthy and active, so was her husband, though he had pulmonary fibrosis so they had been staying home and not attending church etc, and masking when they did go out to protect against covid disease. They were both vaccinated with covid Pfizer vaccine (dose #1) on Thursday Feb 11. (02/11/2021) Thursday night as they went to bed they checked in with each other on how they each felt. Patient said she felt totally fine, and her husband said his arm was a bit sore. Patient woke before her husband on Friday Feb 12, went downstairs and, from what the family can tell, fixed herself a snack, then sat on the sofa. Patient's husband found her deceased on the sofa. He called 911 and they asked him to do CPR until the paramedics arrived. Because of proximity to covid vaccine, the ME wanted to examine the body in the home and also ordered an autopsy. Autopsy was completed on the same day as death, Feb 12, 2021
2/15/2021		1031780	NY	91	M	1/23/2021	2/1/2021	Patient was not seen at our facilities prior to or after COVID-19 vaccination. Patient received first dose on 1/23/2021 and as reported by the family member, patient expired on 2/5/21. Symptoms were reported to have started on 2/1/2021, 9 days after receiving the first dose with a drop in oxygen levels and fever. He was reported to also have a history of chronic lung disease. Patient's family member to be contacted if necessary.

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2/15/2021	1031767	MN	93	F	1/30/2021	1/31/2021	1/31/2021 12:50 Nursing Note Note Text: Res had low BP, low O2 sats, 30 breaths per minute, eyes open wide, making confused utterances. Started supplemental oxygen via NC, 2L, then 3L. Sats went up to 93% for a while, Sprvsr called. Unable to auscultate Left lung sounds. Called to update Res daughter. Called to page NP, writer went back to assess Res and O2 sats were 88%, turned O2 to 4LPM, called 911 for transport to Hospital ED. Left around 1030. NP called back afterwards, was updated. Family updated that Res was sent to Hospital ED. Note Text: Received phone call from daughter as well as information from hospital. Resident has pneumonia with septic shock. She is on abx and had thoracentesis performed for large pleural effusion. [linked]
2/15/2021	1031629	IA	85	F	2/8/2021	2/8/2021	Patient became nauseated about 10 minutes after vaccine administered, this subsided but returned several hours after the vaccine was given. She continued with intractable nausea and vomiting for about 24 hours. This patient was enrolled in hospice and she continued to decline and refused to eat or drink. She was taking Ibuprofen due to intractable back pain. Her emesis was coffee ground color. After this her condition continued to decline until her death
2/15/2021	1031595	KY	84	M	12/29/2020	2/5/2021	Unresponsive, Increase BP and H. Hospital Dx Renal Failure
2/15/2021	1032279	CA	86	F	1/7/2021	1/29/2021	Resident tested NEGATIVE for COVID-19 on 1/25/2021. She was on monitoring for declining in condition on 1/29/2021.
2/14/2021	1029790	CA	95	F	2/5/2021	2/5/2021	Taken to Emergency about 8 hours later and died in ER
2/14/2021	1029335	IA	77	M	2/9/2021	2/14/2021	Cardiopulmonary arrest

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2/14/2021		1028885	FL	91	M	12/21/2020	12/24/2020	Patient (now deceased) received 1st dose of Pfizer-BioNTech vaccine around December 21, 2020 and was noticed to be scratching, fatigued, and unresponsive by a family member on December 24, 2020. He received the second dose of the same vaccine around January 22, 2021. Pockmarks and bleeding scratch marks were noted by a family member on the patient's face prior to this second dose. On January 28, 2021 a family member was alerted that the patient was suffering from severe bullous pemphigoid- a skin condition that has never been experienced by the patient, has been reported to be related to COVID-19 viral infection, and to T-cell responses promoted by vaccines. A corticosteroid was given, but did not work. Blisters developed to the point hands had to be dressed.
2/14/2021		1028921	FL	85	M	1/26/2021	1/28/2021	Patient had no energy in the first 24 hours and then began a steady decline that started with vomiting after 48 hours, then an inability to swallow and ultimately the patients death on 2/5/21.
2/14/2021		1029003	FL	82	F	1/7/2021	1/10/2021	I video chatted with her Thursday after receiving the vaccine. My mom was in poor health but she was talking in complete sentences and responded appropriately. She was upright in bed and made eye contact. She smiled and denied pain. By Sunday, she was extremely weak and unable to sip water with a straw. Her health had changed dramatically and rapidly. She moaned in pain and was very fatigued. Her condition continued to deteriorate over the week and she stopped talking and was constantly sleeping. They started antibiotics for the oozing cancer lesion and then morphine for pain and end of life care. She passed away on January 22nd which was 15 days post vaccination.
2/14/2021		1029068	WI	79	M	2/7/2021	2/8/2021	Patient was given vaccine the following day he died ,
2/14/2021		1029374	CA	81	M	1/31/2021	2/4/2021	On 2/4/21, at around 3:00pm he began feeling very tired and he began burping in the evening. The following morning, he woke up early and was still burping and not feeling well. At around 5:00am, he collapsed. My mother called 9-1-1 and began giving CPR. The paramedics arrived and tried to revive him, and transported him to the hospital but at 6:11am, he was pronounced dead of a heart attack. He was healthy.

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2/14/2021	1029412	NY	69	M	2/2/2021	2/4/2021	Death
2/14/2021	1029511	VA	80	M	1/21/2021	1/24/2021	Developed severe shortness of breath.
2/14/2021	1029514	NC	71	M	1/6/2021	2/9/2021	patient deceased
2/14/2021	1029744	OK	93	M	1/18/2021	1/18/2021	right arm swelling immediately after injection. followed by bilateral lower leg edema, chills and body aches that continued daily at 2 weeks post immunization admin 2/4/21 treated with dexamethasone 6mg PO x 7 days- this resolved his s/s 2/13/21 patient passed away at facility
2/14/2021	1028778	CA	46	M	1/7/2021	1/10/2021	On December 17, 2020, my husband, received his first BioNTech BNT162b2 COVID-19 vaccination. On Thursday January 7, 2021, he received this second COVID-19 vaccination. The following three days after his second vaccination, he felt fine. The fourth day, on Sunday January 10, my husband felt extremely fatigued. On Monday the 11th and Tuesday the 12th, he worked a full shift but complained of extreme fatigue and extreme chills to the point that his teeth were chattering while on the phone with me. He decided to work through it. When he got home on Monday night, he started vomiting. On Wednesday January 13, he woke up and had swollen eyes. Once again, he felt extremely fatigued, even after a full nights rest. He had the day off but had an early meeting. After his meeting, he was still tired so he went back to sleep. I left to get lunch, and drop off our kids, and upon my return, I found him on the walk in closet floor, face up, having passed away. He felt as cold as ice. The rapid test done after they called the paramedics resulted in a negative COVID-19 test for him.
2/14/2021	1029554	GA	66	M	1/17/2021	2/1/2021	Patient died suddenly on 2/1/21 from unknown causes according to his son.

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2/13/2021	1028101	IN	70	M	1/22/2021	1/23/2021	Pt develops left leg pain The day after vaccination in AM subsequently drove approximately 150 miles On his way back stopped at his brothers place for lunch. He then collapsed coning down the steps, EMS started CPR. took him to ER Resuscitated briefly but went into CardioPulm Arrest again and PEA Resucitaion for aprox 1 hour but was unsuccessful. Noted to have Left leg more swollen than Right by 3 to 4 CM presumed to have died from massive Pulmonary embolism and inferior wall myocardial ischemia
2/13/2021	1027502	MO	86	M	1/14/2021	1/16/2021	My dad received his first COVID vaccine on January 14, 2021. On January 16, 2021 he ate breakfast around 7:00 am and went back to his room. When the staff checked on him around 8:00 am they found my dad unresponsive. His blood pressure was over 220 and his pulse was 43. They began manual CPR until the paramedics arrived, but my dad died.
2/13/2021	1027503	MA	77	M	2/2/2021	2/8/2021	Patient died on 02/08/2021
2/13/2021	1027619	PA	41	M	2/10/2021	2/11/2021	Swollen leg/pain- taken to urgent care- became unresponsive - CPR initiated- expired
2/13/2021	1027757	PA	77	F	1/25/2021	1/28/2021	Death
2/13/2021	1027967	MI	76	M	1/15/2021	1/20/2021	Patient received vaccination on 1/15/2021. Hemorrhagic Stroke on 1/20 , then diagnosed with complicated idiopathic coagulopathy
2/13/2021	1028217	MI	72	M	2/1/2021	2/1/2021	DEATH
2/13/2021	1028476	AR	79	F	1/21/2021	1/22/2021	She started having breathing problems/heart attack appearance. on 1/22/21 and went to the ER. Upon admittance was told it was an anaphylactic shock from the Covid shot. They kept her in ICU and released her 1/23/21. At 12:45 am on 1/24/21 she passed out and we called the ambulance. Hospital admitted her and worked through multiple organ failure issues and thought her numbers were under control. She was released on 1/27/21 and was driving on 1/28/21 around 4:15 pm and appears to have had heart failure and had a wreck. She passed away that day.

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2/13/2021		1028596	NC	94	F	2/10/2021	2/12/2021	*extreme* fatigue. could not awaken for more than few seconds. When briefly awake she was coherent and not confused. slept deeply from 4pm and could not wake to eat or drink. No fever, bp normal, blood oxygen ok. Blood sugar at 11pm was 230. Gave her 15u lantus at 11pm (normally 25u). Was sleeping at 2:30am but had died at next check at 3:30am.
2/13/2021		1031176		75	M	2/2/2021	2/12/2021	Death Narrative: Patient received Covid vaccine on 2/2/21, person reports his legs were more rigid with some sweating the day of the vaccination with leg rigidity that was slowly improving. No other adverse effects reported for following 7 days. Person states he had vomiting episode earlier this week, person states he had no other symptoms before or after the vomiting episodes. On morning of 2/12/21, person reports patient got up ready for breakfast with no issues. She says he asked for chorizo and oatmeal but she laughed and said don't you mean chorizo and eggs. He said yes. They got him into W/C and he was rolling himself into dining room got stuck in hallway. She says he took several breaths then 3 very deep breaths and passed away. She called 911 they took his VS but he has passed. She told them to leave him along no resuscitation.
2/13/2021		1032193	IL	83	F	1/30/2021	1/31/2021	Patient received his first dose of Covid vaccine on Jan. 30, 2021. On Jan 31, 2021 at 6:08 AM, patient noted unresponsive per facility. Code blue was called and 911 dispatched. He expired in the ER.
2/13/2021		1028166	TN	95	F	2/9/2021	2/10/2021	Patient was found unresponsive on her kitchen floor about 9:45 AM on February 10, 2021 approximately 18 hours after receiving her first Covid-19 vaccination. Exact time of the event is unknown. She was known to get up between 6:30 and 7:30 AM. It appeared that she had not eaten breakfast nor taken any medication that morning. She was taken by ambulance to Medical Center where a CT scan showed an unrecoverable massive brain hemorrhage. She died at approximately 3:50 PM after the respirator was removed. She was sent to the local Medical Examiner afterwards.

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2/13/2021	1031189		58	F	1/5/2021	1/6/2021	COVID 19 symptoms and a positive test was confirmed on 1/6, employee noted previous exposure to positive family members Narrative: Employee noted exposure to COVID prior to presenting for 1st dose of vaccine on 1/5/21. On 1/6/21 employee reported the onset of symptoms and was tested and was confirmed COVID positive that day. Positive result was reported to employee health on 1/8/21. Employee Health continued to track employees progress and was informed of the need for hospitalization on 1/14/21. Course of hospitalization noted the need for intubation and significant issue with comorbid condition (rheumatoid arthritis). Employee died on 2/9/2021. Unable to confirm a direct connection to Vaccine vs. COVID infection, but felt it should be reported.
2/12/2021	1025398	IL	77	F	2/5/2021	2/7/2021	Patient received vaccine on 2/5. We were told on 2/9 that the patient visited another emergency department on 2/6 but no information was given as to what prompted that visit. She was sent home. Daughter found her on 2/6 or 2/ 7 unresponsive and she died.
2/12/2021	1026362	PA	32	M	1/1/2021	2/4/2021	Patient stated he had a migraine after the vaccine. We were advised of a change in appetite on Thursday February 4th. Patient died on February 6th.
2/12/2021	1026270	WI	90	F	2/11/2021	2/11/2021	At 10:33 am Patient pushed her pendant for staff, staff arrived to her apartment and Patient was found unresponsive in her bathroom. Patient received her second COVID-19 Pfizer vaccine about 75 minuets prior to this, she had no adverse reaction's within the first hour of receiving the second dose. CPR was started until paramedics arrived, they took over and tried to resuscitate. Patient was pronounced dead at 11:33 am at scene.
2/12/2021	1026233	ND	89	M	1/18/2021	2/2/2021	patient developed autoimmune thrombocytopenia
2/12/2021	1026141		82	M	1/16/2021	2/12/2021	death 2/12/21
2/12/2021	1026095		90	M	1/16/2021	2/12/2021	DEATH 2/12/21
2/12/2021	1026045	NE	75	F	2/1/2021	2/7/2021	On 2/7/21 resident complained of not feeling well, nausea, vomiting and weakness sent to ER passed away.

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2/12/2021	1026021	MD		M			a male patient received the pneumonia shot 12 days after the first dose of the vaccine; he had died; This is a spontaneous report from a contactable consumer or other non hcp. A 76 years old male patient received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID 19 immunisation and received pneumococcal 13-val conj vac (dipht crm197 protein) (PNEUMOCOCCAL 13-VAL CONJ VAC (DIPHT CRM197 PROTEIN)), via an unspecified route of administration on an unspecified date 12 days after bnt162b2 at single dose for immunisation. The patient medical history and concomitant medications were not reported. The patient died on an unspecified date. It was not reported if an autopsy was performed. Pfizer is Marketing Authorization Holder of pneumococcal 13-val conj vac (dipht crm197 protein) in the reporter's country. This may be a duplicate report in situations where another Marketing Authorization Holder of pneumococcal 13-val conj vac (dipht crm197 protein) has submitted the same report to the regulatory authorities. Information on lot and batch number has been requested. Follow-up: (08Feb2021): Lot/batch number is not available despite the follow-up attempts made. Follow-up attempts are completed. No further information is expected.; Reported Cause(s) of Death: a male patient received the pneumonia shot 12 days after the first dose of the vaccine; he had died
2/12/2021	1025641	NE	85	M	1/11/2021	1/18/2021	Complained of dizziness on January 18,th seen by MD this date. Passed away on 22nd.
2/12/2021	1025579	LA	76	F	2/11/2021	2/11/2021	Patient received the vaccine at an outside healthcare facility on 2/11/21. At approximately 1 pm she screamed out and fell out of her chair. EMS was called and patient was found to be in Vfib. ACLS was performed for approximately 42 minutes prior to arrival at ED. At that time the patient had been pulseless for 25 minutes. Patient received 450 mg of amiodarone, epinephrine x7, sodium bicarbonate x2, and 7 AED shocks. In the ED 3 more doses of epinephrine were given, one more dose of sodium bicarbonate, and 5 additional shocks. ROSC was not achieved and time of death was called at 1416.

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2/12/2021	1025079	NE	90	M	2/9/2021	2/10/2021	Patient found by family in his home deceased on the morning of 02/10/2021.
2/12/2021	1027141	OR	79	M	1/29/2021	1/29/2021	The patient reported feeling well. I discussed with him the Covid-19 vaccine and he was able to state that he wanted it and to sign his consent form. The facility reported they had discussed this with him and he had agreed prior to my visit.
2/12/2021	1025330	AZ	87	M	1/25/2021	1/26/2021	On 1/26 at breakfast table began vomiting. Continued thru am when at noon a caregiver did his O2 saturation and found it was 75%. This was confirmed, and resent sent to ER .
2/12/2021	1025299	FL	86	F	2/7/2021	2/10/2021	Systemic: Other- Patient died - cause unknown; 1 day
2/12/2021	1025081	VA	61	M	2/4/2021	2/6/2021	No reported adverse reactions from 1st or 2nd vaccine doses Patient died on 2/6/2021 at Correctional facility- autopsy was performed at medical examiner's office. The COD was arteriosclerotic cardiovascular disease
2/12/2021	1026379	OH	58	M	2/9/2021	2/9/2021	patient 6 hours post vaccination
2/12/2021	1025493	AR	65	F	2/9/2021	2/11/2021	Patient expired on the morning of 2/11/2021. No known adverse events prior to death. Patient was observed for 20 to 25 minutes after administration of vaccine and reported experiencing no signs or symptoms of adverse events at that time.
2/12/2021	1026980	OH	80	M	1/22/2021	1/23/2021	Patient reported to Emergency room on 01/23/2021 with complaint of nausea. According to ER record patient reported he received a COVID 19 vaccine Pfizer the day before. Work up in the ER (CT ABD PELVIS) reveal a clotted of SMA. CT CHEST REVEALED BILATERAL PULMONARY EMBOLUS. THE PATIENT WAS TRANSFERRED TO THE STATE HOSPITAL. HE WAS SCHEDULED FOR EMERGENT VASCULAR SURGERY WHICH WAS CANCELLED AS THE PATIENT DIED SHORTLY AFTER HIS ARRIVAL.

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2/12/2021	1027051	CA	78	F	2/12/2021	2/12/2021	Few minutes post vaccination, after moving to observation area via wheelchair, the patient complained of dizziness. She took glucose tabs she had brought with her. Staff wheeled her to Triage # 1. Her eyes rolled back in her head and she lost consciousness. Staff (paramedics on site) transferred her to gurney and started compressions. AED placed, V- Fib was rhythm, Shock # 1 given, CPR resumed. Shocked again. Fire truck and additional EMT arrived on site and took over care. Epinephrine was given 3 times via intra-osseous route, Amiodarone given intra-osseous route. Additional defibrillation with on site AED for a total of 6-7 times. Patient had good chest rise with ambu-bag, no airway obstruction or peri-oral edema noted. Code called at 12:40 PM.
2/12/2021	1026396	MO	90	F	1/14/2021	1/15/2021	Patient experienced loss of taste and lack of appetite. Passed away on 1/23/21.
2/12/2021	1027300	KS	90	M	2/6/2021	2/11/2021	Nausea, vomiting and generalized weakness.
2/12/2021	1027258	CA	91	F	1/22/2021	1/22/2021	Resident was given the Pfizer vaccine on January 22, 2021, nausea and shortness of breath was taken to the Hospital on the 23rd of January and passed on the 24, 2021
2/12/2021	1027071	WA	101	M	1/28/2021	1/29/2021	Adverse reaction to the vaccine started with variable weakness beginning 1/29/2021. On 1/30/21 around 8:30pm, he needed assistance in the bathroom related to weakness and had what was later identified as a stroke with left side weakness and slurred speech. In accordance with his wishes, he had care at home. Due to his advanced age and frailty, a CT scan was not pursued. The 325 mg of aspirin that he was previously taking daily was discontinued. After the stroke, he needed total care. Hospice was established at home. Nursing assistant care was delivered by daughter. Death followed 9 days later (2/9/2021).
2/12/2021	1026841	WY	80	M	2/11/2021	2/12/2021	Resident passed away this morning. No signs or symptoms prior to his death of an issue with the vaccine. He was an end stage dementia resident at the nursing home.
2/12/2021	1026752	OH	77	F	2/3/2021	2/6/2021	Developed vomiting, seizure and cardiac arrest, V Fib

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2/12/2021	1026492	MA	82	F	2/11/2021	2/11/2021	The individual received the vaccine around 12:00pm on 02/11/21. Around 9pm the individual went to lay down on the couch at home and started to have difficulty breathing. Within 30 minutes the individual became weak and unresponsive. She was transported to the hospital where she was pronounced deceased at 11:44 pm on 02/11/21.
2/12/2021	1026443	MS	76	F	2/9/2021	2/9/2021	Received first 1/15/2021 with no adverse reaction. Received 2nd dose 2/9 @ 0846 with no adverse reaction or report of feeling ill. Traveled to store and arrived approx. 2 hours after receiving vaccine. Daughter stated patient felt well and had to go to the restroom to have BM. Collapsed in bathroom. Transported by ambulance to Hospital @ 1439 in cardiac arrest. Was in PEA and went in v fib back to PEA. Resuscitation efforts initiated and patient expired with time noted at hospital records at 15:11.
2/12/2021	1027158	CA	95	F	2/10/2021	2/12/2021	death. Per son pt was not feeling well after the vaccination "like her legs were weak." Son found the mom in her bed 1am on 2/12/2021 unresponsive.
2/12/2021	1026451	IN	90	F	2/1/2021	2/2/2021	Resident expired 2/2/2021 one day after the vaccine
2/12/2021	1026699	OH	95	M	1/20/2021	1/23/2021	Had a stroke 3 days after round one of Covid vaccine and subsequently died the next week due to complications of stroke. Upon admission to hospital, was in afib.

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2/12/2021		1026499	WI	75	F	2/5/2021	2/5/2021	Resident reviewed for incident. Resident received the second dose of the Moderna Covid-19 vaccine lot# 016M20A Exp 5/2/2021 on 2/5/2021 from clinic through pharmacy. Resident had her temp/O2 taken on AM shift and was 98.6/93%, beginning PM shift 98.4/95%. A few hours later noted that resident to have chills and was shaking RN assessment completed and vitals taken resident noted to have temp of 102.2, oxygen 95%, pulse 110. Resident alert and oriented at that time and talking to staff. Reported findings to APNP with order to send to ER. 911 called, residents brother updated. Upon EMT arrival RN went down to residents room with EMT and resident had an emesis as resident was getting cleaned up resident went unresponsive. Pulse noted to still be present at that time, resident did briefly respond to sternal rub and then went unresponsive again. Resident full code and EMT transferred to gurney and said that if they lost a pulse in route that they would transfer to hospital B instead of hospital A being the closest facility. RN called brother and gave update. Facility notified from Hospital that resident had passed away.
2/12/2021		1026534	MO	97	M	2/3/2021	2/5/2021	resident had a stroke, sent to the hospital and died 4 days later
2/12/2021		1026581	WA	71	M	1/15/2021	2/4/2021	He had sudden death on Feb 4th. Unclear if this could be related to vaccination but since it was close in timing report has been filed. No known immediate reaction to vaccination.
2/12/2021		1026671	TN	95	F	1/6/2021	1/7/2021	The vaccine was administered at the patient's residence in an assisted living facility. The morning following the vaccination staff report that she was very agitated and stated she did not feel well. They called an ambulance and she was transported to a local ER, staff report that it was not at the hospital that the patient is usually seen by when when she has issues and they were concerned that the facility did not have her medical history to treat her properly. The patient's grandson reported back to the assisted living director that the patient was diagnosed with asymptomatic pneumonia, was transferred to the ICU and passed away in the night.

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2/11/2021	1022685	IN	86	M	2/9/2021	2/9/2021	Received Pfizer Covid Vaccine in the AM on 2/9/21. Arrived to emergency department later the same day complaining of nausea, weakness, fatigue, Vomiting, Diarrhea. Post operative diagnosis, Ischemic colon/toxic megacolon.
2/11/2021	1023948	NC	63	F	2/6/2021	2/8/2021	02/08/21--2 days after vaccine--Resident stated that she "didn't feel good" (She is developmentally delayed and less able to communicate how she feels than those in the community) and stopped eating most foods; also had fatigue. Vitals, coloring, & behavior were normal. 02/09/21--Belly was firm and mildly distended (although she stated it didn't hurt); she coded this evening and CPR was performed before EMT could transport her to the hospital. 02/10/21--Resident passed.
2/11/2021	1023803	IL	92	F	1/4/2021	1/6/2021	Was contacted by the person's daughter on 2/5/21. Patient started vomiting 2 days after vaccination. She aspirated and passed away 1/16/21. Patient had history of stroke and swallowing problems.
2/11/2021	1023791	CA	71	M	1/27/2021	2/1/2021	DIED WITHIN 5 DAYS OF RECEIEIVING THE 2ND DOSE, EXPERIENCED GENERALIZED WEAKNESS.
2/11/2021	1023673	KY	78	M	1/14/2021	1/22/2021	Patient was vaccinated on 1/14/2021. On 1/22/2021, patient tested positive for COVID-19 and admitted to the hospital for acute hypoxemic respiratory failure, COVID-19 pneumonia, and severe ARDS. Patient was intubated on 1/23/2021 and later died on 2/10/2021 after being extubated and placed on comfort measures.
2/11/2021	1023061	CA	74	M	1/30/2021	2/8/2021	Pt received the vaccine on 1/30/21 Pt reported symptoms of left armpit pain to wife on 2/7/21, went to work 4 am 2/8/21 and found face down, dead at work later that morning. Pt worked at a pet store, per wife he did complete his tasks and generally comes home by 7:30 am. Wife called when pt did not come back home and he was found dead.

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2/11/2021	1022918	MO	96	F	2/5/2021	2/5/2021	Resident complained of feeling "hot" at supper time. Had emesis an hour or so later. Became hypoxic and was transferred to the hospital emergency room. Her evaluation in the ED revealed continued presence of UTI, leukocytosis (19.8), and renal insufficiency (BUN 22 Cr. 1.3) BP 99/63; P 74; Temp 98.1; RR 16; and O2 sat of 95% with 2 LPNC (she is typically on RA). CXR reported changes most consistent with CHF with cardiomegaly and bilateral pulmonary vascular prominence. Bibasilar pleural effusions greater on the right than left with pulmonary edema. Large hiatal hernia and likely old chronic wedge deformities involving the mid thoracic vertebral body. She was admitted for IV antibiotics. She expired 2/6/2021
2/11/2021	1023840	IL	62	M	2/4/2021	2/8/2021	Pt was administered Moderna Covid-19 Vaccine on 2/4/2021. Pt exhibited no symptoms of an adverse reaction of any sort. Pt was ambulating alert and attentive. Pt was observed for the allotted 15 mins by pharmacist and case worker who had escorted pt to vaccination clinic. It was reported that Either on sunday 2/7/2021 or monday 2/8/2021 pt had passed away. Circumstances revolving patient death is still unknown.
2/11/2021	1022552	GA	83	M	1/14/2021	1/21/2021	Patient died of cardiac arrest on 01/21/2021
2/11/2021	1022529	WI	70	M	1/27/2021	2/9/2021	Pt suffered Cardiac Arrest and respiratory arrest on 2/9/21 and passed away at a local hospital. He had multiple health conditions likely contributing to this. he arrested at home and CPR was attempted and unsuccessful. Pt received his Covid vaccine #1 on 1/27/21. No issues were noted after vaccine and was due for his 2nd dose next week. However, we were notified he passed away on 2/9/21. Very likely death not at all related to vaccine but wanted to document as patient was in the middle of the covid vaccine series.

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2/11/2021	1022440	FL	69	M	1/23/2021	2/1/2021	The decedent experienced severe chest pain and dyspnea approximately nine days following the first series of the vaccine. He reported to family members that he was having a "severe reaction" to the vaccine and believed it was acute pericarditis due to the same symptoms he experienced prior. He reported that on 2/1/21 around 0300 hours, the symptoms were the most severe and he was going to seek medical attention, but did not. He waited till the convenient store opened and purchased OTC Tylenol for relief of symptoms. He continued to have dyspnea and chest pain up until 2/9/21, when he called 911 complaining of chest pain and was found to have a STEMI; subsequently died at Hospital in the ER.
2/11/2021	1022397	KY	98	F	1/16/2021	2/9/2021	Death 2/9/21
2/11/2021	1022160	MI	74	M	2/5/2021	2/6/2021	24 hours after shot had high fever 101, chills, weakness, became listless, family called 911, client became unresponsive and died in the Emergency room.

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2/11/2021		1022127	AK	71	M	1/12/2021	1/19/2021	<p>One week to the day after patient's first vaccine he died of a heart attack; This is a spontaneous report from a contactable consumer and from a contactable physician. A 71-year-old male patient (husband) received first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 12Jan2021 at single dose on the right arm for COVID-19 immunization. The patient medical history included past heart conditions. No known allergies. Patient took other medications in two weeks. Facility type vaccine was doctor's office/urgent care. No other vaccine received in four weeks. One week to the day after patient's first vaccine he died of a heart attack on 19Jan2021 18:30. Cause of death was heart attack. No COVID prior vaccination. No COVID tested post vaccination. It was unknown if an autopsy was performed. The physician reported that the patient arrived DOA. Physician signed the death certificate based on the patient's prior diagnosis. Physician would not provide additional cause of death medical background without consent. He was not aware of any adverse events experienced from the time of vaccination to the date of death. Follow-up (05Feb2021): This is a follow up spontaneous report from a contactable physician. This physician reported in response to HCP telephonic follow up activity which the following: patient death and cause of death were confirmed. Follow-up attempts are completed. No further information is expected. Information about Lot number is not available.; Sender's Comments: Based on the temporal relationship, the association between the event fatal heart attack 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: One week to the day after patient's first vaccine he died of a heart attack</p>

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2/11/2021	1021926			F	1/5/2021	1/8/2021	<p>Passed away; Positive result; A spontaneous report was received from a consumer concerning a female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and developed COVID-19 and passed away. The patient's medical history was not provided. Concomitant product use was not reported. On 05 Jan 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On 08 Jan 2021, the patient had a positive COVID-19 test. On 18 Jan 2021, the patient passed away. No treatment information was provided. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 18 Jan 2021. The cause of death was not reported.;</p> <p>Reporter's Comments: This spontaneous report concerns a female patient who experienced COVID-19 and passed away. The event of COVID-19 occurred 4 days after the first and only dose of the mRNA-1273 vaccine administered and death occurred 14 days after administration of the mRNA-1273 vaccine. Based on the information provided and the known etiology of COVID-19, it is unlikely to be associated with mRNA-1273 vaccine administration. With no definite information on the clinical details of the death, it is difficult to adequately assess a causal association with mRNA vaccine. Main field defaults to 'possibly related'; Reported Cause(s) of Death: unknown cause of death</p>

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2/11/2021	1024817	GU	68	M	2/11/2021	2/12/2021	Patient was coded and expired Code Blue: Patient was in dialysis, after 30 minutes his sbp dropped to 60s he was given 4 albumin. Patient who was responsive before that became unresponsive, had seizure like activity, lost pulse and spontaneous breathing. HD stopped. Code called. Cpr started. A few minutes into cpr patient started to profusely bleed - gi bleed and ventilation became very hard., intubation was very difficult and ventilation hard as we suctioned large amounts of aspirated blood. Patient was eventually intubated. More than 8 doses of epi ws given, sodium bicarbonate * 2 given with continuous cpr. It was mostly PEA with one shockable rhythm. And shock delivered for vfib. patient continued to profusely bleed, og insertion was not successful and effective ventilation was very tough due to massive aspiration,. Possible variceal rupture with cpr from his cirrhosis is likely scenario. After 30 minutes of unsuccessful ventilation and acls protocol. Code was stopped.

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2/11/2021	1021919	FL	87	F	1/6/2021	1/17/2021	Death; kidney failure (unable to urinate); shortness of breath; required oxygen; A spontaneous report was received from consumer concerning an 87-year-old, female patient, who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced shortness of breath, kidney failure and death. The patient's medical history included advanced kidney and heart disease. No relevant concomitant medications were reported. On 06 Jan 2021, the patient received their first of two planned doses of mRNA-1273 (Lot: unknown) intramuscularly for prophylaxis of COVID-19 infection. On 17 Jan 2021, the husband reported that the patient experienced adverse events. Symptoms included shortness of breath and kidney failure (unable to urinate). The patient was admitted to the hospital and discharged to hospice. Oxygen was administered for shortness of breath. Action taken with mRNA-1273 in response to the events was not applicable. On 20 Jan 2021, the patient died. The cause of death was unknown. Autopsy details were unknown.; Reporter's Comments: This case concerns a 87-year-old, female patient with the medical history of advanced kidney and heart disease, who experienced fatal unexpected event of dyspnea, renal failure and death. The events of dyspnea and renal failure occurred 12 days and the event of death occurred 15 days after the first dose of mRNA-1273 (Lot: unknown). The patient was admitted to the hospital and discharged to hospice. Oxygen was administered for shortness of breath. The cause of death was unknown. Autopsy details were unknown. Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. However, the history of advanced kidney and heart disease may remain as confounder. Additional information has been requested.; Reported Cause(s) of Death: Unknown cause of death
2/11/2021	1023979	TX	76	M	2/1/2021	2/10/2021	Moderna administered 02/01/21. Patient expired 02/10/2020 unexpectedly

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2/11/2021	1024853	MA	78	F	1/30/2021	2/8/2021	Feb 8 states she had a cold. Feb 9 added stomach ache and nausea. Feb 9 visited urgent care facility for exam and Covid-19 test. Rapid test results were negative. Appeared tired but fine. Told to go home and rest. Feb 10 at 9:00 am found dead on the floor in pool of blood and aspirated. Excessive blood in toilet, pooled on floor and hallway rug.
2/11/2021	1024795	MO	86	F	1/13/2021	1/25/2021	Pt had passed away before second dose given.
2/11/2021	1025472	CA	65	M	2/10/2021	2/10/2021	Patient received COVID19 vaccine at clinic at 11:52 am, discharge post treatment stable. Got home around 2:30 pm went to bed. He usually got tired post dialysis. He did not wake up at 6 pm. His wife went check on him. found patient cold and unresponsive. 911 pulseless PEA. ER Medical hospital. Pronounced death at 7:40 pm
2/11/2021	1024788	MO	90	F	1/13/2021	1/25/2021	Pt had passed away before second dose given.
2/11/2021	1024743	CA	74	F	2/1/2021	2/8/2021	pt became lethargic, stopped eating. No fever; no nausea
2/11/2021	1024627	LA	77	M	2/2/2021	2/5/2021	covid shot 2/2; feel bad 2/5; covid positive diagnosis - 2/8 s/s cough, fever, shortness of breath , hypertension, afib (in er) - admitted went into DIC per intensivist 2/11 patient died
2/11/2021	1024626	CA	81	M	2/1/2021	2/6/2021	DEATH ON 5TH DAY OF 2ND DOSE.

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2/11/2021	1024067	VA	54	M	1/15/2021	1/31/2021	1/15: Pfizer vaccine dose 1 administered 1/16: Fever, chills 1/22: Sore throat, coughing w/white phlegm, taking Tylenol and Mucinex. Fever and chills from 1/16 subsided. Had telehealth consultation with PA. Per her notes, patient said he gets these symptoms annually, requested for an antibiotic. PA referred him for a COVID test. Ordered hydrocodone/chlorphen ER suspension for his cough and an antibiotic. Antibiotic was recommended if symptoms do not subside. 1/23: COVID test administered 1/25: Reported positive for COVID 1/26: Telehealth session w/PA: she informed patient of his positive test, advised to quarantine and seek medical help at hospital if symptoms worsen. Patient reported that his sore throat mostly subsided but is still coughing at night. Said that the pharmacy didn't receive the prescription order for the antibiotic, so this was re-ordered. 1/31: Partner found him dead at 8:18AM on his bed. Death certificate issued by state says cause of death: COVID. Autopsy was not performed. Buried on 2/9/21.
2/11/2021	1024539	AZ	75	F	1/15/2021	1/28/2021	patient tested positive for covid on 1/29/21. was hospitalized on 2/8/21 for shortness of breath, generalized weakness, nausea.

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2/11/2021		1024420	CA	65	F	1/21/2021	1/24/2021	Patient had the first Moderna Covid vaccine on Thursday 1/21/2021. She had a bit of sore arm on that day and the day after. On Saturday 1/23/2021, she had a fever of 100.5 F (11AM), nausea, light headache and chills. The temperature went down after she took ibuprofen. Patient's husband enrolled her to V-Safe to report all the adverse effects she experienced. On Sunday 1/24/2021, her temperature was 98.3F. She still had nausea and no appetite. She and her husband watched a football game in their bedroom upstairs. Husband noticed that his wife was pacing around the room many times. At 7Pm, Husband went downstairs for dinner but she refused to come down to eat. He went upstairs around 8pm, TV was still on. He turned off TV and went down stairs again thinking his wife felt as sleep while watching TV. He went back upstairs for bed around 10:30 PM. Husband said his wife had a deviated septum so she would snore very loudly when asleep. He didn't hear her snoring so he went to check on her and found her not responsive. Husband called emergency services. Paramedic came at 10:45 and said patient was passed. Husband sent many texts to V-safe after that to report the incident. No response was received from V-safe. Patient's doctor told her husband that she died due to cardiac arrest.
2/11/2021		1024343	HI	75	F	2/5/2021	2/9/2021	PATIENT ARRIVED TO ED ON 2/9 IN FULL CARDIAC ARREST
2/11/2021		1024325	AR	90	F	2/3/2021	2/5/2021	Patient passed away on February 5, 2021. There was no reaction after the shot was given, the patient's son said the death was not related to the vaccine. The patient had a bad case of shingles about a month prior to receiving the vaccine which the son said had been hard on the patient, the patient was also 90 years old. Per the son, the patient's doctor had wanted the patient to get the vaccine. Due to the close proximity of the date the vaccine was given and the date Patient passed away we wanted to complete the VAERS form.
2/11/2021		1024226	TX	63	M	1/6/2021	1/14/2021	New onset dizziness with hypotension, tachycardia, and vomiting blood. Sent to ER - told he went into cardiac arrest and died.

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2/11/2021		1024157	TX	88	F	1/11/2021	1/20/2021	7 days after receiving the vaccine, patient suffered excessive diarrhea and slight coughing. 9 days after vaccine, patient was tested for Covid 19, and received positive results. Patient was transported to hospital via ambulance but hospital returned her to the nursing home since chest was clear, no respiratory issues, and no fever. 10 days after receiving the vaccine, patient was turned over to hospice care but still in the nursing home. Hospice was called in to provide better physician advice and access 24/7. 14 days after receiving vaccine, patient began experiencing excruciating body aches, coughing, low oxygen levels, and no appetite. 18 days after vaccine, patient died.
2/11/2021		1024790	MO	91	F	1/13/2021	1/25/2021	Pt had passed away before second dose given.
2/11/2021		1024592	CA	80	F	2/2/2021	2/11/2021	No adverse reactions noted. Resident is on hospice for end of life care for terminal diagnosis cerebral atherosclerosis. Experiencing respiratory distress 2/10/2021 r/t to hospice prognosis.
2/10/2021		1019979	MI	72	M	1/28/2021	1/29/2021	Patient received the Moderna COVID vaccine 1/28/21. He was tested for COVID 19 on 1/29/31. Results were received 1/30/21, at which time he was evaluated and found to be hypoxic with tachycardia. He was sent to the local ER and returned this same day. On 2/2/21, he was evaluated by the provider, who sent him to the emergency room with acute respiratory distress and poor O2 sats
2/10/2021		1020002	OH	74	M	1/19/2021	2/5/2021	Given First Moderna covid vacc 1/19/2021. Doing well on multiple contacts from health care providers, then 2/5/2021 was driving, pulled over to the side of the road into a yard, got out of the car and told an observer that he could not breathe, collapsed face down in the snow, EMS called, unable to revive him.
2/10/2021		1020018	NY	74	M	2/8/2021	2/9/2021	Patient reported to be unresponsive on the morning after receiving his second dose of Moderna COVID-19 vaccine. Patient had expired during the night.
2/10/2021		1019964	LA	80	M	2/7/2021	2/7/2021	The resident received his COVID-19 Moderna vaccination on 2/6/2021 2:11 pm and expired on 2/7/2021 at 6:04 am. There were no signs or symptoms of vaccination reaction leading up to death.

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2/10/2021		1020119	MI	70	F	1/18/2021	2/3/2021	My mother died suddenly on February 3rd. She went into shock/cardiac arrest and appeared to have internal bleeding. No autopsy has been performed. Unsure if it was related to the COVID vaccine.
2/10/2021		1019573	SD	81	F	1/18/2021	1/19/2021	Systemic: Blood Disorder (diagnosed by MD)-Severe, Systemic: Cardiac Disorder (diagnosed by MD)-Severe, Systemic: Other- Acute Kidney Injury, Hypoxia; lasted 10 days
2/10/2021		1020079	OH	71	M	1/14/2021	1/31/2021	Received Moderna covid vaccination 1/14/2021. 1/16/2021 received report of cough and difficulty breathing. Proceeded to hospital and was diagnosed Covid+ on testing. Continued to decline, died 1/31/2021.
2/10/2021		1019911	WI	77	M	1/25/2021	2/9/2021	Client was administered the vaccine while symptomatic (01/25/21) although client did not know he was symptomatic for COVID-19. He had been exposed to a family member who had tested positive and should have been in quarantine but wasn't either because it was not felt he was considered a close contact by his family opinion or his family member never notified public health of this close contact...?. Client had presented to the ED following day after vaccination for shortness of breath and fatigue and an antigen test showed he was positive for COVID-19. He was sent home that same day 01/26/21. He was back in ED on 01/28/21 for worsening symptoms and admitted to hospital and later placed on ventilator. He passed away on 02/09/2021 (date of death was per his wife).

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2/10/2021	1019850	IL	76	M	12/30/2020	2/10/2021	<p>HPI Patient is a 77 y.o. male who presents with in full cardiac arrest. Patient is resident of local nursing home. According to nursing home staff, a tech was in his room talking with him as patient was laying in bed. Tech began walking out of patient's room and turned around to tell him one last thing when the tech noticed patient had gone unresponsive. Patient had no spontaneous respirations or pulse, subsequently CPR was started immediately. 911 was called. This occurred around 5:30 a.m.. Upon EMS arrival on scene, they found a male unresponsive with CPR being performed. There was no spontaneous respirations or circulation. Thus, ET tube was placed and ACLS guidelines initiated. Patient was found to be in PEA, and according to EMS, patient was given a total of 6, 1 mg epinephrine IV push and 1, 1 Amp sodium bicarb. Patient was worked on at the scene for approximately 40 min before being transferred to ER.</p> <p>Upon arrival to ER trauma room 1 patient is still in full arrest. ET tube in place with good ventilation. Patient remains in PEA. Chest compressions and ACLS guidelines initiated. In reviewing patient's chart and nursing home notes, patient is a full code. Patient has a significant cardiac history including known coronary artery disease with 4 vessel CABG. Patient also has history of 3rd degree heart block and pacemaker placement. Patient has history of ischemic cardiomyopathy but last echo performed in 2020 shows ejection fraction of 45%.</p>

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2/10/2021		1019670	WA	55	M	1/27/2021	2/2/2021	2/2/2021- seen in Ed with c/o intermittent fever following 2nd dose. Redness to bilateral upper extremities, c/o some pain with urination, weak. V/S stable, afebrile in ED. Assess for infection. No significant abnormal labs (see below), hydrated and discharged. 2/4/2021- arrived in ED with c/o vomiting, seen earlier by PCP that day labs drawn. Shortly after arriving in the ED copious amounts of emesis noted, the patient went into full cardiac arrest and CPR was started. -Please see HPI above, in addition after intubation the patient coded again. More epinephrine and lidocaine were given. CPR was resumed. We did obtain ROSC and targeted temperature management was pursued. He is placed on a lidocaine drip and a right femoral central line was placed by myself. At this time, norepinephrine drip was initiated given his continued hypotension. Post intubation chest x-ray suggests possible abdominal pathology and once the patient was stabilized further, he was sent to the CT scanner where CT head without IV contrast and CT chest, abdomen and pelvis with IV contrast was obtained. He did lose pulses once in the radiology suite. This was brief. IV fluids were initiated and he received over 2 L of crystalloid therapy. He continued to be hypotensive in the emergency department and vasopressin was added. He also had a single dose of Neo-Synephrine and IV push fashion to help bring his blood pressure up. CT scan reveals probable bilateral aspiration pneumonia/pneumonitis and dilated loops of small bowel without a transition point and pneumatosis involving loops in the left upper quadrant. I did try to initiate consult with critical care and possible transfer, however he continued to be unstable and coded requiring CPR multiple times. He was given IV bicarbonate given his prolonged CPR state and pH. Ultimately, the family decided to make the patient comfort measures only given his critical illness. Shortly after making this decision he did pass away in the emergency department. RADIOLOGY DIAGNOSTIC - CHEST PORTABLE 02/04 2051 *** Report Impression - Status: SIGNED Entered: 02/04/2021 2059 IMPRESSION: 1. Findings highly suspicious for portal venous gas which can be seen in the setting of bowel ischemia. Consider CT for further evaluation and/or surgical consultation. 2. Endotracheal tube 3.7 cm above the carina. 3. Low lung volumes with mild patchy perihilar opacities. Final

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						Report Signed by: M.D., Sign Date/Time: 02/04/2021 8:55 PM Impression By: MD CT SCAN - CT HEAD WO 02/04 2140 *** Report Impression - Status: SIGNED Entered: 02/04/2021 2200 IMPRESSION: Negative for acute intracranial process. No evidence of mass effect, acute hemorrhage or definite acute cortical infarct. Final Report Signed by: M.D., Sign Date/Time: 02/04/2021 9:57 PM Impression By: - MD CT SCAN - CT CHEST/ABD/PELVIS W 02/04 2140 *** Report Impression - Status: SIGNED Entered: 02/04/2021 2214 IMPRESSION: 1. Ill-defined patchy opacities within the bilateral upper lobes, right middle lobe, in consolidative opacities within bilateral lower lobes which could represent aspiration, and/or multifocal pneumonia. 2. Small right trace left pleural effusions. 3. Diffusely dilated small bowel without a transition point and mucosal hyperenhancement involving the colon with areas of pneumatosis involving loops of small bowel within the left upper quadrant and portal venous air consistent with hypoperfusion complex. There is a small caliber appearance of the aorta and a flattened appearance of the IVC is well. 4. Intravascular air within the IVC and bilateral iliac veins could be secondary to right femoral central lying injection. 5. Somewhat abnormal enhancement pattern of the kidneys with hypoenhancement of the medullary pyramids which may suggest hypoperfusion injury as well. 6. Probable nondisplaced rib fractures on the right at ribs 2 through
2/10/2021	1019661	84 M	2/6/2021	2/7/2021	Patient admitted to hospital evening of 2/7/21 with acute ischemic stroke and received tenecteplase. Diagnosis Left MCA stroke. Reporting event given was just over 24 hours after first COVID vaccine dose.	
2/10/2021	1019548	84 F	1/27/2021	1/30/2021	Patient received her first covid vaccine on 1/27/21. on 1/30/21 she presented to the emergency department complaining of nausea, she had a negative work up, felt better and was sent home. on 2/5/21 she returned to the emergency department more ill-appearing and complaining of "feeling sick". she had fatigue, chills, decrease in activity level. her work up at this visit revealed multiple metabolic abnormalities, sepsis and bacteremia. She ultimately passed away at this visit with at cause of death listed as acute liver failure, pneumonia, and DIC>	

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2/10/2021	1020195	OH	81	M	1/12/2021	1/15/2021	Received Moderna #1 on 1/12/2021. 1/15/2021 developed worsening shortness of breath. Went to hospital and diagnosed with anemia, 4 negative fecal tests, neg EGD and colonoscopy. Discharged and readmitted (circumstances unknown for this episode) then readmitted a third time 1/20/2021 for shortness of breath. Diagnosed covid + at third hospitalization and continued to get worse. He died 1/23/2021.
2/10/2021	1020227	NM	96	M	2/5/2021	2/7/2021	This is the patient who passed away 2d after his second COVID vaccine. Of note, the 2/8 telephone note makes it sound like he was hospitalized at time of death - that is incorrect. His daughter listed as EM contact works in the eye clinic here. He had mild illness, completed 10d isolation but missed his scheduled booster dose on 2/2 due to isolation. He was called on 2/5 when there was a booster visit cancellation and received his booster dose on that day. His daughter reported that he was doing fine and looking well on 2/7 AM, ate breakfast, shortly after stood up and just collapsed.
2/10/2021	1019669	CT	73	F	2/8/2021	2/9/2021	the following morning the patient became unresponsive while taking a shower, became asystolic and died despite about an hour of ACLS and 8 rounds of epi
2/10/2021	1021040	NE	47	M	1/6/2021	1/17/2021	Pfizer-BioNTech COVID-19 Vaccine Hospital Emergency Room Provider reported cause of death as COVID vaccine administered 11 days prior to death. Additional information being reported from LTCF.
2/10/2021	1020183	FL	66	F	2/2/2021	2/7/2021	Death. I actually not sure which Covid Vaccine she took. I just know the date and time she took it at her local school where she worked. Died in her sleep after complaining of a headache. I talked to her around 5pm on sunday through a videochat and she seemed happy and well. But a local friend commented that she had complained of a headache late in the afternoon.

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2/10/2021		1021171	IL	84	M	2/3/2021	2/4/2021	Patient received first dose of Moderna COVID-19 vaccine on 2/3/21. Primary Care physician received call from coroner's office 2/8/21 asking for information contributing to cause of death. Per Primary Care Physician notes, wife states she and patient took turns shoveling snow on 2/4/21. On one trip back into the house she found him unresponsive on the floor and called 911. Paramedics were unable to revive patient and he passed away (2/4/21).
2/10/2021		1021058	MO	72	F	1/13/2021	2/1/2021	Patient had passed since the first dose was given.
2/10/2021		1021045	MO	94	F	1/13/2021	2/1/2021	Patient had passed since the first dose was given.
2/10/2021		1022902		72	M	1/19/2021	1/29/2021	death Narrative: 71 yo male who passed away on 1/29/2021, medical cause of death "cholangiocarcinoma, interval between onset and death 14 months. Since patient passed away within 42 days of the covid19 vaccine administration, we are required to complete a report to VAERS. Vaccine (Pfizer) was administered without complications. The patient denied any prior severe reaction to this vaccine or its components or a severe allergic reaction such as anaphylaxis to any vaccine or to any injectable therapy. Synopsis- 1/23 71 yo male presented to ED with upper GI bleed. PMH: DM, HTN, cholangiocarcinoma of biliary tract requiring recurrent paracentesis, COPD, perigastric and lower esophageal varices (not on beta blockers due to bradycardia). Pt has had 2 episodes of coffee ground emesis. Lactic 2.6, ammonia 52. Rec'd protonix, octreotide, and ceftriaxone in ED. Family has been previously encouraged to speak to palliative care but has never been willing to. GI consulted. 1/24 EGD completed. No signs of active bleed. MDs recommending hospice. CT + for small bowel ileus. 1/26 Requires placement of NG tube to suction. Palliative care consulted. 1/27 Paracentesis completed. 4100mls removed. 1/28 Pt changed to palliative status. 1/29 Pt passed away.
2/10/2021		1021038	MO	95	F	1/13/2021	1/1/2021	Patient had passed since the first dose was given.

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2/10/2021	1020830	MD	92	F	1/21/2021	1/30/2021	This resident of the assisted living facility received his Covid-19 Moderna (1st) vaccination and he has a leaking Aortic Aneurysm which resulted in hospitalization and he entered into Hospice care on 1.30.2021 and passed away on 1.30.2021.
2/10/2021	1020749	MS	68	M	1/13/2021	1/15/2021	Patient had no reaction at the clinic. Patient is a medical doctor whose partner called in this death. States patient had no complaint on 1/13 nor 1/14 while at work. States patient died at home on 1/15 a.m. Physician who stated she was called to the patient's home @ 0157 1/15/2021 and found cyanotic from head to toe. State girlfriend found him sitting in the chair a few minutes before they called her. The Coroner did not order autopsy. Did not sent patient to the hospital. Sent him directly Funeral Home. Death Certificate Number 123-2021-002593 list cause of death as pending. I spoke with the patient's primary doctor who gave me the history of HTN, Diabetes, & High Cholesterol. States he had not seen this patient since April 2020. They were also friends and he was not aware of any medical problems. The Coroner state she thinks patient has a heart attack. Neither the Coroner nor PMD think death was related to COVID Vaccine. Informed both that MSDH would have to complete VAERS. Both voiced understanding.
2/10/2021	1020724	AL	82	M	1/21/2021	2/2/2021	Patient sent to the ED or sudden onset of shortness of breath on 02/02/2021. Per documentation by the MD, the patient had COVID19 "several weeks ago" and the nursing facility felt like he had recovered. A rapid test done in the ED was negative. When the patient worsened and seemed to be following the same path as other COVID patients, a send out PCR test was done, which was positive. The patient worsened and passed away that same day (02/05/2021) I was not made aware that the patient had the vaccine on 01/21/2021 until Monday 02/08/2021.
2/10/2021	1020702	VA	45	F	1/20/2021	2/9/2021	Passed away the morning of 2/9/21.

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2/10/2021		1020684	MI	73	M	1/13/2021	1/16/2021	Patient received vaccine at Public Health Clinic. Patient ended up having a seizure 3 days later and ended up in the hospital. Found to have right lobe pneumonia and low depakote level. Patient noted to have multiple seizures at hospital, issues with stabilizing HR and BP, and passed away on 1/20/21.
2/10/2021		1020654	ME	65	F	2/4/2021	2/5/2021	Patient found unresponsive in room with no pulse or respirations. She was pronounced dead by paramedics at 06:25am on 2/5/2021.
2/10/2021		1020816		76	F	1/19/2021	1/25/2021	Pt with acute resp failure, COVID PNA, that developed symptoms 9 days prior to admit and ultimately received first vaccine 6 days prior to admit, then shortly after progressed with other covid symptoms and was admitted. She decompensated while inpt and was transferred to ICU for rising O2 needs, ultimately had to be intubated. Became hypotensive due to massive hematoma 2' bleeding into abd rectus muscle. Sx and IR consulted and did bedside exploration of hematoma. Initially blood pressure responded but overnight continued with refractory hypotension. Maxed out vasopressin and levophed, hemodynamics deteriorated. Pt passed soon after(2/2).
2/10/2021		1021052	MO	93	M	1/13/2021	2/1/2021	Patient had passed since the first dose was given.

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2/10/2021	1020443	AZ	73	M	1/30/2021	2/3/2021	For the two days prior to presentation the patient had been complaining of chest pain, his breathing seemed to be labored Monday. He and the family thought the pain was due to shingles as he carried this diagnosis from a month ago. Patient had also received the COVID vaccine 2 days prior to presentation and assumed he was feeling unwell due to the vaccine. Family wanted to take him to the hospital yesterday and earlier today but he refused. She left him in his home earlier this afternoon prior to presentation and returned to check on him finding him unresponsive and apneic at which time EMS was activated. #cardiac arrest -- suspect primary cardiac given collateral from family at home, consider hypoxemia which was corrected with advanced airway and 100% FiO2, patient clinically euvoletic and with soft brown stool in diaper not suggestive of GI hemorrhage, attempt to address acidosis with CPR and bicarbonate, not hypoglycemia, on bedside ultrasound FAST neg and no pericardial effusion suggestive of tamponade and +lung sliding bil not spontaneous pneumothorax Assessment/Diagnosis: -cardiac arrest, cause unspecified
2/9/2021	1017011	NY	67	F	1/22/2021	1/26/2021	Resident expired 01/26/21 at 5:25am.
2/9/2021	1016111	NC	75	F	1/24/2021	2/6/2021	her arm was sore but no other adverse reactions until Saturday, February 6th 2021 she had stroke between 4 and 6pm. She died within 6 to 7 hours later.
2/9/2021	1016155	KS	85	F	2/4/2021	2/4/2021	2/7/2021 at 0630, resident found in recliner without pulse or respirations. Resident had not been found to have any adverse reactions to the vaccine between the time of the vaccine on 2/4 until found deceased on 2/7.
2/9/2021	1016222	TX	74	F	1/21/2021	1/25/2021	My mom only had site soreness after her covid vaccine on 1/21 which resolved within a couple days. However, she died in the early morning hours of 1/25, she was fine the day before, no sign of injury. We found her collapsed on the ground and although we tried cpr she was already dead. She had gone to the hospital on 12/28 for shortness of breath, angina and symptomatic anemia, her ekg was unchanged and blood work normal except for anemia. The cardiologist did not think a cardiac cath was needed. Her shortness of breath improved with a blood transfusion and a dose of lasix (no heart failure).

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2/9/2021	1016605			M			<p>Sepsis; A spontaneous report was received from a consumer post , concerning an approximately 55-year-old, male physician who received Moderna's COVID-19 vaccine (mRNA-1273) and developed sepsis, resulting in death. There was no medical history provided. There were no concomitant medications provided. On an unknown date (Thursday), the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. According to the post, two days after vaccine administration, the patient died of sepsis on Saturday. Action taken with mRNA-1273 in response to the event was not applicable. The event, sepsis, was considered fatal. The patient's date of death was not provided. The cause of death was reported as sepsis.; Reporter's Comments: This case concerns a 55-year-old, male subject, who experienced a serious unexpected event of Sepsis. Sepsis occurred after first dose of mRNA-1273 vaccine administration. On an unknown date, two days after vaccine administration, the patient died of sepsis. Treatment for the event was not provided. The patient's medical history was not provided. The patient is a physician. Concomitant product use was not reported. Very limited information regarding this event has been provided at this time and no definite diagnosis or autopsy report have been provided. Based on the current available information and temporal association between the use of the product and the start date of the event of Sepsis, a causal relationship cannot be excluded.; Reported Cause(s) of Death: Sepsis</p>

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2/9/2021		1016709	MN	93	M	2/8/2021	2/8/2021	ON 02/08/2021 AROUND 0600 RESIDENT COMPLAINED OF MOUTH PAIN AND RECEIVED OXYCODONE. DURING THE COURSE OF THE MORNING, RESIDENT EXHIBITED A FEW EPISODES OF LABORED/SALLOW BREATHING AND SOB AT RESTING. OXYGEN SATURATION RATE WAS 93-98% ON ROOM AIR, LUNG SOUNDS CLEAR IN ALL LOBES AND PULSE AND TEMPERATURE WITHIN NORMAL RANGE. AS THE DAY PROGRESSED, VITAL SIGNS REMAINED STABLE BUT RESIDENT CONTINUED TO HAVE PERIODS OF SOB/LABORED BREATHING. FAMILY AND NURSE PRACTITIONER UPDATED AND THE ORDER WAS RECEIVED TO SEND PATIENT TO MEDICAL CENTER ER FOR EVALUATION PER AMBULANCE. RESIDENT TRANSPORTED AT 1425. RESIDENT RETURNED FROM THE ER AT 1830 ON HOSPICE CARE WITH THE DIAGNOSIS OF: ACUTE RESPIRATORY FAILURE WITH HYPOXIA AND END OF LIFE DECISION MAKING. RESIDENT WAS MADE COMFORTABLE AND MONITORED DURING THE NIGHT AND EXPIRED AT 0630 ON 02/09/2021.
2/9/2021		1016907	MD	92	F	1/21/2021	1/30/2021	Resident coughing in dining room, staff suctioned, physician stated to transfer via 911 to hospital, 6:33 PM. Hospital notified Nursing Home staff resident passed away at 8:25 PM. No adverse reaction noted to the Covid vaccine 24 hours after each dose at Nursing Home. There was no airway obstruction, cardiorespiratory arrest, death was natural at hospital.
2/9/2021		1016097	IL	70	M	1/20/2021	2/8/2021	Patient died 02/08/21
2/9/2021		1016770	FL	73	M	2/2/2021	2/6/2021	Patient received 2nd dose of Pfizer vaccine on 2/2/21 and on 2/6/21 he died in his sleep in the a.m. No other signs or symptoms were observed prior to death.
2/9/2021		1016067	MA	84	F	2/4/2021	2/5/2021	Resident was weak, fatigued and had a fever of 101. F the following morning after receiving the 2nd dose of vaccine. Later in the day she was feeling better and vital signs were WNL. The next morning, she was found unresponsive and pronounced dead by paramedics.
2/9/2021		1015996	FL	86	M	1/14/2021	1/1/2021	Family reported patient expired 1/31/2021.

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2/9/2021	1015773	WI	99	F	2/1/2021	2/2/2021	Resident passed away in her sleep. No s/s of adverse events leading up to the residents death. Resident was previously declining- MD stated the vaccine had nothing to do with the death.
2/9/2021	1015687	OH	62	M	2/8/2021	2/8/2021	Almost immediate headache per wife. Developed fever around 4 pm. Headache all day. Took Tylenol at 4 and 10 pm. Gradual development of SOB and cough. Temp of 101.4 at 10 pm. pulse ox 92% at 10 pm. Went to sleep, woke up at 0050 with increasing SOB. Pulse ox 82%. Used albuterol inhaler, wife called emergency services at 0113. EMS arrived around 0130 to patient's home. pulse ox 86%, coughing, sob, hard time breathing. Walked to stretcher. Became unresponsive. Found to have no pulse, stopped breathing. CPR initiated at about 0140. King airway placed in field, I/O in left tibia. Patient from PEA to asystole, to vfib, to asystole. ACLS followed. Unrecoverable asystole and patient time of death 0213.

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2/9/2021	1015671	KY	86	F	1/13/2021	1/18/2021	bowel perforation; pain in her upper abdomen; This is a spontaneous report from a contactable consumer. An 86-year-old female patient received the 2nd dose of bnt162b2 (BNT162B2) at single dose on 13Jan2021 for Covid-19 immunisation, administered at nursing home/senior living facility. Medical history included dementia, arthritis. No known allergies. Patient was not pregnant. Patient had not COVID prior vaccination. Concomitant medication in 2 weeks included: memantine (manufacturer unknown) 10 mg BID, diclofenac (manufacturer unknown) BID, carbidopa, levodopa (manufacturer unknown) 25-100 mg TID, quetiapine (manufacturer unknown) 12.5 mg q HS, escitalopram oxalate (LEXAPRO) 10 mg q HS, paracetamol (TYLENOL) 650 mg BID, glucosamine (manufacturer unknown) drink. The patient received the 1st dose of bnt162b2 (BNT162B2) at single dose on 24Dec2020 for Covid-19 immunisation. No other vaccine received in 4 weeks. The patient experienced bowel perforation and pain in her upper abdomen on 18Jan2021 07:30. The events resulted in Emergency room/department or urgent care, Life threatening illness (immediate risk of death from the event), and death. On 18Jan2021 07:30 AM, less than a week after the second shot, she had pain in her upper abdomen and was taken to the ER on 18Jan2021. CT showed a bowel perforation in the small bowel. She had never had bowel surgery or diverticulitis. She had been healthy other than her dementia and arthritis. Patient received treatment for the events: hospice and pain management. COVID-19 was not tested post vaccination. The cause of death was bowel perforation. An autopsy was not performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: bowel perforation

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2/9/2021	1015670	KY	85	F	12/29/2020	1/2/2021	Xrays showed covid Poss pockets all in her lungs on 15Jan; Xrays showed covid Poss pockets all in her lungs on 15Jan; This is a spontaneous report from a contactable consumer. An 85-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 29Dec2020 at single dose for covid-19 immunisation. Medical history included dementia. Concomitant medications were not reported. Patient popped hot 02Jan2021 along with 4 others on the hall she lived. Within 9 days 50+ patients were positive. All had the vaccine the same day. Patient was test positive on 02Jan2021. She was on day 12 of her quarantine when she started to get worse. She was unresponsive by 16Jan2021 and passed 18Jan2021. We were with her from 14Jan2021 to 18Jan2021. But had not been allowed to visit with her since Mar2020. And what post treatment pairs well with it? Publicly we hear Remdesivir and Bamlanivimab but these patients only received a general antibiotic and some vitamins. Death cause was Xrays showed covid Poss pockets all in her lungs on 15Jan2021. No autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: Based on the information available, a possible contributory role of the suspect products cannot be excluded for the reported event of positive for corona virus infection for the lack of efficacy of the vaccine. However, based on the mechanism of action of the vaccine, it is unlikely the patient would have fully developed immunity for the vaccine to be effective, due to the number of days passed since the vaccine is given. Case will be reevaluated based on follow-up information; Reported Cause(s) of Death: Xrays showed covid Poss pockets all in her lungs on 15Jan
2/9/2021	1015465	KY	75	F	1/21/2021	2/7/2021	DISCOVERED UNRESPONSIVE WITHOUT PULSE, RESPIRATIONS, HEART BEAT ON 2/7/21 AT 0435 A.M. RESIDENT WAS DNR STATUS.
2/9/2021	1017978	MO	79	F	1/6/2021	2/1/2021	Pt was deceased when we came for second dose. COD unknown to pharmacy

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2/9/2021	1017051		77	M	2/3/2021	2/4/2021	pt received vaccine on 2/3. early on 2/4 developed chest pain, dyspnea, and was seen in ED and diagnosed with acute exacerbation of CHF and NSTEMI type 2, and anemia. on 2/5 transfusion was started and pt developed worsening dyspnea and then PEA arrest. Pt achieved ROSC and was transferred to the cardiac intensive care unit where he required vasopressor support. he subsequently declined and died on 2/7
2/9/2021	1015630	CA	56	M			Died of a heart attack; A spontaneous report was received from a consumer concerning a 56-year-old male patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and died due to a heart attack. The patient's medical history was not provided. Products known to have been used by the patient, within two weeks prior to the event, included additional medications. On an unknown date, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. - On an unknown date, the reporter stated the patient received Moderna's COVID-19 vaccine and sometime after he was found dead by his bedside around 02:30 am. The patient died on an unknown date. The cause of death was due to a heart attack. Plans for autopsy were not provided.; Reporter's Comments: This case concerns a 56 year old, male patient, who experienced fatal unexpected event of myocardial infarction. The event occurred on an unspecified date after mRNA-1273 (Lot# Unknown). Treatment details not provided. Very limited information regarding this event 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. Additional information has been requested.; Reported Cause(s) of Death: Unknown cause of death

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2/9/2021	1017675	MA	96	F	1/3/2021	1/10/2021	This 96 year old resident was diagnosed with COVID on 10/28/2020. She has a significant, complicated medical history and did not return to her pre-infection level of health. She began declining in early January and was made care and comfort measures only on 1/2/2021. Most of her medications were d/c'd except for those that provided comfort. No obvious reaction to the vaccine was seen and we do not suspect that her death was vaccine related, however we were directed by Dept of Epidemiology to report her death as it was within one week of receiving the vaccine.
2/9/2021	1018448	HI	90	M	2/1/2021	2/6/2021	2/6/2021 stroke. 2/8/2021 he died
2/9/2021	1017971	MO	100	F	1/6/2021	2/2/2021	Pt was deceased when we came for second dose. COD unknown to pharmacy
2/9/2021	1017128			F			Passed away; This is a spontaneous report from a Pfizer-sponsored program Corporate (Pfizer) Social Media Platforms. This is a spontaneous report from a contactable consumer reporting for friend's mother. A 50-years-old female patient received the second dose of bnt162b2 (BNT162B2) vaccine , via an unspecified route of administration on an unspecified date at single dose for Covid-19 immunisation . The patient medical history and concomitant medications were not reported. The patient received the first dose of BNT162B2 vaccine on an unknown date. The patient passed away on an unspecified date. The patient was a healthy woman, who just got her 2nd dose of the vaccine a couple of days before. The patient died in her sleep. Doctor labeled her death as 'natural causes'. It was not reported if an autopsy was performed. No follow-up attempts are Possible. Information on lot/batch cannot be obtained.; Reported Cause(s) of Death: Passed away
2/9/2021	1018146	PA	90	M	1/28/2021	2/1/2021	Four days later, my father had a severe brain aneurysm.

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2/9/2021	1018126	FL	72	M	2/4/2021	2/8/2021	Patient received vaccination on 2/4. Patient's wife reported that he felt a slight soreness in his arm the day following the shot, but had no other symptoms. On 2/8 he passed away. Wife reports that it was related to his heart and they never made it to a hospital. The wife also reported that the patient had been in poor health prior to the vaccination
2/9/2021	1018278	WI	74	F	1/27/2021	2/9/2021	death- unexplained cause
2/9/2021	1017744	CA	85	F	1/26/2021	1/27/2021	Unknown
2/9/2021	1017974	MO	87	F	1/6/2021	2/1/2021	Pt was deceased when we came for second dose. COD unknown to pharmacy
2/9/2021	1017563	KY	92	M	1/9/2021	1/9/2021	Patient got the injection and quickly developed a fever and felt weak. Family was contacted and he was sent to Hospital.
2/9/2021	1017549	TX	71	F	2/4/2021	2/9/2021	Dr. received an urgent request to call a local Justice of the peace regarding one of her patients who was found dead in her home today. At this time no foul play is suspected. Dr. said the patient was relatively healthy with no major issues other than some hypertension
2/9/2021	1017509	NH	80	F	2/4/2021	2/6/2021	Day after receiving the vaccine, the patient complained of abdominal pain which worsened over the day. She went to the ED and was hospitalized. Abdominal pain complaints increased and continued, she decompensated rapidly, was intubated and subsequently died 3 days later. Imaging results showed, progressive ovarian cancer in the bowels. Blood culture revealed that she had E.Coli in her blood. It is thought that this is NOT related to the vaccine.
2/9/2021	1017393	CA	73	F	1/26/2021	2/1/2021	Patient received the vaccine on 1/26/2021 and per employee at facility patient passed away on 2/01/2021.
2/9/2021	1017381	CA	88	F	2/6/2021	2/8/2021	Resident passed away 2 days after receiving the vaccine. oxygen level has decreased shortly 1 day after receiving the vaccine.

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2/9/2021		1017367	IA	99	F	1/5/2021	1/14/2021	Individual collapsed 9 days post-vaccination with no known reason. Despite being healthy prior to vaccination, individual's condition deteriorated rapidly. Individual passed away on 1-17-2021.
2/9/2021		1017339	FL	88	M	1/30/2021	2/5/2021	Admitted to hospital with SOB upon exertion that started prior to vaccine. Hx COPD, HTN, CKD, hyperlipidemia, bladder cancer in remission. Stated he has been taking Eliquis and Xarelto between renal doctor and cardiologist Dr. Anticipating going home 2/5/21 but then turned blue and stopped breathing under a DNR. COVID test negative. Labs show acute on chronic renal failure with an elevated troponin likely from demand ischemia.
2/9/2021		1017176	MO	76	M	12/30/2020	1/5/2021	Patient had Covid-19 in October of 2020. He recovered. He received the vaccination on 12/30/2020 with no complaints. On 01-05-2021 it was noted to he was incontinent of urine and bilateral lower extremity edema. Lab work was completed showed acute kidney injury. He had decreased blood pressure and oxygen saturations on 01-06-2021 He was admitted to the hospital with rapid progression of symptoms and suggested multi-system failure. He had a long cardiac history. On 01-14-2021 he passed away with a diagnosis of Cardiomyopathic CHF, A.Fib contributory.
2/9/2021		1017129	NV	65	M	12/17/2020	12/28/2020	Sudden cardiac death. Autopsy report: right coronary artery thrombosis.
2/9/2021		1017960	MO	89	F	1/6/2021	2/3/2021	Pt was deceased when we came for second dose. COD unknown to pharmacy.
2/8/2021		1011834		62	M	1/27/2021	2/6/2021	patient passed away within 60 days of receiving COVID vaccine series
2/8/2021		1011677	NH	101	F	1/7/2021	1/11/2021	Lethargic, refusing medications and meals. 1/11/2021- Covid+, poor appetite.
2/8/2021		1011732		80	M	1/30/2021	2/3/2021	patient passed away within 60 days of receiving COVID vaccine series
2/8/2021		1011774	GA	81	M	2/3/2021	2/6/2021	Cardiac arrest resulting in death on the third day post vaccine administration, 0224. Reported syncopal event post toileting. Rescue measures attempted but not successful. Time of death 0358, 02/06/2021.

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2/8/2021	1011894		70	M	12/29/2020	2/4/2021	patient passed away within 60 days of receiving COVID vaccine
2/8/2021	1011905	NH	91	F	1/8/2021	1/20/2021	Ongoing decline overall. Remained on Hospice with increased lethargy documented on 1/20/21 and progressively worsening thereafter.
2/8/2021	1011595	CA	90	M	1/28/2021	2/3/2021	On 2/5/2021 resident noted to be azotemic. Creatinine up to 3.8 and BUN in 80's. He was started on NS hydration. On 2/7/2021 he was noted without VS, per MD notes, possible VF arrest, renal failure; death unclear exact cause.
2/8/2021	1011935	TX	81	M	2/6/2021	2/6/2021	Patient received his second dose of Moderna COVID vaccine on 2/6 at 12:40PM. Patient was observed for 15 minutes post-vaccination with no adverse events. On the evening of 2/6 (time unknown) the patient began to develop dry cough and fatigue. He was checked by a physician at that time (who was a family member). Patient continued to feel unwell into Sunday. His lungs were clear when checked Sunday afternoon (time unknown). At approximately 5:30pm on 2/7 the patient began experiencing sudden onset shortness of breath. A pulse ox was conducted at that time and it was 92%, and again shortly thereafter and it was 90% (as reported by family member). 9-1-1 was contacted at this time. CPR was initiated when he arrived at the emergency department, pulse ox was 60% (as reported by family member). The patient passed away shortly thereafter on 2/8/2021.
2/8/2021	1011929	PA	85	F	1/21/2021	1/27/2021	Within a few days, my mother started reporting profound fatigue and shortness of breath while conducting routine household activities. She no longer had the energy for her daily exercise walks and became increasingly lethargic. She died in her sleep while taking an afternoon nap on Thursday, February 4th. I am highly concerned this could be a vaccine related.

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2/8/2021	1011577	MN	93	M	2/4/2021	2/5/2021	Resident expired on 2/5/21 at 03:35pm, about 25 hours after second dose of vaccine. At breakfast, resident was spitting a lot of secretions, coughing up liquids from nose and phlegm, facial swelling, which were all symptoms that he was struggling with prior to both doses of COVID vaccine, but had increased more than prior incidences on 2/5/21. Gurgling noted in upper airways, hyscolamine given, bath given to loosen secretions, morphine given. Family notified and came into facility for compassionate care visit around 1300. 1400 HR was 3 and RR was 2, but increased back to 60 and 12 within 20 minutes. Then resident expired at 1535.
2/8/2021	1011492	NH	94	F	1/7/2021	1/27/2021	1/18/2021- Tested positive for Covid-19. 1/20 Patient lethargic, unable to swallow. 1/24 Although 90% O2 sat on RA, it has decreased from her baseline ranging at high 90's. 1/27/2021 Patient passed.
2/8/2021	1011487	CO	70	M	2/6/2021	2/6/2021	Received Covid vaccine in am. Last seen by family at 17:30 pm and observed to be well. About an hour later he collapsed, unresponsive. A 911 call was initiated at 18:29. Paramedics arrived to find the patient in cardiac arrest. CPR/ACLS was initiated, but resuscitation was unsuccessful. Pt. was transported to MC where he was pronounced dead at 19:32. There was no sing of an injection site reaction, nor of allergic reaction..
2/8/2021	1011440	NC	78	M	1/26/2021	1/30/2021	unanticipated death
2/8/2021	1011362	FL	72	M	1/28/2021	1/28/2021	Patient's son came to the vaccine clinic today 2/8/2021, stated that his father 2/24/1948 passed away the same day as the vaccine.

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2/8/2021	1010899			M			On the two people who died, one in (State name) and one in (State name); This is a spontaneous report from a contactable other HCP. This other HCP reported similar events for 2 patients. This is 1 of 2 report. An unknown age male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unspecified date at single dose for covid-19 immunization. Medical history and concomitant drug were not reported. It was reported that patient was died. Cause of death unknown. Outcome of the event was fatal. Information on the lot/batch number has been requested.; Sender's Comments: Death with unknown cause is considered related to BNT162B2 for reporting purpose. Information is very limited. Case will be reassessed once receiving additional information, including cause of death. 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.,Linked Report(s) : US-PFIZER INC-2021102049 same reporter/drug/event, different patient; Reported Cause(s) of Death: On the two people who died, one in (State name) and one in (State name)
2/8/2021	1011149	NY	77	M	1/22/2021	2/4/2021	Developed heart arrhythmia and was unable to be revived.

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2/8/2021	1010900			M			<p>patient died; This is a spontaneous report from a contactable Other Healthcare Professional (HCP). This Other HCP reported similar event for 2 patients. This is 2nd of 2 reports. A male patient of an unspecified age received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. It was reported that patient died on an unspecified date. Cause of death unknown. Outcome of the event was fatal. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The causal relationship between BNT162B2 and the event death cannot be excluded as the information available in this report is limited and does not allow a medically meaningful assessment. This case will be reassessed once additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees, and Investigators, as appropriate..Linked Report(s) : US-PFIZER INC-2021102020 same reporter/drug/event, different patient; Reported Cause(s) of Death: patient died</p>

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2/8/2021		1011222	PA	83	F	1/5/2021	1/17/2021	My mom received the Covid 19 vaccine on Jan 5, 2021 and became very about a week later. I was informed that she tested positive for Covid 19 on January 14th. One January 17th she became very tired and weak and would not eat. Hospice called me and told me that she was in a decline state. I saw her on January 25 and 26 and she was just sleeping and could not open her eyes. Her vitals were good and she seemed to understand when I talked to her - she would squeeze my hand and moan but she could not talk or open her eyes. My mom passed away on January 27, 2021 just 22 days after receiving the Covid 19 vaccine. She was very think to begin with and being to weak and tired to eat resulted in her losing even more weight. Some of the other residents were given fluids to help and they recovered. My mom was not given fluids. I believe there were 20 deaths in her care home for the month of January when they vaccinated. This was an alarming number of deaths for the home. The facility had very few Covid deaths in 2019 and 2020. I asked every week if they had any Covid and or Covid deaths and this amount was shocking to me and the workers there.
2/8/2021		1012021	NH	93	F	1/7/2021	1/19/2021	Resident on Hospice. 1/18 Hand Shaky. 1/19- Covid +19. 1/20 Desat 85% on RA, provided 2L O2 supplement= 97% 1/20 congestive cough, 1/28- RR- 28;1/29- Hypoglycemia 1/30-NPO. 1/30-resident passed away.

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2/8/2021	1010989	FL	69	F	1/4/2021	1/4/2021	Brain aneurysm; Anaphylactic reaction; Collapsed; BP sky rocketed; Shortness of breath; A spontaneous report was received from a consumer concerning a 69-year-old female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and experienced blood pressure skyrocketed, shortness of breath, loss of consciousness, massive anaphylactic reaction, and brain aneurysm. The patient's medical history, as provided by the reporter, included high blood pressure and arthritis. Products known to have been used by the patient, within two weeks prior to the event, included an antihypertensive. On 04 Jan 2021, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. Twenty-two minutes later she had a massive anaphylactic reaction. She experienced shortness of breath, blood pressure skyrocketed, and loss of consciousness. She was taken to the emergency room. The patient had a brain aneurysm and never recovered. No treatment information was provided. The patient died on 04 Jan 2021. The cause of death was reported as brain aneurysm. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns a 69-year-old, female patient with a medical history of hypertension, who experienced fatal, serious, unexpected events of Anaphylactic reaction, hypertension, dyspnea, loss of consciousness and brain aneurysm. The events occurred 22 minutes after the first dose of mRNA-1273 was administered. No treatment information was provided. The patient never recovered and died. The cause of death was reported as brain aneurysm. Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. Additional information has been requested.; Reported Cause(s) of Death: Brain aneurysm

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2/8/2021	1013095	HI	88	M	2/3/2021		Patient was technically a resident of retirement community, however, he chose to live independently at home at his current home. Only his spouse actually resides at retirement community. Patient received the second dose of the Moderna vaccine via pharmacy vaccination clinic at retirement community on 2/3/2021. He was found deceased in his home by a certified nursing assistant on 2/4/2021 at approximately 10:00am.
2/8/2021	1012047	MO	57	F	2/1/2021	2/6/2021	Sudden death 2/7/21 @ 0309 Started acute encephalopathy & required intubation Soon after intubation went into cardiac arrest Likely severe acidosis.
2/8/2021	1011130	NH	96	F	1/7/2021	1/17/2021	Temp of 100.1 and unproductive cough on 1/17; temp of 100.4 1/28; O2 desaturation 88% on RA 1/28; Diagnosed with Covid-19 on 1/18/2021 Patient passed away on 1/29/2021
2/8/2021	1014865	IL	68	M	1/23/2021	2/2/2021	He had not been feeling well after his second Covid vaccination (on 01/23/2021) and was found unresponsive in his room at the nursing home (late evening on 02/02/2021). He was taken to a hospital where they did tests and he had pneumonia and kidney failure, but he was being transferred to a larger hospital when he arrested and died (02/03/2021)
2/8/2021	1014774	WA	71	M	1/13/2021	1/15/2021	We were informed the patient passed away 2 days after receiving the vaccine. We do not have any details about what happened, we were informed by one of his employees. We have no knowledge that this had anything to do with the vaccination in any way.
2/8/2021	1014740	CA	83	F	2/4/2021	2/6/2021	Patient found down at home with agonal respirations and per EMS asystole, received 2 rounds of epi at her house with return of spontaneous pulses, lost pulse again in route to ER and another round of epi was given, CPR in progress when arrived at hospital. Prior to this patient's husband states he heard her fall in the bathroom but did not immediately check on her as he states that this has happened before. He checked on her 10 min later and that's when he found her unconscious. Daughter called 911 and she began CPR. No previous complaints of headache, chest pain, back pain, fever or chills. Husband states patient was drinking that evening which is not unusual for her. Patient died at hospital.

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2/8/2021		1014659	FL	91	F	1/14/2021	1/18/2021	Four days after being vaccinated, she developed pneumonia and died 8 days later.
2/8/2021		1014628	MI	90	M	2/3/2021	2/3/2021	Death within 8 hours.
2/8/2021		1014559	AR	87	F	2/4/2021	2/4/2021	Unsure if related to vaccine, but wanted to report event of death due to brain bleed on evening of administration of the vaccination.
2/8/2021		1013145	FL	56	M	2/5/2021	2/8/2021	Patient texted a friend on 2/7/2021 c/o arm pain and feeling tired. I don't know if he was taken to a hospital. Autopsy today.
2/8/2021		1013087	NY	69	M	1/23/2021	1/30/2021	Patient received vaccine on 1/23/2021 and death occurred on 1/30/2021.
2/8/2021		1013041	NY	85	M	1/15/2021	1/31/2021	Vaccine was administered on 1/15/2021 and death occurred on 1/31/2021.
2/8/2021		1013006	FL	69	F	2/2/2021	2/3/2021	Patient complained of soreness in muscles morning after receiving the shot. She went about her day had a smoothie, spoke to people and also went for a walk came home and went into her jacuzzi tub and consequently passed away while in the tub. She was found by her husband at around 545pm, time of death is unknown and cause of death is currently pending.
2/8/2021		1012926	NH	97	M	12/31/2020	1/31/2021	Early in the shift on January 31 resident was noticed to be more tired than usual and was not eating well. Lung sounds were crackly and resident was found to be hypotensive. He was evaluated in emergency department. He was diagnosed with pneumonia. Received a loading dose of antibiotic and returned to facility.
2/8/2021		1012894		85	F	1/22/2021	2/5/2021	1-2 days after vaccine, pt developed weakness, fatigue, body aches, nausea, headache and poor appetite. Pt was admitted to the hospital on 2/5/21 and death occurred on 2/6/21
2/8/2021		1012795	CT	88	M	2/5/2021	2/6/2021	Patient was administered second dose of Pfizer vaccine in Nursing Home on 2/5/2021 around noon and was found unresponsive at 5:03AM the following day 2/6/2021. Patient arrived to Hospital in cardiopulmonary arrest and was pronounced dead.

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2/8/2021	1012717	FL	83	M	2/1/2021	2/2/2021	Patient that received his first dose of Pfizer vaccine on 2/1/2021 passed away on 2/2/2021. No further information is available at this time.
2/8/2021	1012703	NH	85	M	1/7/2021	1/14/2021	1/14/2021-0545, blood noted left and right ear. 0715, vomited x 1. Covid Antigen positive. Acute MD visit-basilar crackles right and coughing. Increased confusion.
2/8/2021	1012612		79	M	1/21/2021	1/1/2021	Patient was hospitalized on 31 Jan for COVID pneumonia after 3 days of increasing baseline supplemental O2 requirements and dyspnea and ultimately died on comfort care on 3 Feb 2021.
2/8/2021	1012604	GA	76	M	1/11/2021	2/5/2021	Death
2/8/2021	1013297	PR	77	M	2/2/2021	2/2/2021	Patient was vaccinated at 11:30am. By 7pm he started presenting symptoms of fatigue, chest pain. Patient urinated and defecated in himself. Was not feeling well. Patient died at 10:30pm.
2/7/2021	1010114	GU	58	M	1/28/2021	2/3/2021	Patient passed away (Dead on Arrival on presentation to ER) on 02/03/2021
2/7/2021	1009866	FL	85	F	1/29/2021	1/30/2021	pt was given vaccine on the afternoon of 01-29-2021. Pt was administered the moderna covid-19 shot into the deltoid muscle of this pt. Pt was observed and left pharmacy. on 2-6, pts daughter calls pharmacy, and says the night of 1-29, after recieveing the vaccine, her mother had a hemmorhagic stroke and passed away
2/7/2021	1009266	NY	85	F	1/24/2021	2/7/2021	Patient with failure to thrive symptoms prior to 2nd dose, not eating, not taking medications.
2/7/2021	1009813		95	M	1/1/2021	1/25/2021	Patient became immobile on 1/25/21 (4 days after receiving Moderna COVID-19 vaccine). He died on 1/27/21
2/7/2021	1010025	GU	92	F	12/30/2020	1/9/2021	Patient Expired

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2/7/2021		1020134		61	M	1/28/2021	1/29/2021	<p>anxious, restless, weak, dizzy, felt "horrible". Continued to C/O symptoms,. At 01:15, patient lost consciousness , then stopped breathing and lost pulse. Narrative: Patient was first vaccinated for COVID 19 on 1/8/21. On 1/24/21: 61 year old presents to E.R. with CC of chest pain/sob, with multiple medical conditions including hypertension, atrial fibrillation on apixaban, cardiomyopathy with poor EF, dyslipidemia, COPD, CVA, lung CA s/p radiotherapy, PTSD, depression, Churg Strauss Syndrome, Sjogren's syndrome presented with chief complaint of chest pain or shortness of breath. He has been having worsening shortness of breath the past few days, also complains of cough productive of yellowish sputum, no hemoptysis. He complains of left upper chest pain with no radiation. There is no diaphoresis, palpitations or lightheadedness. He denies fever or chills. He complains of having fallen a few times recently, thus he passed out. Could not say if there were seizures activity. Admitted to 3D Tele. On 1/27, Pt advises he had episode of substernal CP this am. RN advises pt was in afib w/ RVR at a rate >140 at time of CP. Pt CP improved w/ prn NTG. Pt HR improved after daily medications. Pt sts his CP has resolved. Pt admits to continued dyspnea. Increased trop, transferred. 1/28, struggling with orthopnea and cough. He has no peripheral edema. He does have intermittent chest pain. Patient having periods of A-Fib RVR with non-sustained rates of 140's-150's 1/29 more chest pain at 04:00, relieved with NTG. HR = AF, with RVR 145. At about 08:00, Cardiology sees patient and signs off, "shortness of breath and cough not due to heart failure as evidenced by orthostatic hypotension and no improvement in symptoms with diuresis. Consider underlying lung disease vs acute pulmonary disease." No pulmonary consult noted. 1/29 Patient received 2nd dose COVID19 vaccine at about 3:30-4p. No notes from staff on this event. No notes from MD that this was discussed and still part of the plan. 1/29 nurse's note: At around 2240 Pt was able to rest briefly but is now restless and anxious again. Tachypneic, stating he feels so weak and dizzy and overall just feel horrible. Continuing to get up frequently to have small soft bowel movements with assistance. Pt also stated ever since he got "that shot" he hasn't felt well. When asked what shot pt replied "COVID shot." Pt did receive 2nd dose of COVID vaccine 1/29 at 1530. Around 2250 Spoke w MOD to relay above</p>

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information and overall concern for pt, asked for MOD to come to bedside to evaluate pt. MOD states he's handing off to oncoming MOD and they will come to bedside to see pt. Around 2300 oncoming MOD called and all above and previous information discussed Around 2310 MOD came to bedside to see pt. Will continue to monitor closely. 01/30/2021 ADDENDUM Around 0115 pt called for help to use bedside commode to urinate and have BM. Assisted x2 to BSC. While sitting on BSC pt's eyes rolled back and pt made postures consistent with a seizure, body became very rigid. Pt was unresponsive still with pulse. Lifted patient back to bed with 3 staff assist. Pt stopped breathing and lost pulse. Chest compressions started immediately and Code Blue called at 0120. 1/30 Hospitalist note: Called for CODE BLUE AGAIN AT 4:53. While on Vent after s/p Code blue for reasons not clear patient went into Asystole and code called second time. Patient had a prolonged CPR and was actually called off at 5:17 but he started having pulse and agonal resp. he was placed on Levophed and D5NS. He got a total of 9 amps of epi, 3 amps od Bicarb and 1amp of D50. Trope bumped from 0.12 to 0.43 prior to this he already was on ASA, Apixiban for afib. Cards are on board for his CHF for his pulmonary edema Lasix ordered. Hid lactic acid is elevated. Blood cultures pending. Started Zosyn and is on Levophed. Continue to monitor. Updated patients Mom and she requested to do everything at this point. Coded again at 5:40, survived, but AOD writes a death note(?) Coded for the 4th time at 08:18. Family at beside, Mother asks for code to be stopped.

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2/7/2021	1020135		93	M	12/30/2020	1/24/2021	death Narrative: 92 yo male seen in clinic on 12/30/2020 for transfusion, hbg 6.9. PMH includes HLD, CKD, myelodysplastic syndrome, DM, prostate cancer, HTN. Pt also received COVID19 Pfizer vaccine the same day. The patient denied any prior severereaction to this vaccine or its components. Post-transfusion, patient had a mechanical fall (per patient he was seated and used the cane to help him stand. However the cane slipped on the floor causing the patient to fall, patient hit his head and injured his right hip, no loss of consciousness at the time). Rapid response team was called and patient was admitted to the ED. Pt was found to have subcapital right femoral neck fracture, scalp contusion, and TBI (per ED provider's note). Ortho evaluated and said patient wasn't a surgical candidate. During his hospitalization, patient tested positive for COVID19 on 1/12/2021, pt was asymptomatic at the time. On 1/13/2021, pt exhibited mild URI symptoms, no respiratory distress. He was started on cetirizine, Montelukast, albuterol, and inhaled steroids to manage his symptoms. Dexamethasone was started on 1/14/2021. Chest Xray was ordered on 1/17/2021, pt's respiratory was slowly getting worse, resting O2 sats were in the high 80s and low 90s with IS. On 1/18/2021, CXR shows patchy bilateral airspace opacities suspicious for pneumonia of bacterial or viral etiology. Pt was started on remdesivir 01/18/2021 (5 doses, from 1/18-1/22/2021). Pt required 5-6 LPM of oxygen at rest. Pt was then transferred to the ICU. His oxygen demand continued to increase and his condition worsened. On 2/14/2021, pt started to desat into the 70s on max high flow. Patient/family agree to comfort care. Medical cause of death was listed as "acute hypoxic respiratory failure due to COVID19." Patient expired 1/24/2021.

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2/7/2021		1009991	NY	73	M	2/7/2021	2/7/2021	73-year-old man s/p first dose of Pfizer at 10:20 AM Ambulated comfortably to exit after 20 minutes in observation but 10:45 collapsed while exiting the building 10:47 CPR initiated 10:49 medical team/EMS found no pulse, agonal respirations, ventricular fibrillation Paramedics and team performed ACLS; of note patient was intubated 7.5 ETT with bilateral breath sounds on ventilation; paramedic reported easy intubation with no apparent throat swelling; 11:02 transported to Emergency Department 11:30 Pronounced dead at Emergency Department
2/6/2021		1015838	LA	80	M	2/2/2021	2/2/2021	Patient was admitted to hospital from home in cardiac arrest. Hx of hypertension, hyperlipidemia, type 2 diabetes (not on insulin) and bilateral carotid artery stenosis. The patient was reportedly at his baseline health on 2/2/21. He received the 2nd dose of COVID vaccine around 1000AM on 2/2/21. Reportedly started running fever of 100.1 and chills the afternoon of 2/2/21. Around 7:00PM he started having dry cough and was complaining of breathing difficulties. He subsequently vomited multiple times (was eating pizza and aspirated) then lost consciousness. His wife called 911, did CPR and EMS reported he in PEA at scene and was intubated. Transported to hospital. SARS CoV-2 and influenza negative.
2/6/2021		1008758	CT	94	F	1/16/2021	1/18/2021	Patient began feeling nauseated on 1/18/21 around 6pm, and had uncontrolled diarrhea, reported that she did not feel right. Staff reported to this writer, that her skin tone was gray in tone and she just didn't look good. She was transferred to the HOSPITAL ER VIA AMBULANCE.
2/6/2021		1008041	MN	100	M	1/12/2021	1/12/2021	itchy skin, swelling, disorientation that led to a fall

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2/5/2021	1004864	WY	72	M	1/28/2021	2/3/2021	Patient expired. Per Emergency MD note: "This is a 72-year-old male with what sounds like diabetes, atrial fibrillation, and hypertension who presents via EMS in cardiac arrest. It sounds like he received his Covid vaccine last week. Initially he had some mild effects from it. However over the last day or so he has felt very unwell. He apparently called his wife today and told her that he was not feeling well and so she returned home. Shortly thereafter he attempted to get up from his chair. He then collapsed and fell forward onto his face. Sounds like his wife had some difficulty rolling him over to perform CPR. When EMS arrived they found him in PEA. He received a total of 5 rounds of epinephrine. At some point they did have return of spontaneous circulation. However just prior to arriving in the emergency department they lost pulses again. The patient was intubated with an 8 oh endotracheal tube prior to arrival.~~
2/5/2021	1005499		80	F	2/2/2021	2/2/2021	Moderna Vaccine Lot 029K20A Patient received second dose of vaccine on 2/2/21. Within 30 minutes patient had a near syncopal episode. She felt lightheaded and shortly after had episode of nonbloody vomiting. Hypotensive 81/69 and started on levophed. Alert and orientated. Lungs clear, abdomen benign on admission. Patient had no reaction when received first dose of the vaccine. Patient developed worsening shortness of breath, tachypnea, Afib with RVR, hypotension and required intubation and multiple pressors.
2/5/2021	1005455	IL	78	M	1/29/2021	1/30/2021	We don't know what happened. 25 hours after the shot, he started gagging and stopped breathing. He was pronounced at OSF at 8:07pm after we took him off life support.
2/5/2021	1005377	FL	80	M	1/5/2021	1/1/2021	Significant other reported patient expired "a week before 2nd vaccine was due".

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2/5/2021	1005301	KY	88	F	1/26/2021	2/1/2021	Patient tested positive for COVID-19 on 1/8/21. She demonstrated a decline in appetite and the ability to feed herself d/t this illness, but no respiratory or other symptoms. She received COVID-19 vaccine #2 on 1/26/21. She demonstrated an SDTI wound to the Lt. heel on 1/27/21. On 1/31/21 she was noted to have a significant weight loss. She was admitted to services on 2/1/21 with comfort care orders. On 2/2/21 she was observed to be without vital signs. Orders were for DNR, and CPR was not initiated in accordance with that order. She was pronounced dead at 0112 on 2/1/21.
2/5/2021	1005276		75	M	1/15/2021	1/16/2021	chills 1 day after vaccine administration; found dead by family 1/18/2021 Narrative: Per patient family report, patient said the next day after vaccination that he didn't feel well because of chills. Patient was found dead at home by his family on January 18th. He was a 74yo man with castrate resistant prostate cancer and liver and bone metastases with rising PSA, status post intravenous chemotherapy 1/7/21
2/5/2021	1005217	IN	99	F	1/27/2021	1/28/2021	Nursing home called 911 for decline in condition. Patient transported to ER where she was admitted to inpatient care and expired 1/30 at 16:13
2/5/2021	1005164		75	M	1/21/2021	1/24/2021	unresponsive Narrative: 74yo patient with pacemaker, type 2 DM, parkinson's and history of syncopal episodes presented to emergency dept on Jan 24th. He was observed and discharged on Jan 26th back to the home where he continued to have cognitive decline and later passed away on 2/2/2021
2/5/2021	1005130	FL	83	M	1/6/2021	2/3/2021	Report of patient expired on 2/3/2021

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2/5/2021	1005022			F		12/26/2020	Respiratory distress; Anxiety; Fever; Passed away; A spontaneous report was received from a consumer concerning a female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and developed fever, respiratory distress, anxiety and passed away. The patient's medical history was not provided. Concomitant product use was not provided. On an unknown date, prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On an unknown date, within 24 hours of receiving the vaccine, the patient developed a fever, respiratory distress and anxiety. Treatment for the events included oxygen, morphine, and lorazepam. On the evening of 26 Dec 2020, the patient passed away. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 26 Dec 2020. The cause of death was not reported. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns a female patient who received their first of two planned doses of mRNA-1273 (Lot unknown), and who experienced the serious unlisted events of death (unknown cause) and respiratory distress, the non-serious listed event of fever, and the non-serious unlisted event of anxiety. The events of respiratory distress, fever, and anxiety occurred within 24 hours of vaccination, while the event of death (unknown cause) occurred an unknown amount of time after vaccination. Very limited information has been provided regarding the circumstances leading to death and additional information has been requested. Based on the current available information and temporal association between the use of the product and the onset of events after vaccination, a causal relationship cannot be excluded.; Reported Cause(s) of Death: unknown cause of death
2/5/2021	1004956	FL	90	M	1/6/2021	2/3/2021	Wife reported patient expired on 2/3/2021
2/5/2021	1005568	KY	66	M	1/5/2021	1/6/2021	Pt. deceased.

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2/5/2021	1004811	NY	62	F	1/9/2021	1/23/2021	On 1/23/21 the patient had a single-car accident, slid off icy road into snowbank. She was seen in our ER, diagnosed w/ trauma and L4 compression fracture. She was transported to Hospital for further trauma workup. We believe she was treated and released. On 1/31/21 the patient had a headache but did not seek medical attention. In the morning of 2/1 she became unresponsive and was pronounced dead on the scene when EMS arrived. Autopsy showed a left temporal subdural hematoma.
2/5/2021	1004645	FL		U			Pfizer vaccine caused the death; This is a spontaneous report from a non-contactable consumer. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, solution for injection, lot number and expiration date were not reported), via an unspecified route of administration on an unspecified date at a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The reporter claimed that Pfizer vaccine caused the death of the doctor (patient). No further details reported. No follow-up attempts are possible. Information about lot and batch number cannot be obtained. No further information is expected.; Reported Cause(s) of Death: Pfizer vaccine caused the death

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2/5/2021	1004206	MN	91	F	1/21/2021	1/23/2021	Death; A spontaneous report was received from a nurse concerning a 91-year-old, female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and died two days later. The patient's medical history included dementia. Concomitant medications reported included paracetamol. On 21 Jan 2021, approximately two days prior to her death, the patient received the first of two planned doses of mRNA-1273, intramuscularly for prophylaxis of COVID-19 infection. On 23 Jan 2021, the patient died. The nurse reporting the event stated that the patient's death was considered as due to "natural causes" and that she was not aware of any new-onset symptoms of illness prior to the patient's death. The patient was described as "fragile" and was under hospice care at the time of her death. An autopsy was not performed. Action taken with the drug in response to the event is not applicable. The patient died on 23 Jan 2021. The cause of death was natural cause of death related to dementia. Autopsy was not performed.; Reporter's Comments: This case concerns a 91-years-old female patient, with medical history of dementia, who experienced a serious unexpected event of death. This event occurred 2 days after first dose of mRNA-1273, lot # unknown. At the time of death, the subject was very fragile and was in hospice care. Concomitant medication included Tylenol. Treatment details were not provided. The doctor considered that the death was due to natural causes. However, autopsy was not performed. Very limited information regarding this event has been provided at this time. Based on the limited information available, it is difficult to assess a cause and effect relationship. The benefit-risk relationship of Moderna's COVID-19 vaccine is not affected by this report.; Reported Cause(s) of Death: Natural cause of death related to dementia
2/5/2021	1006577		94	F	1/4/2021	1/31/2021	Patient passed away within 60 days of receiving a COVID vaccine

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2/5/2021		1005020			M		1/1/2021	Patient took vaccine and died two weeks later; Spontaneous report s were received from consumers via social media posts concerning an 86 year old male patient who received Moderna's COVID-19 vaccine and died. There was no medical history provided. There were no concomitant medications provided. On approximately 06 Jan 2021, the patient received the first of two planned doses of mRNA-1273 (Batch # unknown), intramuscularly for prophylaxis of COVID-19 infection. All of the social media posts reported the patients death and, according to one post, the patient took two doses of Moderna's vaccine and died two weeks later. The patient died on or before 23 Jan 2021. No additional information was provided. Very limited information regarding this event has been provided at this time. The benefit-risk relationship of Moderna's COVID-19 vaccine is not affected by this report.; Reporter's Comments: This case concerns a 86-year old male patient. The medical history and concomitant medication is not provided. The patient experienced Death. The event occurred approximately two weeks after receiving their second of two planned doses of mRNA-1273 (Lot unknown). Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the onset of the event, a causal relationship cannot be excluded and the event is considered possibly related to the vaccine. The benefit-risk relationship of Moderna's COVID-19 vaccine is not affected by this report.; Reported Cause(s) of Death: unknown cause of death
2/5/2021		1006662 TX		51	F	1/22/2021	1/22/2021	Pt had 2nd vaccine, went home and started having "cramping" in all of her muscles. It became bad enough that she was taken to local ED where she then started coughing up blood, required intubation and about 6 hrs later, died.

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2/5/2021	1011983	FL	77	M	12/22/2020	1/26/2021	Narrative: See "Other Relevant History" in Section 6 above Other Relevant Hx: 76yo man with a history of for C5 tetraplegia 2/2 cervical stenosis leading to neurogenic bowel/bladder (chronic suprapubic catheter) and chronic respiratory failure with tracheostomy, severe dysphagia s/p G tube placement and multiple aspiration pneumonias, COPD GOLD III, hx MRSA bacteremia (7/2018) and E coli bacteremia (12/2019). Patient transferred from Spinal Cord Injury until to ICU on 1/11/2021 due to worsneing dyspnea, hypoxia (80s) and tachycardia and was found to have acute hypoxic respiratory failure likely 2/2 multifocal pneumonia. CXR findings of "There is interval increase in patchy airspace infiltrates and consolidation in bilateral lungs concerning for pneumonia" Patient was started on vancomycin and pip/tazo on 1/11 and tracheal aspirate cultures were obtained for VAP diagnosis which ultimately grew Serratia liquifaciens and Proteus mirabilis. Infectious Diseases was consulted who recommended a switch to ertapenem therapy for a total 10 day course for VAP. UCx/BCx remained negative. On 1/20, a therapeutic bronchoscopy was completed with cultures growing Stenotrophomonas maltophilia and pan-S Klebsiella pneumoniae. The following day a chest tube was inserted and the course of ertapenem completed but vancomycin was continued. By 1/22, patient developed shock liver with ALT/AST 2135/1579 from normal range the day prior and SCr increased to 1.3 from baseline 0.7/cystatin C of 2.46 up from 1.15. Levofloxacin was added for Stenotrophomonas coverage. By 1/25, patient's clinical status continued to decline and Cardiology was consulted for new onset Afib with RVR. Discussion was documented with patient's family who requested DNR. Patient passed away in the early AM on 1/26. Demise does not appear to be related to COVID-19 vaccination but occurred in recent timeframe. Symptoms: ElevatedLiverEnzymes & death, pneumonia, afib
2/5/2021	1006316	GA	78	M	1/28/2021	2/2/2021	death- 2/2/2021
2/5/2021	1005686	KS	89	M	2/3/2021	2/4/2021	death. No known symptoms or complaints. found unresponsive in bed. Released to funeral home as the Medical Examiner will not perform and autopsy. Dr. will sign the DC.

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2/5/2021	1007371	CA	62	F	1/19/2021	1/29/2021	Called PCP, from the note: I got my shot on Jan 19. But last Friday I have been down with a horrible flu. I'm wearing diapers because of uncontrollable diarrhea. I can't leave my sofa to walk over to my desk because I'll be so out of breath. I have a cough that produces a pink or gold Phelm I have dry mouth. I have no appetite I'm so weak and have lost 15 pounds. Don't know what to do. My next Covid is shot is feb 11 Called employer on 2/3/21 but hung up. Tried calling multiple times to follow up. In triage she stated she had a COVID test scheduled and had spoken with her PCP. COVID test through PCP: 2/4/21 She passed away the night of 2/4/21

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2/5/2021		1007310	PA	78	F	2/2/2021	2/3/2021	view 2/5/2021 09:23 e Progress Note Note Text: Patient passed away in the facility this morning. view 2/5/2021 08:39 Orders - Administration Note Note Text: Resident passed. view 2/5/2021 08:33 Nurses Note Note Text: Body released to funeral home at this time. Personal effects sent with resident include: 1 pair of glasses, 1 yellow wedding band, 1 silver spoon ring, 1 ring with black and clear stones. Resident has own teeth view 2/5/2021 08:32 Nurses Note Note Text: cause of death per CRNP failure to thrive. view 2/5/2021 07:44 Orders - Administration Note Note Text: Take and document temp & PO2 every 4 hours for MONITORING Resident passed. view 2/5/2021 06:49 Nurses Note Note Text: Son returned call and was updated of resident's passing this am view 2/5/2021 06:33 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger PRN Administration was: Unknown Resident expired @ 0604 [linked] view 2/5/2021 06:06 Nurses Note Note Text: Res found without pulse or respirations. Pronounced at 0604. Updated. N/o's for RN to pronounce, release body to funeral home, dispose of medications per facility policy. Daughter updated. Funeral Home called to release body. view 2/5/2021 05:26 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger Pulse ox 60% on O2 @ 5L/min via mask. Resps 44 per minute. view 2/5/2021 01:57 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger PRN Administration was: Effective Follow-up Pain Scale was: 2 [linked] view 2/5/2021 00:52 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger Residents resps are 40 per minute, pulse ox 76% on O2 @ 5L/min via mask. Resps are labored, shallow and rapid. view 2/5/2021 00:48 Nurses Note Note Text: Nonresponsive to verbal and tactile stimulation. Appears comfortable. view 2/4/2021 22:01 Nurses Note Note Text: Resident resting comfortably, breathing becoming increasingly shallow, wearing O2 via mask at 5L via mask, no dyspnea noted, feet are mottled,

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oral and peri care provided Q2H. No s/s of pain or discomfort. view 2/4/2021 21:40 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger PRN Administration was: Effective [linked] view 2/4/2021 19:32 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 2 hours as needed for pain/air hunger medicated for air hunger, RR 28 to 32/ min view 2/4/2021 19:22 Nurses Note Note Text: Daughter updated on N/O to increase Morphine Sulfate 20mg/mL 0.25mL to Q2H prn from Q6H prn. view 2/4/2021 18:06 Nurses Note Note Text: POA Daughter and daughter aware of residents current condition. view 2/4/2021 11:58 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 6 hours as needed for pain/SOB PRN Administration was: Effective Follow-up Pain Scale was: 2 [linked] view 2/4/2021 11:13 Nurses Note Note Text: Pt. noted to be lethargic at this time. Does respond to verbal and tactile stimuli by opening her eyes but non verbal currently. Skin warm and dry. No mottling or apnea observed at this time. O2 sat 88% with O2 at 2 LPM via n/c. On increased to 3 LPM via mask as pt. noted to be mouth breathing. Respirations 28. F/U O2 sat 93%. HOB elevated. Pt. medicated with morphine by LPN. Daughter updated on pt.'s condition. Does not want pt. sent out to hospital and would like comfort measures to continue. Daughter also in agreement with delay in d/c d/t pt.'s condition. CRNP updated on pt.'s condition, delay in d/c and daughter's wishes. No n/o's at this time. view 2/4/2021 10:56 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML Give 0.25 ml by mouth every 6 hours as needed for pain/SOB Resident showing s/s of discomfort. SOB at this time and high respirations. Repositioned, changed for incontinence care and mouth care provided. view 2/4/2021 10:34 Progress Note Note Text: Spoke with RN regarding change in condition. Updated Sr Living regarding change. Recommendation to cancel d/c/transfer for today, see how resident does through the weekend and re-evaluate on Monday. Daughter updated on cancellation of d/c today. view 2/4/2021 10:04 Nurses Note Note Text: Daughter aware that resident's

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O2 sat was 88% on room air on 3-11 shift and that oxygen was applied via nasal cannula. view 2/4/2021 10:03 Nurses Note Note Text: N/O: Discharge 2/4/21 with scripts to Sr. Living. Daughter aware. view 2/4/2021 09:53 Nurses Note Note Text: Pt. to be d/c'd to another facility this am as per MD order. Pt. alert and responsive. Skin assessment done as per facility policy. No pressure areas noted at this time. No s/sx of pain or discomfort observed at this time. V.S. 97.0 67 20 O2 sat 95% with O2 at 2 LPM via n/c. view 2/4/2021 07:45 Nurses Note Note Text: Resident seen by Dr. for discharge. Orders pending at this time. view 2/4/2021 07:36 Nurses Note Note Text: CRNP and Dr. updated on O2 sat 88% on RA with f/u of 93% with O2 on at 2 LPM as well as rest of VS, 3-11 shift 2/3/21. No n/o's at this time. view 2/3/2021 21:17 Nurses Note Note Text: Resident SpO2 88% on RA. Pulse 124. Respirations 40. PRN morphine given and O2 applied via NC at 2L/min. After recheck pulse ox up to 93%, pulse 100, and respirations 22. Resident appears comfortable at this time. view 2/3/2021 20:05 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML. Give 0.25 ml by mouth every 6 hours as needed for pain/SOB PRN Administration was: Effective [linked] view 2/3/2021 19:48 Orders - Administration Note Note Text: Morphine Sulfate (Concentrate) Solution 20 MG/ML. Give 0.25 ml by mouth every 6 hours as needed for pain/SOB PRN given for SOB after elevation of HOB not effective. view 2/3/2021 11:51 Nurses Note Note Text: CRNP updated rapid COVID test done for d/c tomorrow was negative. No n/o's at this time. view 2/3/2021 11:44 Nurses Note Note Text: Daughter notified of rapid covid swab being negative. view 2/3/2021 09:50 Orders - Administration Note Note Text: Obtain Rapid Covid test on 2/3/2021 for discharge. Please give copy of results to Social Worker every day shift for covid testing for 1 Day Completed and negative. view 2/3/2021 08:45 Skilled Nursing Note Reason for skilled service: Therapy describe skilled service: Nursing, therapy assessment: V.S. 97.8 79 18 138/84 Orientation: Oriented to self only. Oxygen: O2 sat 94% on RA Edema: Trace edema noted BLE. Pedal pulses present. Pain: Denies pain or discomfort at this time. Nursing note: Pt. alert and responsive. Skin warm and dry. Lung sounds diminished. No respiratory distress observed at this time. Abdomen

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							soft. BS+ in all 4 quads. Continent/Incontinent of B&B. 1 assist with ambulation, transfers. 1 assist with ADL's. Working with therapy on gait training, therapeutic exercise, therapeutic activities & neuromuscular reeducation. view 2/2/2021 14:37 Progress Note Note Text: Per health professional at Sr Living, prepared to accept patient to their Memory Care Unit 2/4. Transportation arranged for 11 AM per family request. Daughter (POA) updated on d/c time on 2/4/21. Facility requesting rapid COVID test completed prior to d/c and results sent to them. All other information sent for continuity of care.
2/5/2021	1006994	WV	75	F	1/22/2021	1/23/2021	Patient had one occurrence of thrombotic thrombocytopenic purpura in 1996 for which she had plasma exchange therapy in 1996. No other occurrence since 1996 until she received her first dose of the Pfizer covid vaccine.
2/5/2021	1011771		84	F	2/3/2021	2/3/2021	Narrative: Patient with history advanced vascular dementia, hypertensive cerebrovascular disease and stroke, T2DM. Received her second dose of Pfizer COVID-19 vaccine at approximately 14:00 and was reported to have expired at home at 20:55. Dr. (Medical Director) spoke with patient's son/caregiver 2/4/21. Son reports that patient was in her usual health yesterday morning, deemed well enough by son to travel for vaccination. He reports she had no bothersome symptoms after either first or second vaccinations. Specifically denied rash, wheeze, and difficulty breathing. Son was with patient throughout the day. In the evening, when preparing for bed, he noted she became suddenly unresponsive in a similar fashion as she has done several times in past years. While in all previous such episodes she recovered within minutes, last evening she did not regain consciousness, experiences a brief period of labored breathing, and died. Patient's son called 911 and the patient's body was brought to the medical examiners. The medical examiner declined to proceed with autopsy. Patient's son is not interested in autopsy. Patient's son reports confidence that his mother's underlying hypertensive/diabetic cardiovascular disease is the natural cause of her death. Other Relevant Hx: Symptoms: & Death Treatment:

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2/5/2021		1006640	NM	45	F	2/3/2021	2/4/2021	In discussion with Dr., medical director at Detox, she arrived night of 2/3/21 was quite intoxicated so was not going through any withdrawal. She was getting vitals and CIW checked regularly. First dose of chlordiazepoxide 25mg was 2/4 at 1:25pm for CIWA 9. She had repeat vitals at 5:50pm, CIWA 1, vitals: P 67, 118/79, 94% on RA, T 98.3. she had complained of some "pressure in her head" and feeling anxious, but otherwise denied other complaints. she was talking with others in the group, then other patients report she suddenly started having seizure like activity around 6:45pm, med techs came to help and found her stiff, gurgling. they tried to get vitals on her, called 911, noticed that at 6:54pm she had lost a pulse and they started CPR. paramedics arrived at 7:08pm and she was brought to ED. Pt BIBA in cardiac arrest. Pt was at Detox Center when she was reported to have seizure-like activity followed by collapse. She was found to be pulseless and CPR initiated by staff members. EMS arrived and performed approx 15 min of CPR and gave pt epi x 3 and bicarb. No shocks administered but they did not report a rhythm. In the emergency room the patient arrived and was found to be pulseless with PEA arrest, CPR was initiated, patient was intubated. ROSC ultimately achieved, patient remained very acidotic despite ventilator adjustment, head CT revealed cerebral edema. Pt also found to be profoundly anemic with a hemoglobin of 5 and platelets of 37, she was thought to be GI bleeding so medications for this were initiated. Patient then became more hypoxemic with bradycardia, consultation with neurosurgery and critical care medicine at tertiary care center deemed ongoing CPR futile. Patient arrested at 2:30AM on 2/5, pronounced dead at 2:48AM.

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2/5/2021		1006228	ND	88	F	2/1/2021	2/2/2021	2/2/21-1000-patient presented to the local emergency room with complains of fever, shortness of breath and decreased oxygen sats. temp 101.7, pulse 102, respirations 36, BP 141/92, oxygen 94%. Lung sounds crackles bilaterally with rhonchi on the left. patient worked up for sepsis, CXR shows mild atelectasis. blood pressure dropped, and continued to drop through treatment requiring levophed drop to be initiated. Patient POA determined that this would not be her sister's wishes and made the decision to make patient comfort care status. 2/3/21- patient lethargic throughout night. 0640-patient demise.
2/5/2021		1006168	VA	58	M	1/26/2021	1/26/2021	The patient, who was a pharmacist, developed fatigue and shortness of breath hours after receiving vaccine. Two days later, on 01/28/2021, the patient went to local urgent care for worsening shortness of breath and was referred to Hospital for worsening dyspnea and hypoxia. The patient was admitted to the hospital. We was found to have bilateral pulmonary infiltrates and treated for pneumonia with Rocephin and azithromycin. He was tested for COVID-19 multiple times, but each of the results were negative. Despite the negative results, there was high clinical suspicion for COVID-19 and the patient was started on Remdesivir and Decadron. The patient's oxygen requirements continued to worsen and the patient was transferred to another facility for higher level of care. There his hypoxia worsened and he required mechanical ventilation. Patient then developed hypotension and required vasopressors for blood pressure support. Furthermore, patient developed acute renal failure requiring hemodialysis. Despite mechanical ventilation with FiO2 100%, and for vasopressors, patient clinically deteriorated and family decided to palliatively extubate on 02/05/2021.
2/5/2021		1007033	CA	76	M	1/22/2021	2/1/2021	Patient presented to emergency room on 2/1/2021 with a chief complaint of having a chronic headache and fatigue following receipt of the Moderna vaccine 10 days prior. Following examination by the physician, the patient was diagnosed with an acute subdural hematoma. The patient subsequently underwent decompressive surgery, however demonstrated worsening neurologic status over the next several days and ultimately expired on 2/4/2021.

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2/5/2021	1006216	SC	100	F	2/2/2021	2/3/2021	Notes of the checks/events with resident: 18:36 2/2/21 Resident had no complaint of pain, swelling, redness or warmth to vaccine site. No signs and symptoms of fever, chills, tiredness or headache. T 97.2 02:50 2/3/2021 Resident received 2nd COVID vaccine. No complaint of pain, swelling, redness or warmth to vaccine site. No signs and symptoms of fever, chills, tiredness or headache. T 98.1 07:15 2/3/2021 Resident was observed not breathing. 911 was contacted along with the doctor. Resident was confirmed having passed away.
2/5/2021	1006633	LA	88	F	1/20/2021	1/24/2021	EARLY SUNDAY MORNING THE PATIENT BEGAN VOMITTING AND SHORT OF BREATH AND CHEST AND BACK PAIN. SHE CODED WHEN SHE GOT IN THE ER AND LATER PASSED AWAY THE MONDAY. DIAGNOSIS WAS PNEUMONIA AND HEART FAILURE PER STEP DAUGHTER.
2/5/2021	1006289	GA	75	M	1/28/2021	2/1/2021	death- 2/1/2021
2/5/2021	1006303	GA	67	M	1/28/2021	2/1/2021	death- 2/1/2021
2/5/2021	1006416	CA	53	M	1/13/2021	1/31/2021	Patient died of a heart attack on 1/31/21, 2.5 weeks after vaccination
2/4/2021	1000739	PA	78	F	1/5/2021	1/5/2021	Approximately 10 minutes after receiving the COVID- 19 vaccine resident displayed seizure activity, staring straight ahead and strong allover muscle jerking of both the up and lower extremities, color became gray, activity lasted approximately 3 minutes, resident then became relaxed, color returned to normal, BP-140/80, 97.8, 60, 16, sleeping the remainder of the shift,. Resident continued to decline until resident CTB on 1/19/21

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2/4/2021	1002052	OH		F	1/19/2021	1/20/2021	<p>Passed away yesterday, found deceased in her apartment; This spontaneous report was received from a consumer which refers to a 91-year-old female patient who received the Moderna COVID-19 vaccine (mRNA-1273) and next day the patient passed away. The patient's medical history was not provided. Concomitant medications were not reported. On 19 Jan 2021, the patient received her first of two planned doses of mRNA-1273 intramuscularly (Lot number: not provided) for prophylaxis of COVID-19 infection. On 20 Jan 2021, the patient passed away and she was found deceased in her apartment. No treatment medication was provided. Action taken with mRNA-1273 in response to the events was not applicable as the patient passed away. On 20 Jan 2021, the patient died, cause of death was unknown. Autopsy result was unknown. The reporter assessed the causality as related between the event and Moderna COVID-19 vaccine.; Reporter's Comments: This case concerns a 91-year old female patient. The medical history and concomitant medication is not provided. The patient experienced Death. The event occurred approximately one day after receiving their first of two planned doses of mRNA-1273 (Lot unknown). Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the onset of the event, a causal relationship cannot be excluded and the event is considered possibly related to the vaccine.; Reported Cause(s) of Death: Unknown Cause of Death</p>

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2/4/2021	1001713			U			Passed away; A spontaneous report was received from a consumer concerning a patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and passed away. The patient's medical history was not provided. No relevant concomitant medications were reported. On an unknown date, approximately 2 hours prior to the onset of the event, the patient received a dose of mRNA-1273 intramuscularly in the for prophylaxis of COVID-19 infection. They were not feeling sick or experiencing any adverse events. Vital signs included temperature 98 degrees Fahrenheit. Approximately two hours after receiving the vaccine, the patient passed away. No treatment information was provided. Action taken with the drug in response to the event was not applicable. The patient died on an undisclosed date. The cause of death was not provided. Plans for an autopsy were not provided.; Reporter's Comments: This case concerns a patient of unknown age and gender. The medical history and concomitant medication is not provided. The patient experienced Death. The event occurred approximately two hours after receiving their first of two planned doses of mRNA-1273 (Lot unknown). Very limited information regarding this event has been provided at this time. Based on temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded. The benefit-risk relationship of Moderna's COVID-19 vaccine is not affected by this report.; Reported Cause(s) of Death: Unknown cause of death
2/4/2021	1001488	TX	60	F	1/18/2021	1/31/2021	Patient died several days after receiving the second dose of the vaccine. See additional information sent. An autopsy has been performed and results are pending.

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2/4/2021	1000856		78	M	1/30/2021	1/30/2021	Myocardial infarction Narrative: PMH significant for aortic valve stenosis, mitral valve stenosis, CKD, CHF, DM, HTN, obesity, hypothyroidism and dyslipidemia. Per report from primary care - the patients wife reports that the patient went on Saturday (1/30/21 - about 1050) morning to receive his COVID vaccine. He returned home and told her about the experience and denied any side effects. He then proceeded to sit in his easy chair for a while and around 1:30, she asked him if he wanted any lunch. The patient's wife reports he "grumbled" at her, and then got up to go to the bathroom. She then heard a loud crash and found him lying on the floor of the bathroom, with his head knocking hole in the wall as he fell. She could not detect a pulse. She called 911 and began compressions. First responders to the scene likewise tried to revive him but were not successful in her efforts. Per primary care documentation - Uncertain if related to Pfizer vaccine; vaccine administered on 1/30/21 and approximately 3 hours later suffered fatal MI at home.
2/4/2021	1000784	LA	75	F	1/29/2021	1/30/2021	T.C. from sister to communicate the hospitalization of her sister. She reported that on Friday patient collapsed and started foaming at the mouth and was rushed to hospital. She stated that patient is on a ventilator and at 5PM today they are going to take her off. Sister was very upset and I was uncomfortable asking more questions. She will call me with more information at a later time. She did say that the hospital staff was not sure of what caused her collapse.
2/4/2021	1000752	IN	76	M	1/17/2021	1/31/2021	Pt son, reports patient passed away on 2/1/21 in the early hours. Pt wife, told Pt's son that patient started feeling "bad" with common cold like symptoms on 1/31/21, had a temp of 99.0. Pt's wife went to take a shower, when she got out patient was unresponsive. She called EMS, they pronounced patient deceased upon arrival. Pt's son also reports patient and Pt's wife both had their 1st COVID-19 vaccine 13 days prior. He was told by EMT on sight to notify the facility where they received their vaccines. He did contact them and was told to notify PCP.
2/4/2021	1001567	IL	81	M	2/2/2021	2/3/2021	Death <= 24 hours post-vaccination

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2/4/2021	1000711	FL	81	M	1/8/2021	1/27/2021	in addition to above, pt had the following diagnosis: portal HTN, abnormal blood chem, essential tremor, depressive disorder, abnormal glucose tolerance test, hyperlipidemia, hypothyroidism, insomnia, localized osteoarthritis, calculus of kidney, pancytopenia, odula on liver, hepatocellular CA, hyotension, hypovolemia, hepatorenal syndrome additional meds: zoloft, aldactone, thiamine,demadex, ultram, kenalog, vitamins, bactroban ung
2/4/2021	1000709	FL	66	M	1/18/2021	2/1/2021	Patient with past medical history of CAD, CKD, sCHF, LGL Leukemia admitted to Hospital on 1/19 with pleural effusion. Pt expired on 2/1/2021. Hs of essential HTN, complete heart block, T2Diabetes,thyroid issues, stroke, papillary CA of thyroid, dyslipidemia, anemia, hypercalcemia, pulmonary nodule, hypoparathyroidism, pacemaker, bilat carotid stenosis, afib, pleural effusion, pancytopenia, cardiomyopathy, severe aortic stenosis, sick sinus syndrome, Dressler syndrome, empyema, ESRD
2/4/2021	1000670	AL	87	F	1/19/2021	1/1/2021	she was hurting at her chest/ Chest pain; on her left arm hurt real bad that's what the clot on her left arm; on her left arm hurt real bad that's what the clot on her left arm; She passed away; heart attack; This is a spontaneous report from a contactable consumer. An 87-years-old female patient received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 19Jan2021 at single dose for COVID-19 immunisation. Medical history included diabetes mellitus, for which she was taking a pill like an hour before she would take her meal. On Monday (Jan2021) the patient experienced was hurting at her chest/ chest pain, her left arm hurt real bad as she had a blockage in her left arm/clot on her left arm, and they wanted to put in a stent and after the surgery it went well and she all go home in two days. The patient was hospitalized in Jan2021 due to the events. She had a heart attack and that the chamber between the dividers had a hole in it and her heart tissue was too thin so much thin she couldn't repair it. The patient passed away on 26Jan2021. The patient was tested negative for COVID-19 on unknown date. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: She passed away

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2/4/2021	1000665	FL	97	M	1/18/2021	1/20/2021	Death 2 days later; This is a spontaneous report from a contactable Other HCP. A 97-year-old male patient received the 1st dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL0140) via intramuscular in the left arm on 18Jan2021 12:00 PM at single dose for covid-19 immunisation. Medical history included prostate cancer, macular degeneration, type 2 diabetes, atrial fibrillation. No known allergies. Concomitant medications included glipizide, warfarin and metformin in two weeks. The patient had no other vaccine in four weeks. The patient experienced death on 20Jan2021 at 09:00 PM. Death cause was undetermined. No autopsy was performed. No treatment was received for AE. The patient had no covid prior vaccination, no covid tested post vaccination. Outcome of the event was fatal.; Sender's Comments: Event unknown cause of death is assessed as Related until sufficient information is available to confirm an unrelated cause of death or if there is sufficient information to allow an unrelated causality assessment. Case will be reassessed when follow-up information is received. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.; Reported Cause(s) of Death: Death 2 days later

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2/4/2021		1000226	GA	86	F	1/19/2021	1/27/2021	volvulus; volvulus and needed surgery followed by further ischemia; This is a spontaneous report from a contactable physician. An 86-year-old female patient received her first single dose of BNT162B2 (Pfizer-BioNTech Covid-19 vaccine) intramuscularly on 19Jan2021 for Covid-19 immunization. The patient's medical history and concomitant medications were not reported. The patient had no known allergies. The patient developed volvulus and needed surgery followed by further ischemia and at end of life. The events onset date reported as 27Jan2021. Patient had 3days hospitalization and died eventually. It was unknown if an autopsy was performed. Information about lot/batch number has been requested.; Sender's Comments: Very limited information was provided in this report. No relevant information regarding the clinical course of the events, the patient's underlying medical conditions were mentioned. Based on the information currently available, lacking any other alternative explanations as so far, the reported volvulus and Intestinal ischaemia are managed as related to COVID-19 vaccine, BNT162B2, for reporting purpose, only. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.; Reported Cause(s) of Death: volvulus; ischemia
2/4/2021		1000624			M			Pneumonia; This is a spontaneous report from a Pfizer-sponsored program via a contactable consumer (patient). A male patient of unspecified age (Age: 63; Unit: Unknown) received the first dose and second dose of BNT162B2, via unspecified routes of administration on unspecified dates at single dose for COVID-19 immunization. Medical history and concomitant medications were not reported. After receiving both vaccines, patient still got pneumonia and he had seen many elderly died from pneumonia even after receiving the vaccine. Outcome of the event was not resolved. No follow-up attempts are possible; information about lot/batch number cannot be obtained.

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2/4/2021	1000228	NV	40	M	1/21/2021	1/21/2021	<p>dead; Collapsed; bnt162b2 was given to patient with immunocompromised w/ reportable conditions; bnt162b2 was given to patient with immunocompromised w/ reportable conditions; This is a spontaneous report from a contactable nurse. A 40-year-old male patient receive first dose of bnt162b2 (Lot number: EK9231, Brand: Pfizer), intramuscular in left arm on 21Jan2021 15:15 at single dose for COVID-19 immunization. Medical history included immunocompromised w/ reportable conditions from an unknown date and unknown if ongoing, positive for Covid in September from Sep2020 to an unknown date. The patient's concomitant medications were not reported. The patient experienced dead, collapsed on 26Jan2021. Therapeutic measures were taken as a result of collapsed. The outcome of collapsed was unknown. The patient died on 26Jan2021. It was not reported if an autopsy was performed. Received Covid vaccine here on 21Jan2021, was at work on 26Jan2021 and collapsed, no known complaints at the time, CPR (cardiopulmonary resuscitation) was initiated immediately, transported to ER (Emergency room) and pronounced dead. Unknown if other vaccine in four weeks. The patient had COVID prior vaccination. Unknown If COVID tested post vaccination.; Sender's Comments: Based on the information currently provided, the patient was immunocompromised and had prior COVID infection. The death and syncope more likely are associated with the patient underlying medical conditions. More information such medical history, concomitant medications, treatment indication and event term details especially death cause and autopsy results are needed for fully medical assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: Dead</p>

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2/4/2021	1003587	OH	93	M	1/5/2021	1/8/2021	My father was in weak condition to begin with. He didn't get out of bed for the next few days after receiving the vaccine. The little amount that he ate was consumed in bed. He began aspirating his food which lead to pneumonia. He wasn't strong enough to fight off the pneumonia even with antibiotics. He died on 1/23/21. While he might have passed soon in any case, I believe that the vaccine may possibly have increased his weakness/exhaustion thereby hastening his demise.
2/4/2021	1002057	CA	80	F	2/3/2021	2/4/2021	Sudden death
2/4/2021	1000233			M			just died; This is a Spontaneous report from a Pfizer Sponsored Program from a contactable consumer. A male patient of an unspecified age received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient just died on an unspecified date. 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: just died
2/4/2021	1003494	IL	81	M	1/18/2021	1/18/2021	Possible transverse myelitis developing 2 days after vaccine injection. Death on day 9 after vaccination
2/4/2021	1002187	TN	77	M	2/2/2021	2/3/2021	PATIENT WAS IN CLINIC FOR 1ST CLINIC. WAS DISCHARGED BEFORE OUR 2ND CLINIC. HE CAME BACK TO OBTAIN HIS 2ND SHOT. WE WENT OUT TO THE CAR GAVE SHOT. THE NEXT DAY TO MY KNOWLEDGE, HE STARTED CODING AT HOME. AMBULANCE WAS CALLED AND HE CONTINUED TO CODE. THE AMBULANCE CREW TRIED CPR FOR 30 MINS WITH NO LUCK. PATIENT PASSED 2-3-21.

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2/4/2021	1003390	OH	88	F	1/20/2021	1/21/2021	On 2/1/2021, the patients daughter, who claims is a nurse, reported this incident to me. She stated that the evening after the patient received the vaccine, she felt some mild injection site pain. The morning after, the patient reported severe abdominal pain, diarrhea and vomiting. The patients daughter then called her physician to report these symptoms and attributed them as an adverse reaction to the vaccine at that time. These symptoms were intermittent for one week and no other adverse reactions were noted. In the early morning hours of 1/27/2021, the patient was toileting and had expired while doing so. An ambulance was called and cause of death was not found. An autopsy was not performed.
2/4/2021	1003624	MI	58	M	1/25/2021	1/26/2021	Patient awake at 0300. When going into the room to get him ready for dialysis he was cold to touch, unresponsive other than to sound, and nonverbal. O2 sat was 67 via finger probe. Oxygen immediately initiated and a venturi mask retrieved and initiated. When unable to arouse him via sternal rub this RN called 911. Send to ED. Febrile 39.2 and hypotensive 58/43. Admitted. unknown after that as patient expired in hospital.
2/4/2021	1003382	AL	83	F	2/2/2021	2/3/2021	Began with vomiting and diarrhea. C/O chest pain. Bradycardia. Hypotension. 2 seizures in 45 minutes after not having one in years. We gave fluids. Gave Zofran. Comfort measures. Pt passed at midnight. Was completely fine one day before. Had minimal issues with COVID though did have a pneumonia that was treated w ATB early on and resolved.
2/4/2021	1003329	CA	73	F	1/29/2021	2/2/2021	Patient's primary care provider received a death certificate to be signed for this patient. He spoke with the patient's husband and son, who reported that the patient had pain and swelling at the vaccine administration site after receiving the vaccine and was feeling unwell after receiving the vaccine. The patient's family reported that they found her unresponsive on 2/2/21 and called 9-1-1. The patient was pronounced dead upon arrival of emergency responders.

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2/4/2021		1003106	CA	92	F	2/4/2021	2/4/2021	Resident received vaccination at 9:12 am, she was monitored and checked at the 15 minute interval 9:27 am, reassessed, vitals were fine. Within 20 (9:32 am) minutes of receiving the vaccine she was unresponsive, pupils were fixed at 9:45 am, no vital signs noted; hospice came out and reported her time of death 10:21 am. This person was on hospice.
2/4/2021		1002840	IN	85	M	1/26/2021	1/27/2021	Client lives alone and had dinner at his home with family members after the 4:40 appointment. Client stated that in general he did not feel well but did not give any specific symptom. Family states they asked the client to go to the ER and the client refused. Family states they helped the client to his chair in the living room and then left to go home. Family states that the client was found in his bedroom the next morning at 7:54 a.m. deceased.
2/4/2021		1002808	WV	90	F	1/9/2021	2/3/2021	According to medical report, Pt presented to the ED on 1/14/21 w/ cc of SOB for 1 day. She received her COVID-19 vaccine on 1/9/21. Pt stated that she developed a dry hacking cough 2 days prior to the vaccine on 1/7/21. Over the last few days prior to admission, she developed generalized weakness, SOB, loss of sense of taste and smell w/ associated decreased appetite and nausea ultimately SOB in the 24 hours prior to admission. Final Diagnosis- acute hypoxic respiratory failure secondary to COVID-19 pneumonia. Pt died on 2/3/21. See Medical report for more information.
2/4/2021		1002636	WA	90	F	12/28/2020	1/17/2021	On 1/17/2021 patient woke and began her day as usual, was found down by family member 1 hour later conscious but unable to speak and unable to move her R side. She was admitted to the hospital - Initial NIHSS was 26 and CT imaging showed no acute hemorrhage but mild hypodensity of greater than 1/3 of the MCA territory (TPA not recommended). CTA did show distal L M1/M2 occlusion and she was transferred to larger facility for thrombectomy. Unfortunately the patient had persistent severe neurological deficits after thrombectomy. Was discharged home on hospice care and expired on 1/23/21.

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2/4/2021	1002535		97	F	1/28/2021	1/29/2021	On 1/29/21 patient began not feeling well and saw her provider. The doctor gave her fluids and tramadol for pain. They noticed increased confusion, but thought that could have been due to the tramadol. They also increased her gabapentin as she was experiencing nerve pain. Patient also developed a rash and was diagnosed with shingles on 2/1/21. Patient died on 2/3/21
2/4/2021	1002453	IN	71	F	1/26/2021	1/29/2021	No reaction at time of vaccination. Reported by family that pt. died on 1/29/2021. Coroner does not believe this was related to vaccine, but requested to report to VAERS
2/4/2021	1002229	MN	77	M	1/22/2021	2/3/2021	spontaneous death, found unresponsive in cell after normal morning activities
2/4/2021	1002418	PA	50	F	1/15/2021	2/4/2021	Patient death
2/4/2021	1002255	FL	76	F	1/27/2021	1/28/2021	Death
2/4/2021	1002813	AZ	91	M	2/3/2021	2/4/2021	Patient was seen at 0710 he was sleeping but at normal cognitive behavior Patient was again assessed at 0720 where he was noted to be unresponsive, BP 180/100s, HR 230s, he was a DNR therefore not CPR was administered. EMS arrived at facility patient was noted to be in full cardiac and respiratory arrest. Time of death 0735
2/4/2021	1005533		90	M	1/21/2021	1/23/2021	Narrative: 89yo with type 2 DM, HT, pacemaker and prior COVID+ in Nov 2020. Shortly after administration of 2nd Covid vaccine, patient began to have increased cognitive decline and 2 days after he expired at the facility
2/3/2021	996959	OH	78	M	1/1/2021	2/1/2021	Vaccine was administered Thursday and my father Died early Monday morning unexpectedly
2/3/2021	998138	FL	86	F	1/22/2021	1/22/2021	Same day as vaccination given, developed pain went from arm up to shoulder, to back, to neck to head - right side of body; chills/body aches
2/3/2021	997783	OH	65	M	2/1/2021	2/3/2021	patient passed away subsequent to receiving dose on 02/01. Staff does not have reason to believe vaccine was involved.

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2/3/2021	997677	WI	94	F	2/1/2021	2/1/2021	Rapid decline in health status, Elevated BP&P, posturing, loss of consciousness, Glasgow coma Scale 4 starting 2/1/2021, Deceased 2/3/21
2/3/2021	997642	MT	62	F	1/19/2021	2/2/2021	We were notified 02/02/2021 of patient's death. Unknown cause at this time.
2/3/2021	997571	TX	93	F	1/6/2021	1/7/2021	BRAIN BLEED
2/3/2021	997553	VA	92	M	1/26/2021	2/1/2021	fatigue x 5 days, including day of vaccination, death the night of day 5/early morning of day 6
2/3/2021	997145	NY	85	F	1/21/2021	2/1/2021	85 year old patient with multiple medical problems. PEA/asystolic arrest 5 days after receiving vaccine, hospitalized. Patient died on 2/1/2021. It is not clear whether the vaccine administration led to the patient's death or not. "...healthcare professionals are encouraged to report any clinically significant or unexpected events (even if not certain the vaccine caused the event)~~
2/3/2021	996591	CA	85	F	1/23/2021	1/25/2021	patient received vaccine on Jan 23, 2021. developed weakness on Jan 25, 2021. Sent to ED on Jan 27, 2021 with hypoxia requiring 6 L O2, low Bp, declining mental status. Per family request transitioned to hospice and passed away on Jan 30, 2021
2/3/2021	998419	NH	76	F	1/8/2021	1/16/2021	Resident vaccinated-1/8 Resident deceased-1/16
2/3/2021	997297	TN	85	M	1/4/2021	1/17/2021	Death on 1/17/21. Death certificate reports: Septic Shock, UTI, Pneumonia, Chronic Renal Failure
2/3/2021	1002931		77	M	1/21/2021	1/24/2021	CARDIAC ARREST, DEATH Narrative: The patient presents to the emergency department in cardiopulmonary arrest. CPR was continued upon arrival. The Combi tube was removed and an endotracheal tube was placed without complications. ROSC was obtained multiple times but the patient continued to go into PEA. The patient was seen in the emergency department by both critical care and Cardiology. EKG shows ST elevations, but the patient was unstable to go to catheterization. The patient had 1 episode of asystole. Despite best efforts and multiple attempts we were unable to resuscitate the patient. Time of death 1253 on 1/24/21.

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2/3/2021	998175	NH	84	F	1/7/2021	1/16/2021	Resident vaccinated-1/7/21 Resident covid positive 1/11/21 Resident covid PNA-1/12/21 Resident hospitalized 1/16/21 Resident deceased 1/20/21
2/3/2021	998228	MI	65	M	1/29/2021	2/3/2021	Found unresponsive
2/3/2021	1002937		73	M	2/1/2021	2/1/2021	death Narrative: Pt attended arthritis clinic appt 0900; labs shortly after; rec'd vaccine in clinic ~ 1113; seen on surveillance camera walking to parking garage ~ 1145; medical center rec'd call from wife ~ 1900 that pt never returned home; police found vehicle running in parking garage, code called, pt obviously deceased by that time 1930, body sent to medical examiner for autopsy.
2/3/2021	998770	AR	91	F	1/28/2021	1/29/2021	Patient had no symptoms or adverse events until the next evening after shot (1/29/21) where daughter reported her having heart palpitations. Family told her to rest and did not seek medical attention. Saturday afternoon (1/30/2021), patient started experiencing labored breathing. Daughter called 911 and before the ambulance arrived, the patient's breathing became more and more shallow. Patient was taken to the local hospital and passed away Saturday evening around 5:30 pm.
2/3/2021	998637	NC	75	F	1/13/2021	1/15/2021	Patient noted to have irregular breathing in bed and unable to arouse. Provided life saving measures in the field x 30 minutes and transferred to hospital. Noted to have heart arrhythmia which suspected to cause cardiac arrest.
2/3/2021	998579	KY	82	M	1/25/2021	2/2/2021	Resident passed away 2/2/2021.
2/3/2021	998576	WA	86	M	1/27/2021	1/27/2021	Had acute respiratory failure, dysuria NSTEMI after Dose #1 Lot # 025L20A (Moderna) hospitalized same day 12/31/20 administered @ 1040 back to baseline. 2nd Dose on 1/27/21 0950 Lot as above. Unknown exact onset same day, ED by EMS @ 1745, respiratory distress, febrile 39.4 degrees C BP 150/105 RR 29
2/3/2021	998544	KY	83	M	1/13/2021	1/25/2021	Patient had heart attack. Spoke with spouse on 2/3/2021 stated had multiple health issues including heart and lung issues.

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2/3/2021	998463	NC	88	F	1/6/2021	1/19/2021	Resident passed away unexpectedly on 01/19/21 after developing acute hypoxic respiratory failure on morning of 01/19/21. She was transferred to hospital via EMS where she was intubated, coded, and ultimately expired with uncertain underlying cause, potentially ACS.
2/3/2021	998421	NC	91	M	1/6/2021	1/27/2021	Resident passed away unexpectedly on 1/27/21 from presumed sudden cardiac death.

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2/2/2021	993828	FL	85	M	1/21/2021	1/24/2021	Heart stopped; Could not swallow; This is a spontaneous report from a contactable nurse (patient's wife). An 85-year-old male patient received the first dose of the bnt162b2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on 21Jan2021 at a single dose for COVID-19 immunization. Medical history included blood pressure abnormal (verbatim: blood pressure) from an unknown date and unknown if ongoing, neuropathy from an unknown date and unknown if ongoing, weight issue from an unknown date and unknown if ongoing, diabetes from an unknown date and unknown if ongoing, walker user from an unknown date and unknown if ongoing. Concomitant medications included insulin aspart (NOVOLOG) taken for diabetes from an unspecified date to an unspecified date; and he was taking a long acting one as well. The patient previously received the influenza vaccine (MANUFACTURER UNKNOWN) for immunization on unknown dates ("had flu shots before with no reactions and everything, nothing before"). On 24Jan2021, the patient's heart stopped (death, medically significant), and could not swallow (medically significant). The clinical course was reported as follows: The patient's wife stated the patient was taking insulin aspart (NOVOLOG) and he was taking a long acting one as well. The reporter, the patient's wife and a retired registered nurse (RN) stated, her husband (patient) just died and she thought he died from the COVID vaccine (later clarified the reason of death was-heart stopped). The patient had the vaccine on 21Jan2021, which was on a Thursday, and he was fine. On the following Sunday around 1:30 (on 24Jan2021), the patient was feeling a little weak, however, the patient's wife thought maybe his blood sugar was low. The patient's wife checked, and the patient's blood sugar was 91. The patient's wife went to get some yogurt to feed him in order to get his blood sugar up a little; "which was a normal thing for him, it was not that low for him." Then, suddenly, the patient fell, and the patient's wife could not get a pulse or anything. The patient's wife called an unspecified number and she started compressions; however, he was dead. The patient's wife stated the patient just had his heart test, a three hour long one, and it was "perfect three weeks ago." The patient had just gone to the doctor the other day and his blood pressure was "fine and everything."

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The patient's wife stated that other than his diabetes, "which he had for (sentence incomplete)." Regarding lab tests, the patient's wife stated, "No, he had it before but not in the last two weeks. He was going for one because we just went to the doctor last week and he was going to call yesterday to make the appointment request to get his blood work done. Blood work has been good except his A1C was always high, but other than that everything was good" (as reported). Regarding causality, the patient's wife stated, "I do, because he was fine until about half an hour before he died. He said to me, I feel a little weak today and then I was talking to him that your upper body strength is really good and then I said, we just have to work on your weight a little more because he did have neuropathy. And then, I went out of the room and all of a sudden I just heard him fall and that is when I just went in to check his blood sugar and it was 91 and I got him yogurt and he started eating that and then that was it, he started spitting it out and he said, I could not swallow and that was it, he just died." The patient's wife further added, "I just wanted other people to know that things like this happen and I am sure it was from that because he was healthy as could be. He was walking with his walker, the day before outside and he felt fine." The clinical outcome of the event, heart stopped, was fatal. The clinical outcome of the event, could not swallow, was unknown. The patient died on 24Jan2021 due to "heart stopped." 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: Heart stopped

2/2/2021 994788 KY 74 F 1/25/2021 2/1/2021 Patient death on 2/1/2021 at 4:55am at hospital.

2/2/2021 994989 KY 56 F 1/10/2021 1/19/2021 Employee was found unresponsive in floor at her home. EMS arrived and person had expired.

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2/2/2021	995146		72	M	1/15/2021	1/24/2021	Narrative: Patient experienced cardiac arrest with PEA and a witnessed collapse upon arrival to the emergency department on 1/24/21. Patient received his first dose of the COVID vaccine on 01/15/2021 and felt poorly thereafter. He was describing shortness of breath to his wife and requiring 5L of O2 at home to maintain saturations in 80s, while he usually was on 3L to maintain saturations in the mid 90s. He had been oriented but more fatigued than normal and described bilateral shoulder pain (which was not new for him) as well as indigestion. Took Tylenol with some relief. He had decreased PO intake and less appetite. The patient's wife encouraged him to come to the hospital daily for a week prior to admission, but the patient did not want to because he felt his side effects were secondary to the vaccine. Symptoms: Resp Depression, Palpitations, Syncope & cardiac arrest Treatment: EPINEPHRINE 1 MG ONCE 3 rounds given ,CALCIUM CHLORIDE 1000 MG ONCE
2/2/2021	994913	TN	48	F	1/30/2021	1/31/2021	patient passed away 2 days after vaccine. patient had temperature, nausea, and vomiting after vaccine.
2/2/2021	994790	KY	58	F	1/31/2021	2/2/2021	Resident found unresponsive in room this am at approx. 9:30 am. Resident was observed eating breakfast around 8:45 am. Housekeeper reported seeing resident between breakfast and time found unresponsive. Resident had voiced no complaints. Code was initiated until EMS arrived and transported resident to hospital. Resident expired.
2/2/2021	993822			M			he got both doses then a few days later he died; This is a spontaneous report from a contactable consumer reporting for a friend's father. A male patient of an unspecified age received the second dose of bnt162b2 (BNT162B2) vaccine , via an unspecified route of administration on an unspecified date at single dose for Covid-19 immunisation . The patient medical history and concomitant medications were not reported. The patient received the first dose on an unknown date. The patient died few days after receiving the second dose of the vaccine on an unspecified date. It was not reported if an autopsy was performed. Information about lot/batch number has been requested.; Reported Cause(s) of Death: he got both doses then a few days later he died

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2/2/2021		994778	SC	97	F	1/22/2021	1/28/2021	Resident received the vaccine on 1-22-21 and she was diagnosed with COVID-19 during routine testing on 1-28-21. She didn't have any symptoms except feeling weak and she had a decrease in her appetite. She already had a poor appetite prior. She died on 2-2-21.
2/2/2021		994678	KY	80	F		1/4/2021	patient contracted COVID; patient contracted COVID; This is a spontaneous report from a contactable consumer. A non-pregnant 80-year-old female patient received two doses of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration, the first dose in 2020 and the second dose on 22Dec2020 11:00, both at a single dose for covid-19 immunization. Medical history included heart, diabetes, obesity. There were no concomitant medications. The patient did not have covid prior to vaccination. The patient contracted COVID on 04Jan2021 11:00. The patient was hospitalized for COVID-19 for 8 days. The patient underwent lab tests and procedures which included: Nasal Swab: negative on 24Dec2020, negative on 28Dec2020, negative on 31Dec2020, positive on 04Jan2021. Unspecified therapeutic measures were taken as a result of the event. The outcome of patient contracted COVID was fatal. The patient died on 12Jan2021. It was unknown if an autopsy was performed. The batch/lot number for the vaccine, BNT162B2, was not provided and will be requested during follow-up.; Reported Cause(s) of Death: patient contracted COVID
2/2/2021		994544	TX	84	F	1/31/2021	1/31/2021	The patient went home around 11 am on 1-31-21 after her vaccine and 15 minute observation period. She was eating breakfast after at home and complained to a neighbor that her teeth hurt and she was nauseated after eating. In the afternoon, she felt dizzy and had diarrhea accompanied with blood. Close to 9 PM, her son went to check on her. The patient was found on the floor--she was unresponsive and had purple lips. Her son called an ambulance and started chest compressions. The patient passed away at the hospital. The doctor has ordered an autopsy, and the results are pending.

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2/2/2021	994309	NY	87	M	1/15/2021	1/16/2021	Got vaccine on 1/15/21. He was tired right away, bedridden the next 3 days. He couldn't breathe so he was taken by ambulance on 1/18/21. He was in hospital for several days. put on remdesivir cocktail for 10 days. Slowly getting worse and died in hospital on 1/30/21.

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2/2/2021	993832	ME		U			<p>At the end of the conversation, caller stated that recently saw in (place name) that someone passed away 3 hours after receiving the injection.; This is a spontaneous report from a contactable nurse. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on unspecified date at single dose for COVID-19 immunization. Medical history and concomitant medication were not reported. Caller, calling on behalf of her sister who has pseudocholinesterase imbalance, would like to know if the Covid vaccine has any contraindication or interaction with succinylcholine. Caller stated that her and her sister are scheduled to receive the first dose of the vaccine this weekend. Caller stated that her sister had a severe reaction to succinylcholine and did not wake up for four days. Caller stated that her sister has to wear a medical bracelet because of this condition. Caller reported that her sister's son has the same severe reaction to succinylcholine. Caller also stated that when she was a director in the lab, she heard of a person passing away in the OR due to the same reaction with succinylcholine. At the end of the conversation, caller stated that recently saw in (state name) that someone passed away 3 hours after receiving the injection. It was unknow if autopsy was done. Information on the lot/Batch number has been requested.; Sender's Comments: The information currently available does not allow a medically meaningful assessment for the event "passed away" with unknown cause of death. 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: At the end of the conversation, caller stated that recently saw in (place name) that someone passed away 3 hours after receiving the injection.</p>

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2/2/2021	993823			M			died due to heart attack; This is a spontaneous report from a contactable consumer (reporting for her son-in-law) from the Pfizer-sponsored program Pfizer First Connect. A male patient of an unspecified age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 MRNA VACCINE), via an unspecified route of administration on an unspecified date at a single dose for COVID-19 immunization. The patients medical history and concomitant medications were not reported. The patient died due to heart attack on an unspecified date. The patient died on an unspecified date. It was unknown if an autopsy was performed. Follow-up (28Jan2021): This follow-up is being submitted to notify that the lot/batch number is not available despite the follow-up attempts made. Follow-up attempts completed. No further information is expected.; Reported Cause(s) of Death: died due to heart attack
2/2/2021	995520	ND	89	M	1/7/2021	1/22/2021	1-12-21 Resident is complaining of heart pain. Resident blood pressure is 228/105. 1-22-21 Dx UTI 1-13-21 His nurse called MD at approximately 0645, reported to him that it was reported to this nurse that resident has not slept in 2 days and night, has an increased blood pressure, reports severe pain in lower back, and appears to be uncomfortable Resident is able to verbalize his pain and where it is at, but is unable to explain the quality of the pain or give a number on the 0/10 pain scale.

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2/2/2021	993998	CA	92	F	1/13/2021	1/13/2021	<p>passed away; cough; This is a spontaneous report from a contactable consumer, the patient's daughter. A 92-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN), via an unspecified route of administration in the left arm on 13Jan2021 at 11:00 (at the age of 92-years-old) as a single dose for COVID-19 immunization. Ongoing medical history included nursing home resident, admitted to hospice on 13Jan2021 (prior to vaccination), and oxygen supplementation (due to low oxygen levels) from a few days prior to the vaccine (Jan2021). Other relevant medical history included congestive heart failure from Dec2020 and sulfa allergy. Prior to the vaccination, the patient was tested numerous times (as reported) for COVID-19 and was negative. There were no concomitant medications. The patient did not receive any other vaccines within four weeks prior to the vaccination. A few days before the vaccination, her oxygen level had gone down, and she had been placed on oxygen. Prior to receiving the vaccine, the patient was reported as being 'fine'. On 13Jan2021, the patient received the vaccine at 11:00. The patient coughed maybe 5 or 6 times and then dropped her head. Resuscitation was not performed as patient had a do not resuscitate (DNR) order. The patient passed away on 13Jan2021 at 13:05. The cause of death was not reported. An autopsy was not performed. The clinical outcome of the cough was unknown at the time of death. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow up.; Reported Cause(s) of Death: passed away</p>

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2/2/2021	996156	MN	58	F	2/1/2021	2/1/2021	Client came to nursing station about 2pm to report she "was not feeling well". Nurses took vital signs, then referred her to the vaccination clinic that was onsite. She was observed by vaccination team for a period of time. She reported shoulder pain radiating into shoulder blade in arm vaccine was received. Vaccination team offered ice pack to her, observed for a period of time, and released back to work. About 10pm that evening, she sent a text to another coworker that her pain was "off the charts" and that she had pain covering her whole left side of her body. She did not come to work in the morning and did not contact work. Well being check was performed at approximately 9am on 2/2/2021 and she was found dead in her home. 911 was immediately called and authorities took over the scene.
2/2/2021	995441	TX	94	M	1/25/2021	1/26/2021	The vaccine was given on Monday. Tuesday afternoon he developed weakness in both legs and could not stand up. This was a new development; he had neuropathy in one leg but he had been able to stand up and walk three hours before. He was helped to the bathroom. He said he felt better and might want to stand up again. He was helped to bed. He was found dead around 5:30 Wednesday morning. He was 94 years old and had a lot of medical conditions. No one has indicated his death had anything to do with the vaccine. I'm sure it's just a coincidence that he died so soon after receiving the vaccine
2/2/2021	996423	WV	81	M	1/4/2021	1/10/2021	Patient had a CVA and passed away suddenly 1/10/21
2/2/2021	996259	TX	72	M	1/19/2021	1/25/2021	Unknown. Was informed that the patient went to E/R on 1/25/21 (6 days after receiving vaccine. Died 1/29/21 (10 days after receiving vaccine).

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2/2/2021	995224	TX	92	F	1/14/2021	1/19/2021	Cardiac arrest; Pain on her upper right chest; Lot of pain in lower abdomen; Pain underneath arm; Thought it was muscle aches; A spontaneous report was received from a nurse concerning a 92-year-old, female patient who received Moderna's COVID-19 Vaccine (mRNA-1273) and developed upper right chest pain and underneath the arm, severe abdominal pain, muscle aches and cardiac arrest. The patient's medical history was not provided. Concomitant product use was not provided by the reporter. On 14 Jan 2021, approximately five days prior to the onset of the events, the patient received their first of two planned doses of mRNA-1273 intramuscularly in the arm for prophylaxis of COVID-19 infection. On 19 Jan 2021, the patient developed upper right chest pain and pain underneath the arm. They thought it was muscle aches. Sometime later, the patient developed a lot of pain in the lower abdomen. The called emergency services and an ambulance arrived but the patient then suffered cardiac arrest. Treatment for the event included tramadol. Action taken with mRNA-1273 in response to the events was not applicable due to the patient was died. The patient died on 19 Jan 2021. The cause of death was reported as cardiac arrest. Autopsy were not provided.; Reporter's Comments: Company Comment: This case concerns a 92-year-old female patient who experienced unexpected serious events of cardiac arrest, upper right chest pain and underneath the arm, severe abdominal pain, muscle aches. The event occurred 5 days after the administration of the first dose of the vaccine mRNA-1273 vaccine (Lot #: unknown, expiration date-unknown). Although a temporal association exist between the events and the administration of the vaccine, in the absence of critical details such as the patient's medical history, any diagnostic test or autopsy result, adequate evaluation and assessment cannot be established. Main field defaults to 'possibly related' for all events.; Reported Cause(s) of Death: Cardiac arrest
2/2/2021	996105	CA	95	F	1/23/2021	1/24/2021	patient received vaccine on Jan 23, 2021 passed away on Jan 24, she was already on hospice, so unclear if due to vaccine or other issues. Was at her baseline before and after vaccine per facility, had b'fast and passed away at noon on Jan 24

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2/2/2021		996086	CA	55	M	1/7/2021	1/19/2021	Pt received vaccine on 7 Jan. 2021 Twelve days later, on 19 January 2021, Pt developed symptoms of COVID (cough, sore throat, fever, myalgias), on 20 Jan, pt admitted to hospital for worsening symptoms. Pt tested positive for COVID 19. Pt admitted to ICU where pt had complicated hospital course to include ARDS secondary to COVID pneumonia, nonSTEMI, with biventricular heart failure, on multiple pressor, rhabdomyolysis with acute kidney injury, requiring CRRT. Pt was in hospital for 10 days; he passed away on 31 Jan 2021.
2/2/2021		995977	VA	51	M	1/19/2021	1/25/2021	Lethargy/alterd level of consciousness lead to hospital admission. Multiple interventions during hospitalization. Final hospital diagnoses: Acute respiratory failure with hypercapnia, acute pansinusitis.
2/2/2021		995825	NC	92	F	1/6/2021	1/13/2021	Client unexpectedly collapsed and passed away on 1/13/21 from suspected sudden cardiac death. Prior to her death, she was in skilled care for rehabilitation following hospitalization from 12/21-12/31/20 for an acute lower GI bleed. Her hospitalization and skilled care stay were complicated by delirium and she was being treated for delirium with olanzapine (Zyprexa) at time of death.
2/2/2021		995789	TX	65	M	1/28/2021	1/31/2021	The patient received the vaccine on the afternoon of Thursday, 1/28/21. He was observed for at least 30 minutes following administration of the vaccine with no reactions noted. He was found dead in his car on Sunday, 1/31/21. It is unknown if the vaccine contributed to his death.
2/2/2021		995649	OH	79	F	1/25/2021	1/29/2021	Cardiac arrest; Patient transported by EMS to hospital 11:00pm on 01/29/2021. Patient received vaccine on 01/25/2021. Patient expired 01/30/2021 within the hour into the new day after midnight on 01/30/2021. Patient was feeling well prior to and any chronic health conditions were well controlled. Sudden cardiac arrest 4 days after receiving the vaccine. Details given by patients husband/POA.
2/2/2021		995641	ND	89	M	1/6/2021	1/31/2021	Resident was hospitalized for confusion, and hypotension and increased weakness; resident proceeded to have a NSTEMI and died on 5th day in hospital on 1/31/2021.

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2/2/2021	995460	NH	85	M	1/7/2021	1/16/2021	Vaccine-1/7 Covid positive-1/10 Hospitalized-1/17 Deceased-1/25
2/2/2021	996291	AK	86	F	1/7/2021	1/29/2021	Death
2/1/2021	991677	IL	63	F	1/21/2021	1/30/2021	got up in the night and stated that she couldn't breath, ambulance was called, pt expired in route to hospital. *relayed to me by Facility staff RN.
2/1/2021	992154	MN	100	M	1/11/2021	1/25/2021	No adverse events reported post vaccine. 1 st dose on 1/11/21 by public health. Death 1/31/21 Patient was on hospice for gradual decline.
2/1/2021	992137	SC	74	M	1/19/2021	1/25/2021	6 days after vaccine developed bloody diarrhea. Thought to have ischemic colitis but negative evaluation. became hypotensive bradycardic placed on ventilator. Subsequently was poorly responsive and eventually coded once more and succumbed
2/1/2021	992082	GA	70	F	1/24/2021	1/25/2021	Resident was noted on 1/25 with an increased functional decline as she would not feed herself with utensils, but would eat finger foods if placed in her hand. She was started on Rocephin IM for possible infections. Labs had been obtained on 1/21/21, unremarkable for CBC and CMP. 75,000 colony count on urine. On 1/26/21 she was noted with right sided weakness and further decline. She was sent to Hospital for further evaluation. We were notified that she expired on 1/28/2021. Resident had been noted with a decline in function about 2 weeks earlier when she would not stand or transfer any longer. She was still responsive, taking meds, and feeding herself until 1/26/21. Further information on admitting diagnoses and progress notes from hospital have not been available to date.

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2/1/2021		991997	MN	71	F	1/28/2021	1/30/2021	Resident c/o nausea evening of 1/29 (nausea common for her post dialysis), had a large emesis at approx 2220, 0030 (unusual for resident to vomit)- received Zofran per order. Skin cool and damp, Blood sugar 147 (checked due to h/o diabetes and poor intake). At approx 230am Blood pressured checked and noted to be 52/29. Resident transferred to ER, intubated and transferred to higher level of care where she passed away on 1/30 at 736pm. Resident's medical notes indicated likely shock, cardiogenic in nature, sepsis (source unknown) along with a multitude of other co-morbidities that resident has.
2/1/2021		991859	IL	89	M	1/29/2021	1/29/2021	Per granddaughter's report, pt became very weak within hours of receiving the first dose of the Moderna COVID-19 vaccine and could not get out of bed the next morning without assistance, reported difficulty seeing, and did not recognize some family members. By Sunday, 1/31, pt was unable to be awakened, would not eat, and had low urinary output. Granddaughter reports that the morning of 2/1 he was awake and ate a small amount and seemed to be improving although still weak and unable to get out of bed. Granddaughter reported he died 2/1 around 10am in the morning.
2/1/2021		991849	MN	88	M	1/25/2021	1/27/2021	Congestion, Hypoxia, SOB, Tachycardia, Weakness. Started on O2 @ 3L, HOB elevated, Tylenol supp
2/1/2021		991622	MA	90	F	1/28/2021	1/29/2021	Death
2/1/2021		991216	KS	70	M	1/26/2021	1/28/2021	Vaccine given on 01-25-2021. Wife reported on 01-29-2021 that patient had a ran a fever on 01-26-2021, Was better on 01-27-2021. She found him dead when she came home work on the evening of 01-28-2021.
2/1/2021		991117	CA	90	F	1/28/2021	1/28/2021	Systemic: Other- pt had history of copd and DNR on file. approx 3 1/2hr after vaccine pt had sob and lowo2 sat, emergency services called, pt passed on their arrival.staff felt due to pt existing condition
2/1/2021		991080	MA	69	M	12/28/2020	1/6/2021	Patient sudden death reported by family. No further details available at this time.

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2/1/2021		991060	PA	88	M	1/27/2021	1/28/2021	Fever 101.1, unresponsive episode. Transferred to Hospital on 1/28. Diagnosis there was anemia and CHF, aware that he had vaccine day prior. Transfused with 2 units pRBC's. Transferred back to Nursing Home on 1/30 and passed away 0140 1/31/2021
2/1/2021		992209	AK	82	F	1/8/2021	1/30/2021	Death
2/1/2021		990780	MI	75	M	1/25/2021	1/28/2021	patient passed
2/1/2021		992063	WI	80	M	1/19/2021	1/29/2021	Patient received first dose of the COVID-19 Moderna vaccine on 1/19/2021 at an outside facility (no lot #, route, or site available to me in electronic charting). Pt began having hypoxia, SOB, and a dusky appearance of extremities on 1/29/2021 and was brought by EMS to our hospital. PT is a DNR and family had been looking into a hospice sign up due to dementia and general decline in the weeks prior to hospitalization. Pt tested positive on admission for COVID-19 via PCR test on 1/29/2021. Pt continued to have respiratory decline, was put on comfort care per wishes of family/advanced directives, and he passed away the evening of 1/30.
2/1/2021		990956	IL	91	M	1/12/2021	1/12/2021	Systemic: Other- Patient passed away
2/1/2021		992846	MT	82	M	1/29/2021	1/29/2021	Patient complained to wife of not feeling well in evening after the vaccination and expired at home during the night.
2/1/2021		991927	ND	86	M	1/5/2021	1/12/2021	Patient was found deceased at Nursing Home in his room 01/12/2021 at 5:25 AM.
2/1/2021		992237	MO	42	M	1/25/2021	1/29/2021	1/28/2021- Seen by FNP for indigestion, chest pressure and palpitations. EKG reviewed and referral made to Cardiology. 1/29/2021-1800 Presented to ED in cardiac arrest-onset PTA. Patient was found unresponsive by his wife at their home. The last known well was at 1530 when she called him on the phone. The patient was pronounced at ~1850.

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2/1/2021	995147		88	M	12/23/2020	1/20/2021	Death Narrative: Patient received the first COVID-19 dose on 12/23. Afterwards, patient complained of localized pain on L deltoid area where the vaccine was administered; his temperature was 98.1 F. On 12/26-27, staff reported that patient appeared more fatigued than usual and was shivering on 12/27, which seized after blanket was given. On 12/28, patient presented with fever (Tmax 100.2 F) and acetaminophen was administered for alleviation of fever. ADR was reported for the fever on 12/29. Patient continued to decline and was placed back on hospice care on 12/29; on 12/30. the symptoms reported on nursing note include erythema and pain on whole L arm. Lidocaine was applied. Patient's family and provider mutually agreed not to administer the second dose of vaccine. He continued to decline and was started on end-of-life care around 1/4 and passed on 1/20 1417.
2/1/2021	993112	CA	62	F	12/1/2020	1/1/2021	she was injected, sh stopped eating and talking, the doctor watched her for 2 days. had her transported to the hospital. i was told she had tested positive for COVID 2 times once at the home and once at the hospital. with in 2 DAYS at the hospital she wa on a ventilator 2 days later she died. i talked with the rehab center and confirmed she tested negative for COVID on Dec 27th 2020 and was given the Vaccine on the 29th Dec 202 was in the hospital 4 day later, was on a ventilator 4 days after that then died a few day later as her heart stopped beating. all the while i had POA and was not contacted by Hospital staff until after they had made the next step.
2/1/2021	993072	MN	64	F	1/27/2021	1/27/2021	Pt. presented to the ER with abd pain and septic shock. Pt. reported to feel ill shortly after receiving the vaccine.
2/1/2021	993028	KY	78	F	1/6/2021	1/9/2021	On 1/9/21-Diaphoresis, O2 90%, respirations 22, increased weakness, wheezing bilaterally. Send to ER for evaluation and treatment. She was sent to ER, where she was admitted for 2 days, then expired there on 1/11/21
2/1/2021	992884	KS	57	F	1/16/2021	1/17/2021	The next morning after vaccine, patient ran a fever, vomited, and was very tired. Mom laid her down to sleep and when she checked later, patient had passed away.

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2/1/2021	992734	KY	86	F	1/7/2021	1/24/2021	1st COVID immunization 1/7/2021, COVID positive results on 1/16/21, 1/24/21 O2 sats decreased to 78%, 1/24/21 received the Bamlanivimab infusion 50 ml/hr. 1/24/20 chest x ray 1/24/21 She was sent to hospital and admitted. 1/27/2021 Expired
2/1/2021	992677	MN	64	M	1/25/2021	1/26/2021	Low Grade Temp, Persistent low back pain, Projectile Vomiting.
2/1/2021	992599	CA	87	F	12/31/2020	1/3/2021	right arm redness
2/1/2021	992571	PA	75	M	1/29/2021	1/30/2021	Patient's wife called the physician's office with increasing SOB. MD advised that the patient go to the ED. While dressing, the patient became unresponsive, 911 called. Patient expired in ED.
2/1/2021	995165	GA	92	F	1/27/2021	1/30/2021	Died in sleep

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2/1/2021	992372	OR	73	F	1/8/2021	1/8/2021	This is a 73 year old female that received her 1st dose with Moderna vaccine on 1/8/21 at approximately 1600. Within one hour, the patient developed altered mental status and increasing weakness. She was transported to the hospital by the staff at her Assisted Living Facility for concern of a vaccine reaction. On admission, oxygen saturation was found to be 89% on room air, BP=137/86, HR=94. Labs were normal, with the exception of WBC=15 (leukocytes normal, chest xray clear, COVID test negative), and a detectable troponin=63. Head CT negative. Physical exam was only notable for 'slight superficial erythema over distal right forearm and dorsal hand. No significant edema.' The patient was treated for a possible allergic reaction to vaccine with NS bolus, methylprednisolone 125mg, famotidine 20mg, and aspirin 300mg PR. She was admitted for monitoring given continued altered mental status/weakness. The next day, she continued to show no improvement, so a head MRI was ordered. MRI showed " 1. Numerous acute cerebral and cerebellar infarcts involving both anterior and posterior circulations consistent with a central embolic source. 2. Minimal right parietal petechial hemorrhage. 3. Moderate atrophy and moderate nonspecific white matter signal abnormalities compatible with chronic microvascular ischemia " Neurology was consulted, who approved the start of aspirin and to continue DVT prophylaxis. The patient's advanced dementia and timeline preclude other intervention. The patient's status was DNR/DNI. The patient was discharged on hospice to her assisted living facility on 1/11/21 (with reports of continued somnolence). It was reported that date of death was 1/24/21.
2/1/2021	992347	OK	78	M	2/1/2021	2/1/2021	Death
2/1/2021	992342	AL	77	M	1/21/2021	1/30/2021	Shortness of Breath, decreased oxygen saturation, irregular heart rhythm, hypertension, Positive for COVID, bilateral pneumonia
2/1/2021	992238	MI	70	M	12/16/2020	1/5/2021	Tested positive for COVID19 on 12-30-2020, Admitted to Hospital on 1/5/2021 with active COVID, Patient died 1/29/2021.

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2/1/2021	992977	OH	84	F	1/20/2021	1/20/2021	spoke with patient husband on Saturday 1/23 and he said that she had been in the hospital. that she had had a stroke, the MD's at the hospital told him that it was not contributed to the vaccine and that they were unsure even if the stroke had occurred prior to the vaccine or after. spoke with him again on 1-29 and he stated that she had passed away on 1/25/21
1/31/2021	989006	VA	58	F	1/30/2021	1/30/2021	After being observed for approximately 20 minutes and patient walked to her car without assistance I was called to assess the patient in the parking lot for troubles breathing. EMS was called as I made my way outside. Upon my arrival patient was leaning out of the car and stating that she could not breath. She was able to tell me that she was allergic to penicillin. Oxygen was immediately placed on the patient with minimal relief. Lung sounds were coarse throughout. She then began to vomit about every 20-30 seconds. Epipen was administered in the right leg with no relief. Patient continued to complain of troubles breathing and vomiting. A second epipen was administered in the patients right arm again with no relief. A few minutes later patient was given racemic epinephrine through the oxygen mask. There appeared to be mild improvement in her breathing as she appeared more comfortable, but still complaining of shortness of breath and vomiting. When EMS arrived patient was unable to transport herself to the stretcher. When EMS and clinical staff transferred patient to the stretcher she became unresponsive. She appeared to still be breathing. She did not respond to verbal stimuli. Per ED report large amount of fluid was suctioned from the patients lungs following intubation in the ambulance. When patient arrived to the ED she was extubated and re-intubated without difficulty and further fluid was suctioned. At that time patient was found to be in PEA, shock was delivered. Shortly thereafter no cardiac activity was found and patient pronounced dead.

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1/31/2021		990034	TX	79	M	1/17/2021	1/31/2021	I helped facilitate scheduling for his COVID vaccine and received notification from his wife that he passed away unexpectedly this morning. She reported he had been experiencing a rheumatoid arthritis flare and was on steroids. His diabetes was not well controlled as a result. He did not have any reactions in the days immediately after the vaccine.
1/31/2021		989015	CT	69	M	1/26/2021	1/27/2021	Myocardial Infarction
1/30/2021		987636	GA	78	M	1/18/2021	1/21/2021	Legs started swelling and shortness of breath Thursday January 21 2021 Was rushed to hospital with kidney failure and fluid build up around lungs and entire body Blood pressure dropped and had multiple organ failure
1/30/2021		987789	MI	85	M	1/22/2021	1/23/2021	REC'D CALL FROM PT'S DAUGHTER, HER FATHER WAS VACCINATED ON 1/22/21, WOKE UP 1/23/21 WAS SHORT OF BREATH AND DIZZY. PT PRESENTED TO ED OF LOCAL HOSPITAL AND WAS ADMITTED, PT PASSED ON 1/25/21. DAUGHTER STATES THAT FAMILY AND DOCTORS AGREE THAT THE VACCINE DID NOT CONTRIBUTE TOWARDS PT'S DEATH, BUT FELT IT NEEDED TO BE REPORTED. PT'S DAUGHTER CONTACTED THIS RN AT LOCAL HEALTH DEPARTMENT TO REPORT TO VAERS.
1/30/2021		987663		85	M	12/31/2020	1/10/2021	Died
1/30/2021		988270	TN	90	M	12/28/2020	1/14/2021	Narrative: Symptoms: & death Treatment:
1/30/2021		991450			F			The patient developed left sided neck and trapezoid tightness and pain after receiving the moderna covid vaccine in her left shoulder. The injection site is non tender and does not show any erythema or tenderness. The tenderness is over the left trapezius and left lateral neck area. It also feel tight like a muscle spasm.
1/30/2021		987877	MI	86	M	1/14/2021	1/26/2021	REC'D CALL FROM PT'S SON, PT HAS BEEN ON HOSPICE CARE AND PASSED 1/26/21. DOES NOT BELIEVE THIS IS RELATED TO VACCINE ADMINISTRATION, BUT WANTED TO REPORT TO US.
1/30/2021		988369	IL	82	M	1/19/2021	1/21/2021	aspiration pneumonia/death

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1/29/2021	985367	KY	83	M	1/6/2021	1/18/2021	TESTED POSITIVE FOR COVID-19 1-7-2021, TRANSFERRED TO HOSPITAL ON 1-18-2021. HE READMITTED TO THE FACILITY ON 1-21-2021 WITH HOSPICE SERVICES AND EXPIRED ON 1-25-2021.
1/29/2021	986123	AZ		M	1/19/2021	1/24/2021	passed away-heart attack; This is a spontaneous report from a contactable consumer, the daughter of the patient from a Pfizer Sponsored program Pfizer First Connect. A male patient of an unspecified age received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 mRNA VACCINE; Lot Number: UNKNOWN), via an unspecified route of administration on 19Jan2021 as a single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. On 24Jan2021, the patient passed away due to a heart attack. It was not reported if an autopsy was performed. The lot number for the vaccine, BNT162B2, was not provided and will be requested during follow up.; Reported Cause(s) of Death: passed away-heart attack
1/29/2021	986063	UT	83	F	1/12/2021	1/16/2021	Resident was vaccinated on 1/13/21. Resident passed away on 1/16/21

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1/29/2021	985933			F	12/29/2020	12/30/2020	Died; Increased respirations (22 and labored at times); Pulse 105; 94% O2 on RA; Labored breathing at times; leukocytosis; elevated BUN; left lower lung congestion; elevated creatinine; Temperature of 102.0F; Redness on face; A spontaneous report was received from a nurse concerning a 92-year-old, female patient who received Moderna's COVID-19 vaccine (mRNA-1273) and experienced redness on face, increased respirations, labored breathing at times, temperature of 102F, pulse of 105, 94 percent O2, leukocytosis, elevated BUN, left lower lung congestion, elevated creatinine, and death. The patient's medical history, as provided by the reporter, included dementia and reduced mobility. No relevant concomitant medications were reported. On 29 Dec 2020, the patient received their first of two planned doses of mRNA-1273 intramuscularly for prophylaxis of COVID-19 infection. On 30 Dec 2020, the patient began to experience redness on her face, increased respirations (reported as 22 and labored at times), pulse of 105, and 94 percent oxygen saturation on room air. The patient had a fever of 102 degrees Fahrenheit. Laboratory tests revealed a negative influenza swab, elevated white blood cell count of 14.1, elevated BUN at 113, and creatinine 2.7. Chest x-ray showed mild, left lower lung infiltrate. On 31 Dec 2020, the patient went under hospice care per her family request.. Action taken with mRNA-1273 in response to the events was not applicable. The patient died on 01 Jan 2021, the cause of death was unknown.; Reporter's Comments: This case concerns a 92-year-old, female subject with medical history of dementia and reduced mobility, who experienced the serious unexpected events of death, respiratory rate increased, heart rate increased, oxygen saturation decreased, elevated BUN, elevated creatinine, left lung congestion and dyspnoea and the non-serious events of erythema and pyrexia. The events of respiratory rate increased, heart rate increased, oxygen saturation decreased, dyspnoea, erythema and pyrexia occurred 2 days after the first dose of the study medication administration, and the event of death occurred 4 days after the first dose of the study medication administration. Very limited information regarding the events is available at this time and no definite diagnosis or autopsy report have been provided. Additional information has been requested.; Reported Cause(s) of Death: Died

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1/29/2021		985814	OH	94	M	1/20/2021	1/21/2021	started having generalized weakness on 1/21/21, fatigued., nausea/vomiting. went to doctor on 1/25/21 with complaint of sore throat, cough, and felt congested. Went to ER on 1/25/21 with complaints of increased shortness of breath, worsening nausea and vomiting. started on oxygen for sats of 87%. admitted on 1/25/21. On 1/26/21 needed intubated, CXR showed worsening consolidative change right lung at right hilar level. Echocardiogram showed ejection fraction 35-40%, left atrium is moderately dilated.
1/29/2021		985715	FL	80	M	12/29/2020	1/2/2021	Patient received the vaccine on 12/29/20 and presented at the ER at the Hospital on 12/30/20 stating that he wasn't feeling well. It is stated that his health had declined over the past few weeks and currently on hospice. Visit was unremarkable. Patient stated that wanted to stop dialysis. Patient passed away on 01/02/2021.
1/29/2021		985501	OH	89	F	1/18/2021	1/22/2021	family states seemed short of breath since after the covid vaccine. Staff said beginning on 1/22/21 the patient seemed sluggish, more tired, and nausea noted. She stayed in her room more after the vaccine because worried about giving/getting COVID to others. was talking on the phone at 11:30 PM on 1/26/21 to staff person about temperature of room. at 12:15 AM on 1/27/21 staff noted not breathing, started CPR and called EMS. When EMS arrived they stopped the code because she was too long deceased.
1/29/2021		985449		87	F	1/27/2021	1/28/2021	Patient was an 87 y/o female admitted for septic shock. She was started on and eventually maxed on 3 pressors. CT abd showed colonic obstruction with dilatation of large and small bowel. Patient was made DNR in the ED. Palliative care consulted on case. Family opted for comfort care. Patient was asystole on monitor. No spontaneous breath/cardiac sounds ausculted. Patient did not withdraw to pain. Pupils fixed and dilated. She was pronounced and 1230 on 1/28/21
1/29/2021		985205	OH	75	M	1/25/2021	1/26/2021	Patient was feeling dizzy and under the weather after the vaccination. The following day he died in his sleep during a nap.

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1/29/2021		985004	MI	58	F	1/8/2021	1/27/2021	The week of 1/18/2021 The patient complained of Abdominal pain and called off work (we are also her employer) She was seen for constipation on 1/20/2021. Employee returned to work on 1/25/2021 Had occasional episodes during work where she would sweat and become tired but would rest until she felt better. On the Night of 1/27/2021 she was feeling fine no issues, later in the shift a co worker found her unresponsive, CPR was initiated but unsuccessful.
1/29/2021		984617	FL	98	F	1/16/2021	1/17/2021	Patient passed su hospital on 23Jan2021 stopped breathing; complained of not feeling well; had an inflamed gall bladder; This is a spontaneous report from a contactable consumer. A 98-year-old female patient received bnt162b2 (BNT162B2, PFIZER-BIONTECH COVID-19 VACCINE, lot number: EL8982 and expiry date unknown), via an unspecified route of administration on 16Jan2021 at single dose for covid-19 immunisation. The patient medical history was not reported. The patient concomitant medication reported as has received other medications (unspecified) within 2 weeks. The patient passed in hospital on 23Jan2021 with stopped breathing. Day after vaccine on 17Jan2021, the patient complained of not feeling well, went to hospital where was told she had an inflamed gall bladder. The events caused patient hospitalization for 4 days. The cause of death reported as stopped breathing. It was unknown if autopsy done. Prior to vaccination, the patient not diagnosed with COVID-19. The outcome of the event breathing arrested was fatal, outcome of the other events was unknown.; Reported Cause(s) of Death: Stopped breathing
1/29/2021		987029	NC	86	M	1/27/2021	1/28/2021	Resident passed away at 8:15 am on 1/28/21-found to be without pulse/respirations/DNR order in place.
1/29/2021		986200	NM	82	F	12/30/2020	1/15/2021	Death
1/29/2021		985451	KY	101	F	1/6/2021	1/24/2021	COVID-19 + 1/11/2021, EXPIRED ON 1-24-2021

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1/29/2021		987301	NC	87	F	12/28/2020	12/28/2020	My Mother was given the Covid Vaccine (1st Dose) on 12/28/2020. Later that night we received a call from the nursing facility that my Mother was having uncontrollable seizures and had to be transported to the nearby hospital. The ER doctor confirmed that my Mother had tested positive to Covid. She was treated for Covid and was on life support. A few days later we received a call that my Mother had a major stroke. She passed away on January 4, 2021
1/29/2021		986631	MI	87	F	1/14/2021	1/15/2021	Suspected myocardial infarction on 01/15/2021. Patient passed away on 01/15/2021.
1/29/2021		986901	NC	33	F	1/28/2021	1/28/2021	Patient received vaccine uneventfully with no acute concerns. Left clinic and by report went out with friends. Spoke to father on phone at or around 9:00 pm. Failed to show up to work and was found dead at home. Other details pending
1/29/2021		987533	CA	91	M	1/28/2021	1/29/2021	The patient was observed to be lethargic on 1/29/21 at 1515. BP-80/50, P-75, RR-27, T-100.1. He was given a bolus of NS 150 mlx2. and Rocephin 1 gram IM.
1/29/2021		987469	PA	89	M	1/26/2021	1/27/2021	emesis bright yellow in color, liquid BM, increased respirations
1/29/2021		988245		93	M	1/16/2021	1/17/2021	93 y/o with complex medical history (severe COPD on oxygen, diastolic CHF, CKD3, myelofibrosis, marginal zone lymphoma of spleen with recent progression and no active treatment, chronic anemia, afib, CAD, pulmonary artery hypertension, h/o bladder cancer, hypertension, hypothyroidism, h/o bilateral PE, sick sinus syndrome s/p pacemaker, h/o Hodgkin's disease). Has had multiple hospitalizations over the last 3 months for dyspnea, most recently in 12/2020. Enrolled in palliative care. Has had multiple transfusions (most recently 01/13/21) for his chronic anemia due to myelofibrosis, and recently started on darbepoetin. No documented history of anaphylaxis to medications or prior vaccinations. He received COVID19 vaccine (Moderna) on 01/16/21. He passed away suddenly at home on 01/17/21. Symptoms: & cardiac arrest Treatment:
1/29/2021		987126	IA	90	F	1/29/2021	1/29/2021	Patient died. Patient had been declining in health rapidly prior to receiving the vaccine

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1/29/2021	986948	GA	80	F	1/22/2021	1/24/2021	Cardiac arrest on 1/24/21 in the early morning hours then passed away on 1/25/21 around 1:51am in the hospital
1/29/2021	988246	FL	77	M	12/22/2020	1/26/2021	Narrative: See "Other Relevant History" in Section 6 above Symptoms: ElevatedLiverEnzymes & death, pneumonia, afib Treatment:
1/29/2021	986869	NY	79	F	1/3/2021	1/10/2021	Patient noted with respiratory distress on 1/10/2021, transferred to hospital via 911.
1/29/2021	986857	TX	66	M	12/28/2020	12/28/2020	Extreme bouts of nausea first few days after vaccine. Estimated that patient died at home within 3-4 days after receiving the vaccine. Last phone call to daughter expressed extreme nausea and seemed to have altered mental status. Found dead by daughter on 01/04/2021.
1/29/2021	986773	VA	67	M	12/31/2020	1/14/2021	Resident was vaccinated on 12/31/20. Then on 1/14/21 he tested positive for SARS-CoV-2 on routine surveillance PCR testing. Another resident on the same hall was COVID positive on 1/11/21. Results of the PCR test were obtained on 1/16/21. He appeared asymptomatic at that time. Given his COVID positive status, all aerosol generating procedures had to be stopped. Overnight on 1/16/21 into 1/17/21, he had the onset of acute respiratory failure and was transported to the hospital. Per notes, he was put on BiPAP for several hours, but his CO2 level did not improve. Per prior advance directives completed with the resident and his two brothers, he had DNR/DNI orders. The hospital physician spoke with his brother and the decision was made to move to comfort care. He was discharged to inpatient hospice and died around 4pm on 1/18/21. This outcome does not appear to be vaccine-related, but death from COVID-19 infection is listed as a reportable event following COVID-19 vaccination.
1/29/2021	986672	AZ	77	M	1/1/2021	1/15/2021	Patient tested Covid positive, cough, low oxygen levels, COVID Pneumonia, patient is now deceased

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1/29/2021	987513	VA	64	M	1/27/2021	1/27/2021	Note Text: Resident oxygen was going down to 74% during change of shift 3-11, oxygen initiated 3liters via nasal cannula per standing order want up to 84-86% NP notified, ordered Prednisone 20mg stat, Rocephin 1gram IM stat administered, Per NP statement if pt's condition worsening sent him to ER, continue monitoring pt and his oxygen going to 82% increasing distress. Notified Nurses supervisor, 911 was called pt left building at 1819 to Hospital alert oriented. Vs bp. 165/60, temp. 98.3,m pulse 109, res 22, O2. 82%. Resident father notified.
1/28/2021	982541	IL	81	M	1/22/2021	1/24/2021	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 perforation 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.
1/28/2021	982354		91	M	12/29/2020	1/23/2021	patient received COVID vaccine on 12/29/2020 and passed away on 1/23/2021
1/28/2021	982495	OK	65	M	1/15/2021	1/19/2021	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.
1/28/2021	982472	NJ	72	M	1/19/2021	1/20/2021	Worsening respiratory failure 1/20/2021 death 1/27/2021
1/28/2021	982417	KS	89	F	12/30/2020	1/7/2021	Resident tested positive for COVID on 1/7/2021.
1/28/2021	982370	KY	93	M	1/14/2021	1/16/2021	Patient died at hospital on j/16/2021 approximately 48 after receiving vaccination. Believe death related to fall at home prior to vaccination.

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1/28/2021	982218	MO	63	M	1/8/2021	1/13/2021	resident was on hospice, chronically ill w dementia, COPD, HTN, failure to thrive, passed away 1/13/21. Not certain injection related as he was declining already.
1/28/2021	981912	CA	67	F	1/23/2021	1/23/2021	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.
1/28/2021	981849	IN	92	M	1/13/2021	1/16/2021	died 01/16/2021
1/28/2021	981790	NC	82	M	1/26/2021	1/26/2021	Systemic: Other- Death
1/28/2021	981407	MO	48	F	1/6/2021	1/24/2021	Expired in sleep on 1/24/21
1/28/2021	981225	MD	59	F	1/27/2021	1/27/2021	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.
1/28/2021	982826	NV	40	M	1/21/2021	1/26/2021	Was at work on 1/26/21 and collapsed, no known complaints at the time. CRP was initiated immediately, transported to ER and pronounced dead
1/28/2021	981061	TN	87	F	1/22/2021	1/25/2021	Patient died 3 days post Moderna vaccine.
1/28/2021	981406	TN	71	F	1/15/2021	1/18/2021	Stroke, death

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1/28/2021	983193	KY	96	F	1/5/2021	1/5/2021	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.
1/28/2021	982517		66	M	1/11/2021	1/25/2021	patient received COVID vaccine on 1/11/2021 and passed away on 1/25/2021
1/28/2021	982890	MS	67	M	1/22/2021	1/25/2021	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.
1/28/2021	983919	FL	69	M	1/21/2021	1/1/2021	death
1/28/2021	983428	NE	68	F	12/24/2020	1/6/2021	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.

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1/28/2021	1296823	IL	50	F	1/26/2021	1/27/2021	According to facility representative on 1/27/2021 at approximately 7:15 am, pt was discovered not breathing with no pulse. Resident was pronounced dead at 7:44 am on 1/27/2021. Resident was previously tested positive for COVID-19 on 12/9/2020.
1/28/2021	983192	KY	89	F	1/5/2021	1/6/2021	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.
1/28/2021	983189	KY	92	F	1/5/2021	1/11/2021	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.
1/28/2021	983187	KY	92	M	1/5/2021	1/9/2021	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.

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1/28/2021	983184	KY	87	F	1/5/2021	1/11/2021	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.
1/28/2021	983173	KY	86	F	1/5/2021	1/21/2021	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.
1/28/2021	983169	KY	83	M	1/5/2021	1/8/2021	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.
1/28/2021	982942	AZ	57	M	1/21/2021	1/21/2021	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.
1/28/2021	982929	MD	61	F	12/30/2020	1/27/2021	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.

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1/28/2021	982891	KS	61	M	12/30/2020	12/30/2020	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.
1/28/2021	983766	NC	90	F	1/16/2021	1/21/2021	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.
1/27/2021	978529	WV	88	F	12/31/2020	1/15/2021	Patient developed Covid pneumonia dx 1/15/21, patient expired
1/27/2021	979081	CA	89	M	1/21/2021	1/22/2021	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.
1/27/2021	978959	CA	90	M	1/20/2021	1/20/2021	Presented with stroke like symptoms at 10:30, right sided weakness and slurred speech. 911 was call, patient was transported to hospital. Per ED note, patient experienced TIA which resolved, actue exacerbation of CHF. Patient was admitted. Discharge summary on 1/22 indicates same diagnosis, plan was home with hospice. Family notified hospital on 1/25 that patient had expired on 1/23 at home.

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1/27/2021	978876			M			<p>Autoimmune disease; This is a spontaneous report from a Pfizer-sponsored program from a contactable nurse. A male patient of an unspecified age received bnt162b2 (BNT162B2, Manufacturer Pfizer-BioNTech), via an unspecified route of administration, on an unspecified date, at single dose, for COVID-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient experienced autoimmune disease on an unspecified date. The patient died on an unspecified date due to autoimmune disease. It was unknown if an autopsy was performed. The information on the lot/batch number has been requested.; Sender's Comments: The information available in this report is limited and does not allow a medically meaningful assessment of the case. The company cannot completely exclude a causal relationship between the fatal autoimmune disease and suspect vaccine BNT162B2. Additional information regarding therapy duration, relevant medical history, underlying conditions, concomitant medications and detailed clinical course around the event onset will aid in comprehensive 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: Autoimmune disease</p>

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1/27/2021	978873	CA		U			died several hours after receiving a Covid-19 vaccine; This is a spontaneous report from a contactable consumer. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunization. The patient's medical history and concomitant medications were not reported. The patient died several hours after receiving a Covid-19 vaccine on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. The person had tested positive for the virus (Covid-19) in late Dec2020. Information on the batch/lot number has been requested.; Reported Cause(s) of Death: died several hours after receiving a Covid-19 vaccine
1/27/2021	978754	CO	93	F	1/26/2021	1/26/2021	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.
1/27/2021	978567	CA	82	M	1/12/2021	1/24/2021	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.
1/27/2021	978199	TX	71	M	1/6/2021	1/7/2021	Arm hurting used his oxygen at time of bed appeared vomited.
1/27/2021	977963	AL	81	M	1/26/2021	1/26/2021	(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.

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1/27/2021	977426	GA	70	M	1/20/2021	1/20/2021	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.
1/27/2021	977358	FL	99	M	1/8/2021	1/12/2021	cough congestive heart failure death
1/27/2021	977320	MI	83	F	1/25/2021	1/26/2021	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.
1/27/2021	977319	MI	46	M	12/29/2020	1/25/2021	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.
1/27/2021	979223	CA	77	M	1/5/2021	1/12/2021	Patient developed SOB but reported good O2Sats. Instructed on going to ER if worsening symptoms. Patient eventually expired on 1/22/21
1/27/2021	979155	AZ	65	M	1/3/2021	1/4/2021	Jan 3 vaccine administered, jan 4 started headaches, vomiting, pain in the back of the neck, Headaches, chills, loss of speech,
1/27/2021	983720		76	M	12/30/2020	1/20/2021	Death Narrative: Patient had Parkinson's and advanced Dementia. He was on a palliative care unit and a DNR.
1/27/2021	979101	IA	64	F	1/22/2021	1/25/2021	cardiac arrest - no warning signs

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1/27/2021		981945		96	M	1/8/2021	1/13/2021	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).
1/27/2021		981938		69	M	1/22/2021	1/23/2021	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.

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1/27/2021	980107	AL	90	F	1/12/2021	1/12/2021	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.
1/27/2021	979990	OH	63	M	1/7/2021	1/9/2021	sudden cardiac arrest
1/27/2021	979926	CA	81	F	12/30/2020	1/2/2021	Pt began experiencing shortness of breath 3 days after vaccine and expired later that day.
1/27/2021	979841	MT	64	M	1/7/2021	1/9/2021	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.
1/27/2021	979837	NV	76	M	1/25/2021	1/27/2021	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.
1/27/2021	983721		72	M	1/13/2021	1/23/2021	Death Narrative: Patient with Severe Dementia and on Hospice for end of life care.
1/27/2021	979796	TX	74	M	1/8/2021	1/10/2021	Patient went to hospital with COVID symptoms on 01/10/2021 and passed away on 01/22/2021
1/27/2021	979773	TX	75	F	12/30/2020	1/16/2021	Not sure if it has to do with the COVID vaccine but her caregiver reported to me today (1/27/202021) that she passed away on 01/16/2021 from a pulmonary embolism that was 18 days after vaccine

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1/27/2021	979533	AZ	82	F	1/19/2021	1/20/2021	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.
1/27/2021	979495	WY	83	M		1/19/2021	No adverse events noted Patient past away was notified by Public Health the record is at Vital Statistics
1/27/2021	979255	CA	65	M	1/18/2021	1/18/2021	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.
1/27/2021	979309	NV	51	F	1/22/2021	1/22/2021	Systemic: patient had no known medical history per supervisor

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1/27/2021	979818	TX	77	M	1/25/2021	1/26/2021	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
1/26/2021	974553	NY	66	F	1/20/2021	1/24/2021	RESIDENT RECEIVED THE VACCINE ON 1/20/2021, RESIDENT HAD BEEN MONITORED EVERY SHIFT AND HAS NOT EXHIBITED ANY SYMPTOMS. RESIDENT WAS OBSERVED TO BE UNRESPONSIVE WITH NO PRESENCE OF VITAL SIGNS ON 1/24/2021. RESIDENT WAS A FULL CODE, CPR INITIATED UNSUCCESSFULLY. BASED ON REVIEW WITH PRIMARY CARE PHYSICIAN AND MEDICAL DIRECTOR, THE RESIDENT HAD NOT HAVE ANY OTHER EVENTS PRIOR TO RECEIVING THE COVID VACCINE 4 DAYS PRIOR TO EVENT.
1/26/2021	974573	MI	95	M	1/5/2021	1/21/2021	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.
1/26/2021	974794	NE	89	F	1/12/2021	1/21/2021	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.

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1/26/2021	974833	ND	85	M	1/19/2021	1/24/2021	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.
1/26/2021	974855	MA	76	F	1/25/2021	1/25/2021	decedent 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
1/26/2021	974489	MI	80	F	1/19/2021	1/25/2021	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.
1/26/2021	975002	WI	88	M	1/12/2021	1/13/2021	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.
1/26/2021	974138	GA	78	F	1/18/1920	1/23/2021	DEATH- NO OTHER INFORMATION KNOWN
1/26/2021	974960	MI	53	M	1/5/2021	1/14/2021	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.

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1/26/2021		974454		78	F	12/28/2020	1/20/2021	Patient passed away 23 days after receiving COVID vaccine
1/26/2021		974443	TN	76	M	12/30/2020	1/2/2021	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.
1/26/2021		973889	CT	65	M	1/19/2021	1/19/2021	Systemic: Other- unknown, depot store received call from facility on 1/22 that patient passed around 7pm
1/26/2021		974172	WA	94	F	1/24/2021	1/25/2021	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.
1/26/2021		974033	IN	69	F	1/13/2021	1/26/2021	Resident deceased on 1/26 at 445am. No signs ahead of time.
1/26/2021		973957	NC	81	M	1/20/2021	1/24/2021	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
1/26/2021		975023	NY	76	M	1/25/2021	1/25/2021	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).

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1/26/2021		975223	TX	105	F	1/13/2021	1/14/2021	Systemic: Headache-Severe, Systemic: Other- Death 8 days after receiving the vaccine-Severe
1/26/2021		974422	MD	85	F	1/18/2021	1/19/2021	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.
1/26/2021		976112	CA	81	F	1/7/2021	1/10/2021	Resident expired on january 21, 2021
1/26/2021		976280	LA	75	F		1/21/2021	Death on 21 Jan 2021 - coroner called provider office
1/26/2021		975184	AR	89	F	1/14/2021	1/19/2021	The patient had a heart attack and died at a local hospital morning of 1/19/2021.
1/26/2021		976146	CA	86	F	1/7/2021	1/21/2021	Resident is asymptomatic
1/26/2021		976111		84	M	1/23/2021	1/24/2021	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.

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1/26/2021	976032	CA	92	M	1/22/2021	1/26/2021	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.
1/26/2021	975952		92	M	1/15/2021	1/16/2021	Narrative:
1/26/2021	975918		61	M	1/12/2021	1/17/2021	death Narrative:
1/26/2021	975762	ID	57	F	1/20/2021	1/24/2021	Pt deceased
1/26/2021	975735	AR	83	F	1/6/2021	1/25/2021	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
1/26/2021	975689	AR	97	F	1/6/2021	1/20/2021	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

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1/26/2021	975434	IL	67	M	1/2/2021	1/7/2021	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.
1/26/2021	975421	MO	60	M	1/7/2021	1/1/2021	Resident was discovered deceased in his apartment on 1/23/2021. Family had
1/26/2021	975382	FL	83	M	1/20/2021	1/22/2021	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.
1/26/2021	975206	OH	87	F	12/22/2020	1/22/2021	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 days on 1/21/21 for UTI: E. Coli
1/26/2021	975744	CA	87	F	1/7/2021	1/15/2021	See initial report

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1/26/2021	976166	CA	93	F	1/7/2021	1/18/2021	ASYMPTOMATIC
1/25/2021	970042			F	12/30/2020	12/30/2020	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

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1/25/2021	969636		65	M	1/5/2021	1/1/2021	<p>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.;</p> <p>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</p>

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1/25/2021	971559 TX	F	1/1/2021	1/19/2021	<p>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.</p> <p>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</p>
1/25/2021	970976 CT	95 F	1/20/2021	1/20/2021	<p>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.</p>
1/25/2021	970930 NC	91 M	1/9/2021	1/14/2021	<p>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.</p>
1/25/2021	970618 AR	89 F	1/22/2021	1/23/2021	<p>SON SAID PATIENT WAS FOUND UNRESPONSIVE AND CALLED 911</p>

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1/25/2021	970495	NC	77	F	1/13/2021	1/16/2021	Patient expired three days after receiving first dose of Moderna COVID-19 vaccine. The death certificate states cause of death is sudden cardiac arrest.
1/25/2021	970412	NY	79	F	1/18/2021	1/18/2021	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.

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1/25/2021	970043			U	12/10/2020		<p>Reported causes of death: Diarrhoea; This is a spontaneous report from a contactable healthcare professional via agency and a non-contactable consumer via a Pfizer-sponsored program Corporate (Pfizer) Social Media Platforms. An elderly patient of an unspecified age (also reported as were in their early to mid-60's) and gender received BNT162B2 (Pfizer-BIONTECH Covid-19 Vaccine), via an unspecified route of administration on 10Dec2020 at a single dose for COVID-19 immunisation. Medical history included pseudomembranous colitis (broad), gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), and noninfectious diarrhoea (narrow) . The patient's concomitant medications were not reported. The patient experienced diarrhoea on an unspecified date in 2020. It was reported that most of the deaths after the COVID-19 vaccine occurred within 24-48 hours after the shot. The write-ups that accompanied the reports furnished details about these sad fatalities, including the astonishing fact that some of the deceased had actually experienced and recovered from COVID-19 (raising questions about why they were vaccinated). It was also reported that the event was not life-threatening, did not result to a birth defect or permanent disability, did not require any office/ER/doctor visit, and did not require any hospitalization. The patient died on 10Dec2020. It was not reported if an autopsy was performed. The reported cause of death: diarrhoea. No follow up attempts are possible, information about the lot/batch number cannot be obtained.; Sender's Comments: Based on the available information the event diarrhea resulting in death is attributed to patients preexisting medical conditions including pseudomembranous colitis, gastrointestinal nonspecific symptoms and therapeutic procedures, and noninfectious diarrhea. However, based on a close chronological association (same day) contributory role of BNT162B2 (Pfizer-BIONTECH Covid-19 Vaccine) to event exacerbation 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</p>

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Investigators, as appropriate.; Reported Cause(s) of
Death: Reported causes of death: Diarrhoea

1/25/2021 969699 CA 83 M 1/19/2021 1/19/2021 Patient died.

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1/25/2021	969648			F	12/29/2020	12/30/2020	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

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1/25/2021	971562	NY		U			died; acute immune thrombocytopenia; This is a spontaneous report from two contactable consumers. A patient of unspecified age and gender received BNT162B2(lot number and expiration date not provided) via an unspecified route of administration on unspecified date at single dose for COVID-19 immunization. The patient's medical history and concomitant medications were not reported. The patient died after receiving the covid vaccine on an unknown date. The patient developed acute immune thrombocytopenia on an unknown date. It was unknown if autopsy was performed. The cause of death was unknown. The outcome of the event "died" was fatal and of the event " acute immune thrombocytopenia" was unknown. The reporter wondered if a platelets blood problem may lead to death and if who have a blood platelets condition like essential thrombocytosis should not risk taking the vaccine. Information on the lot/batch number has been requested.; Reported Cause(s) of Death: Died
1/25/2021	971676	IA	82	F	12/31/2020	1/1/2021	muscle aches-increased pain to lower back
1/25/2021	970162	MD		M			received the vaccine on Tuesday and was found dead at his kitchen table Wednesday afternoon; This is a spontaneous report from a contactable consumer. An 89 years old male patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) on an unknown date, at single dose, for COVID-19 immunization. Medical history and concomitant medications were not reported. The patient received the vaccine on Tuesday (unspecified date) and was found dead at his kitchen table on Wednesday afternoon (unspecified date). Cause of death was unknown. It was unknown if an autopsy was performed. Information about batch/lot number has been requested.; Reported Cause(s) of Death: received the vaccine on Tuesday and was found dead at his kitchen table Wednesday afternoon
1/25/2021	972394	CA	65	M	1/19/2021	1/20/2021	Died about 24 hours later
1/25/2021	971736	IA	88	M	1/21/2021	1/21/2021	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.

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1/25/2021	971176	OH	84	M	1/20/2021	1/21/2021	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.

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1/25/2021		973808		74	M	12/17/2020	12/31/2020	<p>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 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</p>

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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>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

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							<p>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>
1/25/2021	972890	NY	96	F	12/29/2020	1/10/2021	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.
1/25/2021	972836	MA	88	F	1/20/2021	1/24/2021	sudden death

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1/25/2021	972610	CA	65	M	1/21/2021	1/23/2021	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.~~
1/25/2021	972392	IL	78	F	12/30/2020	1/2/2021	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.
1/25/2021	972370		60	M	1/20/2021	1/21/2021	patient received covid vaccine and had a heart attack the next day and died

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1/25/2021	972148	MI	91	F	1/5/2021	1/5/2021	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.
1/25/2021	972113	TN	91	F	1/12/2021	1/13/2021	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.
1/25/2021	972092	CA	88	F	1/19/2021	1/19/2021	Reportedly, this employee's mother died the night of the vaccine. The details are not known at this time.
1/25/2021	971969	LA	72	F	1/15/2021	1/21/2021	brought by EMS to ED; seizures at home in bed; 6 Epi and 1 bicarb; no hx of seizure
1/25/2021	971813	AL	85	F	1/20/2021	1/20/2021	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
1/25/2021	972782	CA	81	F	1/18/2021	1/23/2021	Resident expired on 1/23/21 . Resident receiving care under hospice ,diagnosis Acute Myeloid Leukemia.
1/25/2021	972706	HI	88	F	1/22/2021	1/24/2021	I do not know which Covid-19 vaccine my mother had received the day before but she reported pain in her shoulder and arm to her caregiver on Sun morning Jan 24th. She did not report any problems with breathing. The caregiver gave her a massage before letting her take an afternoon nap. She was later discovered to be unresponsive and not breathing around 5pm. EMS declared her dead at 5:59pm and were already gone by the time I arrived at the caregiver's house around 6:05pm. She was still slightly warm. Her mouth was slightly opened and her left hand was in a fist. My father had been in the room the whole time and thought she was still sleeping.

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1/24/2021	969363	CA	79	F	1/14/2021	1/16/2021	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.
1/24/2021	969220	AR	65	F	1/15/2021	1/22/2021	Patient expired one week after vaccine. Cause of death unknown to me.
1/24/2021	968707	OH	91	F	1/19/2021	1/19/2021	My mother died 12 hours after the vaccine was administered
1/24/2021	968846	FL	81	F	1/22/2021	1/22/2021	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.
1/24/2021	969488	VA	90	F	1/11/2021	1/11/2021	Fatigue, muscle aches, vomiting, hematoma
1/24/2021	973814		95	M	1/12/2021	1/12/2021	DEATH Narrative:
1/24/2021	973820		74	M	12/23/2020	1/13/2021	Narrative: Symptoms: & DEATH DUE TO COVID 01/13/21 Treatment:
1/24/2021	969219	SC	61	M	1/23/2021	1/24/2021	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

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1/23/2021	968195	FL	82	M	1/12/2021	1/12/2021	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.

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1/23/2021		967830	CA	64	M	1/21/2021	1/21/2021	Patient was 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 (ceftraixone / 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. Code was the result of PEA secondary to hypoxia (<= 85%), despite being on the vent, with PEEP 12, FiO2 of 100%, with acidosis. After 95 minutes of active resuscitation, the patient was found not responsive to painful stimuli. There was no palpable pulse. No spontaneous respirations. No heart or breath sounds by auscultation. Absence of pupillary light reflex.
1/23/2021		967506	TX	73	M	1/16/2021	1/1/2021	Died within 5 days of receiving vaccine. Exact cause and day unknown.
1/23/2021		967399	TN	56	M	1/12/2021	1/21/2021	Sudden death
1/22/2021		964617	AK	77	F	1/8/2021	1/21/2021	Death, which I believe is unrelated to vaccination

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1/22/2021	965561		63	F	12/23/2020	12/26/2020	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

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1/22/2021	963902			M	12/28/2020	12/30/2020	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

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1/22/2021	965548		88	F	12/30/2020	12/30/2020	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

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1/22/2021		965547			M	12/28/2020	12/29/2020	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]), bupirone 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
1/22/2021		965256	GA	38	M	12/23/2020	1/19/2021	Found deceased, presumed while exercising
1/22/2021		964795	OH	67	M	1/13/2021	1/14/2021	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.
1/22/2021		964671	AK	100	M	12/18/2020	1/2/2021	Death on 1-5-21
1/22/2021		965910	DC	53	F	1/11/2021	1/22/2021	The employee found dead at her home on 1/21/2021.

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1/22/2021	964401	IL	56	M	1/12/2021	1/16/2021	Pt died 4 days after vaccine, no known reaction to the vaccination
1/22/2021	965564		58	M	1/14/2021	1/20/2021	Cardiac arrest Narrative:
1/22/2021	964724	AK	76	M	12/18/2020	1/15/2021	Death 1-15-21
1/22/2021	966888	NV	56	F	1/22/2021	1/22/2021	At 04:30 on 1/22/2021, facility was notified of employee death at home.
1/22/2021	965831	MI	74	F	1/18/2021	1/20/2021	Patient received her first dose of vaccine on Monday, January 18th. Two days later on Wednesday, January 18th, 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.
1/22/2021	965565	NE	84	M	12/26/2020	1/5/2021	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
1/22/2021	967240	MN	47	M	12/29/2020	1/6/2021	Patient unexpectedly died on 01/6/2020. No known signs or symptoms.

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1/22/2021		966856	KY	90	F	12/31/2020	1/4/2021	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 comfort care. Patient expired 1/13/21
1/22/2021		966844	NM	76	M	1/13/2021	1/14/2021	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.
1/22/2021		966359	IN	77	F	1/19/2021	1/20/2021	Headache, pain in the injection site, threw up. A few hours later she died.
1/22/2021		966178	WI	89	M	1/19/2021	1/22/2021	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
1/22/2021		965922	MD	75	M	1/19/2021	1/22/2021	We were alerted that the patient died at home.
1/22/2021		965860	OH	84	M	1/21/2021	1/21/2021	Patient had increased SOB while at home. EMS was called. Patient coded in the squad
1/22/2021		965807	GA	90	F	1/8/2021	1/9/2021	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

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1/22/2021	965571	MA	83	F	1/13/2021	1/20/2021	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 sl slurred speech. She was found deceased on

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1/21/2021	960429	OH		U	12/22/2020		expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar events for 8 patients. This report is for 4th of 8 patient. A patient of unspecified age and gender received the first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 22Dec2020 at single dose for covid-19 immunization. The patient's medical history and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. The patient died on an unspecified date. It was not reported if an autopsy was performed. Information about Lot/Batch number has been requested.; Sender's Comments: Current information is very limited for full assessment. The patient died following the vaccine use; further information such as patient demographics, complete medical history, concomitant medications, concurrent illness and event term details especially death cause and autopsy results are needed for meaningful evaluation. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate..Linked Report(s) : US-PFIZER INC-2021034595 same drug, reporter and event but different patient; Reported Cause(s) of Death: expired before receiving the second dose
1/21/2021	960841	NY	23	M	1/17/2021	1/19/2021	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.

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1/21/2021		961776	FL	69	M	1/13/2021	1/14/2021	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.
1/21/2021		961741	NY	89	M	1/20/2021	1/20/2021	The patient received his vaccine in the morning of 1/20/2021, while getting into car to go see his pulmonologist, about 2 hours after, collapsed, unresponsive with asystolic cardiac arrest. No symptoms prior other than chronic dyspnea. No allergic type symptoms reported by family. Asystole with EMS, no response to ACLS, presented to ED, DOA.
1/21/2021		961705	OH	60	M	1/18/2021	1/20/2021	approximately 3 hours prior to expiring the patient was experiencing forceful emesis. later was found to have expired, patient was comfort care only.
1/21/2021		961434	OH	94	M	1/20/2021	1/20/2021	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.
1/21/2021		961339	GA	45	F	1/18/2021	1/19/2021	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.

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1/21/2021	961010	PA	92	M	1/19/2021	1/19/2021	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.
1/21/2021	961845		77	M	1/12/2021	1/17/2021	Narrative:
1/21/2021	960752	LA	69	M	1/14/2021	1/14/2021	Extreme Fatigue

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1/21/2021		960552		78	F	1/18/2021	1/18/2021	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

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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.

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1/21/2021	960426	OH		U	12/22/2020		<p>expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar death events for 8 patients. This report is for 1st of 8 patient. A patient of unspecified age and gender received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 22Dec2020 at single dose for covid-19 immunisation. The patient medical history was and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. It was not reported if an autopsy was performed. Information about Lot/Batch number is requested.; Sender's Comments: Current information is very limited for full assessment. The patient died following the vaccine use; further information such as patient demographics, complete medical history, concomitant medications, concurrent illness and event term details especially death cause and autopsy results are needed for meaningful evaluation. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate..Linked Report(s) : US-PFIZER INC-2021034597 same drug, reporter and event but different patient;US-PFIZER INC-2021034598 same drug, reporter and event but different patient;US-PFIZER INC-2021034599 same drug, reporter and event but different patient;US-PFIZER INC-2021034600 same drug, reporter and event but different patient;US-PFIZER INC-2021034601 same drug, reporter and event but different patient;US-PFIZER INC-2021034603 same drug, reporter and event but different patient;US-PFIZER INC-2021034596 same drug, reporter and event but different patient.; Reported Cause(s) of Death: expired before receiving the second dose</p>

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1/21/2021		960460	IL	97	M	12/30/2020	1/7/2021	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

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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

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

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1/21/2021	960430	OH		U			<p>7 residents expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar events for 8 patients. This report is for 6th of 8 patients. A patient of unspecified age and gender received first dose bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on an unspecified date at SINGLE DOSE for covid-19 immunisation. The patient's medical history and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. It was not reported if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The event death is assessed as related to BNT162b2 vaccine and documented as such in the global safety database until sufficient information is available to allow an unrelated causality assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to regulatory authorities, Ethics Committees, and Investigators, as appropriate.,Linked Report(s) : US-PFIZER INC-2021034595 same drug, reporter and event but different patient; Reported Cause(s) of Death: 7 residents expired before receiving the second dose</p>

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1/21/2021	960428	OH		U	12/22/2020		<p>expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar events for 8 patients. This report is for 3rd of 8 patients. A patient of unspecified age and gender received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 22Dec2020 at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. It was not reported if an autopsy was performed. Information about Lot/Batch number is requested.; Sender's Comments: Based on the reasonable temporal association, the Company cannot completely exclude the possible causality between the reported death and the administration of COVID 19 vaccine, bnt162b2. However, more information on the patient's underlying medical condition, concomitant medications, patient's age group, clinical course and relevant lab tests would be helpful for the Company to make a more meaningful causality assessment. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RA, IEC, as appropriate.; Reported Cause(s) of Death: expired before receiving the second dose</p>

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1/21/2021	960427	OH		U	12/22/2020		<p>expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar events for 8 patients. This report is for 2nd of 8 patients. A patient of unspecified age and gender received the first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 22Dec2020 at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. It was not reported if an autopsy was performed. Information about Lot/Batch number is requested.; Sender's Comments: Current information is very limited for full assessment. The patient died following the vaccine use; further information such as patient demographics, complete medical history, concomitant medications, concurrent illness and event term details especially death cause and autopsy results are needed for meaningful evaluation. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.; Reported Cause(s) of Death: expired before receiving the second dose</p>

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1/21/2021	961848		76	M		1/9/2021	<p>Narrative: Was pt previously covid positive?- Yes. Initial- 10/27/2020, 11/29/2020, 12/22/2020 Are there any predisposing factors for patient experiencing adverse drug event?- Yes, patient had multiple co-morbidities including GI bleed, hepatitis congestion due to cardiac issues, treatment for PE, NSTEMI, or antibiotics for PNA, also on concurrent medications APAP, Atorvastatin, Mirtazapine and Duloxetine. Pt with 2 doses of covid-19 vaccine, second one on 01/08/2021, 2 days pre-death Any occurrence of an ADR at time of administration? Did not specify injection site issues, per RN admin note- Vaccine "administered without complications." Did patient recover from event? Not s/p dose on 01/08/2021. First dose given on 12/21/2021, LFTS increased ~01/01/2021, peaked on 01/03/2021 and were decreasing on 01/07/2021 Was there an ADR between observation period and date of death? No Did patient recover from event? No (01/08/2021 event, died 01/10/2021) Was patient hospitalized prior to vaccination? Yes, in between inpatient and nursing home Was patient hospitalized prior to death--was hospitalization attributable to ADE? Yes re-admitted to inpatient on 12/31/2020. GI bleed Is there an alternative cause of death? Yes, as noted above. Quite a complicated case with many comorbidities/concurrent medications as noted above. Primary Diagnosis: Upper GI Bleed in the death note from 01/10/2021</p>

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1/21/2021	960431	OH		U	12/22/2020		expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar death events for 8 patients. This report is for 7th of 8 patient. A patient of unspecified age and gender received first dose of bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration on 22Dec2020 at single dose for covid-19 immunisation. The patient medical history was and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. It was not reported if an autopsy was performed. Information about Lot/Batch number is requested.; Sender's Comments: Current information is very limited for full assessment. The patient died following the vaccine use; further information such as patient demographics, complete medical history, concomitant medications, concurrent illness and event term details especially death cause and autopsy results are needed for meaningful evaluation. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate..Linked Report(s) : US-PFIZER INC-2021034595 same drug, reporter and event but different patient; Reported Cause(s) of Death: expired before receiving the second dose
1/21/2021	963269	TX	87	F	1/4/2021	1/18/2021	Patient passed away on 01/18/2021
1/21/2021	962995	CA	61	M	1/15/2021	1/19/2021	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.

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1/21/2021	962307	SD	93	M	1/4/2021	1/4/2021	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
1/21/2021	967743	TX	77	M	1/19/2021	1/19/2021	Possible seizer, unknown at this time, aprox 1hr and 20min after vac given. Passed away aprox 2hrs after vac.
1/21/2021	963388	ND	88	F	1/5/2021	1/10/2021	Patient died unexpectedly 5 days after receiving vaccine (1/10/2021).
1/21/2021	963235	TX	94	F	1/4/2021	1/9/2021	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
1/21/2021	963016	PA	65	F	1/14/2021	1/15/2021	unknown. Event occurred after leaving vaccination site
1/21/2021	962966		80	F	1/14/2021	1/16/2021	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.

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1/21/2021		962940	WI	83	M	1/20/2021	1/20/2021	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.
1/21/2021		962318	KY	80	M	12/29/2020	1/19/2021	Called to schedule second vaccine and daughter reports that he died on 01/19/2021 with "COVID~~"
1/21/2021		963610	NM	63	M	1/14/2021	1/17/2021	Patient deceased on 01/17/2021
1/21/2021		962308	UT		F			died; This is a spontaneous report from a Pfizer-sponsored program. A contactable consumer reported that an 83-year-old female patient (reporter mother) received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection), via an unspecified route of administration on an unspecified date at single dose for covid-19 immunization. Medical history included hospice care and dementia. The patient's concomitant medications were not reported. The patient died one day after getting vaccine. She was reportedly in good health the day before receiving vaccine. She was on hospice, frail, but in good condition and checked by a hospice nurse the day before which she reported her in good health considering. She was with dementia but stable in her health. The reporter read investigating 23 deaths of people receiving vaccine in similar conditions. The patient died on an unspecified date. It was not reported if an autopsy was performed.; Reported Cause(s) of Death: died

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1/21/2021	962827		93	F	1/14/2021	1/14/2021	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.
1/21/2021	962325	VA	80	M	1/20/2021	1/20/2021	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.~~
1/21/2021	962390		81	M	1/10/2021	1/10/2021	Admitted to hospital after vaccination with Acute hypoxemic respiratory failure, Septic shock; Aneurysm of arteriovenous dialysis fistula; expired 1/16/2021

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1/21/2021		962714	AK	80	M	12/19/2020	1/10/2021	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.
1/21/2021		962716	ND	62	F	12/30/2020	1/19/2021	Patient deceased
1/21/2021		962764	AK	73	M	12/17/2020	12/21/2020	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.
1/21/2021		962784		88	M	1/9/2021	1/15/2021	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
1/20/2021		959356	MN	89	F	1/13/2021	1/14/2021	Pt passed away the day after the vaccine was given.
1/20/2021		958971	FL	84	M	1/13/2021	1/14/2021	Hemorrhagic Stroke, Right Basal Ganglion
1/20/2021		958069	FL	94	F	1/14/2021	1/19/2021	Started with cough, mild shortness of breath and feeling terrible in evening of 1/19.
1/20/2021		958072		57	F	1/16/2021	1/18/2021	Death 3 days after receiving 2nd dose of COVID vaccine, unknown if related to vaccine administration.

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1/20/2021	958228	IL	83	M	1/12/2021	1/18/2021	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 hyponatremia 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.
1/20/2021	958322	FL	62	M	1/19/2021	1/19/2021	Shaking and then became unresponsive
1/20/2021	958565	FL	71	M	1/11/2021	1/11/2021	Client's 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 experiencing 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.
1/20/2021	958745	CO	73	M	1/12/2021	1/14/2021	Resident was noted to have increased 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.
1/20/2021	958914	GA	87	F	12/30/2020	1/15/2020	Death on 1/15/2020
1/20/2021	958935	NC	92	F	1/19/2021	1/20/2021	Sudden Death within 24 hours of vaccine
1/20/2021	957799	VA	81	M	1/14/2021	1/15/2021	Presented to Urgent Care for weakness and confusion, transferred to ED, patient had a cardiac arrest and was unable to be resuscitated
1/20/2021	959729	MD	82	M	12/30/2020	12/30/2020	Per Nursing Staff- patient died within 24 hours of receiving the vaccine. patient has hospice. Please contact director of nursing for more details.

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1/20/2021	959179	CO	79	M	1/14/2021	1/17/2021	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.
1/20/2021	959747	MD	90	M	12/30/2020	12/30/2020	per staff at facility patient died 24 hours post vaccination. Please contact Director of Nursing for further details.
1/20/2021	959001	IL	55	M	1/15/2021	1/16/2021	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.
1/20/2021	959591	CO	70	M	12/22/2020	12/31/2020	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.

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1/20/2021	959568	CO	70	F	1/16/2021	1/19/2021	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.
1/20/2021	959272	KS	85	M	1/12/2021	1/15/2021	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.
1/20/2021	959167	AL	84	M	1/14/2021	1/16/2021	Patient received COVID 19 vaccine 01/14/2021. Patient died in his sleep 01/16/2021.
1/20/2021	959147	OH	84	F	12/28/2020	1/2/2021	Unknown as to any correlation with vaccine as this was a hospice patient that was already experiencing decline. Patient became Jaundice for approximately one week prior to expiring.

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1/20/2021	959079	CO	91	M	1/6/2021	1/9/2021	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.
1/20/2021	959929		70	M	1/17/2021	1/18/2021	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.

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1/19/2021	955390	AL	95	F	1/15/2021	1/16/2021	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.
1/19/2021	955959	NM	82	M	1/11/2021	1/18/2021	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.
1/19/2021	954780	MI	82	M	1/5/2021	1/13/2021	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.
1/19/2021	955261	MD	85	F	1/18/2021	1/19/2021	Death
1/19/2021	955425	MN	90	M	1/5/2021	1/15/2021	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
1/19/2021	955436		84	M	12/29/2020	1/5/2021	patient received vaccine 12/29. Unexpected death 1/5.

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1/19/2021	955532	NJ	51	F	1/12/2021		COVID 19 Vaccination administered by pharmacy staff. No adverse effect at the present time. Staff will continue to observe adverse reaction. Will continue to monitor. Patient at start of shift awake in the bed. Pt at 3am was on the commode leaned to the side. Patient body still warm to touch no pulse. Called for assistance Asap. Cpr started promptly. Cpr given patient on floor 911 arrived at the scene at 3:10am Cpr rotated Between Nursing and EMT on Scene. Cpr was given to patient for over 45 minutes. Patient was pronounced at the scene at 3:50am. Call placed to Pt family by supervisor on shift. MD to be notified. AT 3:00am, I was notified by the nurse that resident is unresponsive. Upon entering room, resident was sitting on the commode unresponsive with absent respiration and pulse. Resident lowered down on the floor with 4 person assist. CPR initiated, AED pads placed on chest with no shock indicated. 911 called and EMT and paramedics arrived around 3:10am. ACLS performed until code stopped and pronounced death at 3:48am. I called and notified family member of his demise and awaiting for family to call us back for funeral arrangements.
1/19/2021	955597	NE	50	M	1/13/2021	1/15/2021	Death

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1/19/2021	955879	OH		U	12/22/2020		<p>expired before receiving the second dose; This is a spontaneous report from a contactable nurse. This nurse reported similar death events for 8 patients. This report is for 5th of 8 patients. A patient of unspecified age and gender received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 22Dec2020 at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient expired before receiving the second dose on an unspecified date. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The limited information provided in this report does not allow a full assessment of the case. The event death with unknown cause is assessed as related to the suspect drug per company guidance. This case will be reassessed when additional information, particularly the clinical course before death, complete medical history and concomitant medication and autopsy report, becomes available.,Linked Report(s) : US-PFIZER INC-2021034595 same drug, reporter and event but different patient; Reported Cause(s) of Death: expired before receiving the second dose</p>

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1/19/2021		955880	OH		U	12/22/2020		passed unexpectedly; This is a spontaneous report from a contactable nurse communicated to a Pfizer colleague. This nurse reported similar death events for 8 patients. This report is for 8th of 8 patients. A patient of unspecified age and gender received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE) via an unspecified route of administration on 22Dec2020 at single dose for COVID-19 immunisation. The patient medical history and concomitant medications were not reported. The patient passed unexpectedly on an unspecified date. The patient died on an unspecified date. It was unknown if an autopsy was performed. Information on the lot/batch number has been requested.; Sender's Comments: The limited information provided in this report does not allow a full assessment of the case. The event death with unknown cause is assessed as related to the suspect drug per company guidance. This case will be reassessed when additional information, particularly the clinical course before death, complete medical history and concomitant medication and autopsy report, becomes available. The case will be reassessed if additional information becomes available. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory Authorities, Ethics Committees and Investigators, as appropriate.;Linked Report(s) : US-PFIZER INC-2021034595 same drug, reporter and event but different patient; Reported Cause(s) of Death: passed unexpectedly
1/19/2021		956994	CA		73 M	1/15/2021	1/15/2021	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.
1/19/2021		956225	CA		82 M	1/16/2021	1/16/2021	Systemic: Pt monitored by nursing for 30min after inj.pt was stable/no reaction.At ~1hr post inj pt was unresponsive.Pt was a hospice/dnr per director

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1/19/2021		954812	NY	86	F	1/15/2021	1/16/2021	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)
1/19/2021		957163	NJ	54	M	1/11/2021	1/11/2021	Resident received 1st on 1/11/21 at 12:10am (1/12/21) resident was found unresponsive. Code Blue, 911 called at 12:11am. FD and EMS arrived, resident pronounced at 12:51am.
1/19/2021		956962	NY	74	M	1/6/2021	1/19/2021	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
1/19/2021		956843	IA	71	M	1/17/2021	1/19/2021	Resident was found deceased in his bed at 7:15 am.
1/19/2021		956811	NJ	75	M	1/18/2021	1/18/2021	Resident was noted unresponsive, no respiration, no blood pressure, no pulse, code blue called according to facility protocol, resident is full code, CPR started, 911 called, arrived and took over from staff. Resident was pronounced dead at 1:16pm 1/18/21
1/19/2021		956761	NJ	94	M	1/13/2021	1/15/2021	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.

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1/19/2021		956458	MA	60	M	1/6/2021	1/14/2021	<p>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.</p>

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1/19/2021	956365	CA	81	F	12/21/2020	1/4/2021	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
1/19/2021	957116	HI	75	M	1/14/2021	1/18/2021	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?

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1/18/2021	953590	NY	82	M	1/5/2021	1/11/2021	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
1/18/2021	953129	KY	74	F	1/9/2021	1/18/2021	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.

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1/18/2021	952204	FL	75	M	12/30/2020	12/30/2020	Patient became sick 3 hours after the vaccine and was found deceased 1 day after his vaccination. He passed away in his sleep.
1/18/2021	952704	OK	79	M	1/14/2021	1/14/2021	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.
1/18/2021	952713	MO	64	M	12/30/2020	1/12/2021	Weakness, Low O2, death. Positive for COVID on 1/12/21, dies on 1/16/21
1/18/2021	952799	PA	79	M	1/5/2021	1/17/2021	On 1/17/2021 at 4:35 am resident found apneic and pulseless, at 4:40am death confirmed
1/18/2021	952881	MO	89	M	1/10/2021	1/11/2021	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.

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1/18/2021	954251		71	F	1/8/2021	1/12/2021	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.
1/18/2021	953754	NJ	74	F	1/6/2021	1/13/2021	patient suddenly developed pneumonia 7 days after vaccination and died the evening of developing pneumonia
1/18/2021	953785	FL	73	F	1/7/2021	1/16/2021	Death
1/18/2021	953858	TN	76	F	1/8/2021	1/13/2021	patient started to decline 1/10/2021, patient seen at facility by medical professional - patient deceased 1/13/2021
1/18/2021	953865	RI	99	M	1/14/2021	1/17/2021	REPORTING ONLY AS RESIDENT EXPIRED ON 1/17/2021 3 DAYS AFTER. S/S HYPOXIA/CONGESTED LUNG SOUNDS
1/18/2021	953922	MA	72	M	12/26/2020	12/27/2020	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.
1/18/2021	953348	AR	81	M	12/22/2020	12/24/2020	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.
1/18/2021	953183	PA	83	M	1/5/2021	1/11/2021	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

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1/17/2021		955256	FL	88	M	1/16/2021	1/16/2021	Patient was vaccinated in right arm. Within 5 to 10 seconds after vaccination, patient started clinching his hands tightly and became unresponsive. Patient was lowered to the floor and did not exhibit a pulse. CPR was initiated and 911 was called. An AED was used and healthcare professionals onsite continued compressions until the paramedics arrived.
1/17/2021		950935	CA		F	1/12/2021	1/15/2021	Resident expired
1/17/2021		950979	MI	81	M	1/14/2021	1/14/2021	Headache after dose was given at 10:00 a.m Died at after 7:30 pm the same night the dose was given.
1/17/2021		951101	CO	90	M	12/31/2020	1/3/2021	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.
1/17/2021		951688	AR	63	M	1/2/2021	1/17/2021	Resident expired 1/17/21
1/17/2021		951678	CA	75	M	1/13/2021	1/17/1921	Heart attack death medical test
1/16/2021		967749		83	M	1/12/2021	1/13/2021	Cardiac Arrest Narrative:
1/16/2021		950073	WI	63	M	1/15/2021	1/15/2021	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.

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1/16/2021	950057	AL	49	F	1/15/2021	1/15/2021	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
1/16/2021	949965		101	F	1/11/2021	1/13/2021	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.
1/16/2021	950441	CA	66	M	1/15/2021	1/15/2021	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.
1/16/2021	967747		73	M	1/13/2021	1/13/2021	Pt passed away evening of 1/13 - unknown reason currently Narrative:
1/16/2021	950893	PA	90	F	1/3/2021	1/7/2021	Death
1/16/2021	950108	KY	53	F	1/5/2021	1/12/2021	~~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.
1/15/2021	947841	MI	83	M	1/14/2021	1/14/2021	Patient had no immediate effects from the vaccine, but died approximately 8 hours after receiving first dose of vaccine.

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1/15/2021		946225	PA	70	F	1/14/2021	1/14/2021	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.
1/15/2021		946293	VA	51	M	1/7/2021	1/7/2021	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.
1/15/2021		946959	NC	83	M	1/14/2021	1/15/2021	Sudden death 18 hours post vaccine .
1/15/2021		947129	GA	101	F	12/23/2020	12/25/2020	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.
1/15/2021		947662	MN	84	M	12/30/2020	1/1/2021	Accelerated decline in condition with decreased input, decreased responsiveness, somnolence, and death
1/15/2021		948150	OH	84	M	1/8/2021	1/9/2021	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
1/15/2021		948164	MI	77	M	1/6/2021	1/8/2021	Abdominal pain, Headaches, chest pain, loss of appetite, confusion, elevated liver enzymes 1/8-1/15/21

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1/15/2021		948228	FL	78	M	1/12/2021	1/13/2021	Patient reportedly expired the day following receipt of the vaccine.
1/15/2021		948418	CO	37	F	1/7/2021	1/12/2021	Expired on 1/12/2021; unknown cause of death
1/15/2021		948428	LA	82	F	1/13/2021	1/14/2021	We got a call from a home health nurse Brandu Talamo, stating that the patient passed away.
1/15/2021		949474	CA	79	M	1/13/2021	1/14/2021	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.
1/15/2021		949523	CA	61	F	1/13/2021	1/15/2021	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.
1/15/2021		949630	HI	98	F	1/2/2021	1/3/2021	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.
1/15/2021		949657	DC	89	M	1/12/2021	1/13/2021	Veteran was found by family slumped over and unresponsive at the breakfast table on 1/13/21, had expired
1/15/2021		948181	MI	89	M			Death Chest pain; irreg heart rhythm; evening of vaccine; death on toilet on 1/13/21

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1/15/2021		947642	PA	66	M	1/7/2021	1/8/2021	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
1/14/2021		944732	WI	92	M	1/13/2021	1/14/2021	Resident found unresponsive and without pulse at 05:45am.
1/14/2021		944641	FL	83	F	1/12/2021	1/13/2021	Patient died on 1/21-2021
1/14/2021		943266	AZ	88	F	1/12/2021	1/12/2021	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.
1/14/2021		944439	KY	62	F	12/26/2020	1/3/2021	Resident expired on 1/2/21.

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1/14/2021	944595	FL	56	M	1/12/2021	1/12/2021	Cardiac arrest within 1 hour Patient had the second vaccine approximately 2 pm on Tuesday Jan 12th He works at the extended care community and was in good health that morning with no complaints. He waited 10-15 minutes at the vaccine admin site and then told them he felt fine and was ready to get back to work. He then was found unresponsive at 3 pm within an hour of the 2nd vaccine. EMS called immediately worked on him 30 minutes in field then 30 minutes at ER was able to put him on life support yet deemed Brain dead 1-14-21 and pronounced dead an hour or so later

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1/14/2021	944282	NY	70	M	1/5/2021	1/9/2021	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

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1/14/2021	943889	VA	75	M	1/8/2021	1/9/2021	No adverse reactions observed after administration of medication. Patient starting complaining of shortness of breath around 0500 the following morning. SP02 checked in the 80s. Patient expired 01/09/2021;
1/14/2021	943442	GA	68	M	12/30/2020	12/31/2020	Systemic: reported by staff patient expired under suspicious circumstances after receiving vaccine. Patient was on hospice, reported not expected to pass this soon; symptoms lasted 0 days
1/14/2021	943362	MI	73	F	1/13/2021	1/13/2021	Pt collapsed at home approx 5:30 pm and died
1/14/2021	943397	NJ	28	M	12/23/2020	1/11/2021	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.
1/14/2021	1349711	TN	77	M	12/22/2020	1/7/2021	Symptoms: & cardiopulmonary arrest Treatment: EPINEPHRINE 8 MG Unknown during code
1/14/2021	944365	KY	76	M	12/26/2020	12/30/2020	Resident expired on 12/30/20, dx cardiac arrest.
1/14/2021	1349910	KS	85	M	1/7/2021	1/7/2021	Symptoms: & Death
1/14/2021	967754		67	F	12/21/2020	1/5/2021	Death - unknown cause, no reported side effects Narrative: Unknown cause of death
1/14/2021	963167	DE	88	M	1/2/2021	1/4/2021	Narrative: Symptoms: & Cardiac Arrest; Death Treatment: EPINEPHRINE
1/14/2021	945603	KS	94	M	1/2/2021	1/8/2021	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.

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1/14/2021	945578	KS	72	F	1/2/2021	1/10/2021	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.
1/14/2021	945253	MD	83	F	1/13/2021	1/14/2021	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
1/14/2021	945247	PA	96	F	12/29/2020	1/5/2021	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
1/14/2021	945241	MD	71	F	1/13/2021	1/14/2021	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.
1/14/2021	944998	KY	88	F	1/4/2021	1/12/2021	On 1/11/21 noted with headache, nausea/vomiting, severe melaise. On 1/12/21 resident expired.

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1/14/2021	945642	CA	43	M	12/20/2020	1/14/2021	COVID-19 mRNA/Pfizer-BioNTech vaccine After 1st dose- arm soreness, nausea, sleepiness and headache for 24 hours After 2nd does- fever 101.0 oral, chills, headache for hours
1/14/2021	945642	CA	43	M	12/20/2020	1/14/2021	COVID-19 mRNA/Pfizer-BioNTech vaccine After 1st dose- arm soreness, nausea, sleepiness and headache for 24 hours After 2nd does- fever 101.0 oral, chills, headache for hours
1/13/2021	941811	LA	56	F	1/4/2021	1/11/2021	Resident began having fever on 1/11/21 @0600. VS= T- 102 B/P- 100/57 P- 112 RR- 24 O2 Sat 92% on RA. MD called. Rapid COVID Test was negative. CBC,CMP, U/A were ordered as well as CXR. Resident's condition declined. At 3:00pm resident started having respiratory distress and hypoxia O2 Sat 89%. Supplemental O2/mask @ 5LPM. Neb TX, EKG, and Rocephin 1 GM ordered. Condition worsened. Resident sent to nearest ER for evaluation. Later in the evening the staff AT Medical Center called to inform staff that resident had expired @ 2230 as a result of Respiratory Failure and Sepsis.

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1/13/2021	941215		90	F	1/6/2021	1/8/2021	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
1/13/2021	939845	IL	88	M	1/11/2021	1/11/2021	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.
1/13/2021	940602	TX	83	M	1/8/2021	1/10/2021	Patient received vaccine on 1/8/2021. On 1/9/2021 I checked on patient via phone for symptoms or problems and he reported none but mild soreness at injection site. On 1/10/2021 family friend called me to tell me that patient had expired at about 8:00 pm. Patient reportedly complained of "pain" unspecific and collapsed at home. Hospital reportedly told family that it appeared to be a "heart attack".

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1/13/2021	940822	GA	81	M	1/7/2021	1/8/2021	<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>
1/13/2021	940855	AR	79	F	1/12/2021	1/12/2021	<p>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.</p>

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1/13/2021	940866	SC	75	M	1/7/2021	1/9/2021	Patient was found "acting abnormal" on 1/9/2021 at 1215. VS HR 20-30's. EMS activated. EMS arrived and patient was found pulseless in PEA/ asystole, CPR and ACLS initiated and then transported to the MC. Unsuccessful resuscitation and expired on 1/09/2021 at 1348. Clinical impression Cardiopulmonary arrest.

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1/13/2021	940955	NY	66	F	1/11/2021	1/11/2021	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

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						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	
1/13/2021	942106	CA	54	M	1/8/2021	1/9/2021	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.
1/13/2021	942290	CA	89	F	1/4/2021	1/6/2021	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.

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1/13/2021	941743	NY	60	F	1/12/2021	1/13/2021	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.
1/13/2021	942040	IA	78	M	1/13/2021	1/13/2021	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.
1/13/2021	942072	VT	87	F	1/2/2021	1/5/2021	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.
1/13/2021	942085	KS	62	F	1/2/2021	1/8/2021	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.
1/13/2021	941561	MN	91	M	1/7/2021	1/8/2021	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.
1/13/2021	941607	IN	83	F	1/12/2021	1/13/2021	The patient passed away today, 1/13/2021. She was a hospice patient. She showed no adverse effects after receiving the vaccine on 1/12/2021. This morning she woke up as normal and during her morning shower she had a bowel movement, went limp and was non-responsive. The patient passed away at 7:45 am.

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1/12/2021	937434	MT	70	M	1/7/2021	1/11/2021	Pt expired due to possible cardiac arrest. Unsure if this was vaccine related.
1/12/2021	937186	AR	87	F	12/22/2020	12/24/2020	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.
1/12/2021	937152	AR	91	F	12/22/2020	12/24/2020	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.
1/12/2021	937127	AR	91	M	12/22/2020	12/28/2020	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.
1/12/2021	936738		89	M	1/6/2021	1/9/2021	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.
1/12/2021	938118	MI	51	F	1/5/2021	1/8/2021	on 1/8/2021 17:30 patient taken to ER, cerebellar hemorrhage, stroke, aneurysm
1/12/2021	937444	IL	86	F	1/11/2021	1/11/2021	Resident was found deceased at approximately 6pm in her apartment

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1/12/2021	936805	KY	25	M	12/22/2020	1/11/2021	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.
1/12/2021	963163		88	M	1/6/2021	1/8/2021	Narrative:
1/12/2021	937569	RI	62	M	1/2/2021	1/7/2021	patient reported expired 1/7/2021
1/12/2021	938097			U			died; This is a spontaneous report from a non-contactable consumer via a Pfizer-sponsored program. A patient of unspecified age and gender received bnt162b2 (PFIZER-BIONTECH COVID-19 VACCINE, via an unspecified route of administration on an unspecified date at single dose for covid-19 immunisation. The patient medical history and concomitant medications were not reported. It was reported the patient was a doctor, died after the vaccine with no apparent disease. It was not reported if an autopsy was performed. No follow-up attempts are possible. Information about lot/batch number cannot be obtained.; Reported Cause(s) of Death: Unknown cause of death
1/12/2021	937773	KS	85	M	1/2/2021	1/2/2021	Patient was sent to the ED due to significant hematuria. He was afebrile.
1/12/2021	938974	OH	88	M	1/6/2021	1/11/2021	Hospice Resident received first Covid 19 vaccine dose on 1/6/21. 1/7/21 resident had decreased appetite noted in am but ate 100% of meal at dinner. 1/9/21 resident had decreased appetite with emesis x 2, loose BM x 2. Call placed to hospice. 1/10/21 5:44 am resident able to take HS meds, ingest 2 cups of shake. No emesis or loose stool noted. 12PM nurse noted resident not eating meals but ingesting milkshake and medications without any problems. Hospice contacted for change in condition. 1:00 pm hospice ordered Phenergan 12.5 mg Q 6 hrs PRN. Labs to be drawn 1/11/21. Hospice notified POA. 1/11/21 12:24am Resident had blood in stool. Resident denies any pain, on 2L of O2 for comfort.

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1/12/2021	939050	NY	32	F	12/28/2020	12/29/2020	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.
1/12/2021	939270	HI	48	M	12/22/2020	12/31/2020	Sudden cardiac death
1/12/2021	937527	NH	44	F	12/23/2020	1/4/2021	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.
1/11/2021	934373	WV	82	F	1/9/2021	1/10/2021	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.
1/11/2021	934263	NM	92	M	12/30/2020	1/1/2021	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.
1/11/2021	934059	IA	99	F	1/8/2021	1/9/2021	Acute anterior MI with death

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1/11/2021		934050	KS	68	M	1/7/2021	1/8/2021	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.
1/11/2021		934507	MA	89	F	1/3/2021	1/5/2021	Resident died suddenly and expectantly on 01/05/2021
1/11/2021		933739	OH	54	F	1/8/2021	1/9/2021	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.
1/11/2021		935343	KS	89	F	1/8/2021	1/11/2021	There were no adverse reactions. Resident Died, she had a history of issues with her health prior to the vaccine.
1/11/2021		933578	NY	43	M	1/8/2021		Pronounced dead 1/9/2021 at 12:42. Received first dose of vaccine 1/8/2021
1/11/2021		933846	WV	91	F	1/2/2021	1/2/2021	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.
1/11/2021		934539	KY	68	F	1/8/2021	1/9/2021	Patient received COVID-19 (Moderna) vaccine from the Health Department on afternoon of January 8, 2021 and went to sleep approximately 2300 that night. Was found unresponsive in bed the following morning and pronounced dead at 1336 on January 9, 2021

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1/11/2021	934966	CA		F	1/2/2021	1/4/2021	<p>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.;</p> <p>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</p>

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							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
1/11/2021	935222	FL	73	M	12/30/2020	1/7/2021	Patient was reported to be deceased at home by law enforcement on 1/7/21
1/11/2021	935350	TX	81	M	12/31/2020	1/2/2021	Patient was found unresponsive at home with SpO2 20% 1/2/2021
1/11/2021	935511	SD	56	F	1/8/2021	1/9/2021	Patient received the 1st dose of Moderna and was found deceased in her home the next day.
1/11/2021	935767	CA	85	F	1/7/2021	1/10/2021	My mother was given Pfizer vaccine on Thursday and she died 3 days later yesterday on Sunday!!!
1/11/2021	935815	CA	63	M	1/5/2021	1/5/2021	Difficulty breathing, death.
1/11/2021	936043	CA	98	F	1/4/2021	1/5/2021	RESIDENT 1ST DOSE OF MODERNA VACCINE ADMINISTERED ON 01/04/2021 AT 8:30PM, RESIDENT FOUND UNRESPONSIVE ON 01/05/2021.

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1/11/2021	934968	CA	54	M	1/4/2021	1/4/2021	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

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						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
1/10/2021	964653		79 M	1/6/2021	1/7/2021	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.
1/10/2021	932346 NC		66 M	1/7/2021	1/8/2021	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
1/10/2021	932787 GA		70 F	1/8/2021	1/10/2021	RECIEVED VACCINE 1/8/21 EXPIRED UNEXPECTED 1/10/21, NO ADVERSE REACTIONS NOTED
1/10/2021	932898 PA		61 M	12/17/2020	12/23/2020	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.
1/10/2021	933090 CA		60 M	1/5/2021	1/5/2021	Patient died, I have a copy of his vaccination card

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1/9/2021	951518	WY	77	M	12/28/2020	1/4/2021	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:
1/9/2021	930912	NY	73	M	1/7/2021	1/8/2021	Diarrhea followed by death 24 hrs after vaccination

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1/9/2021	951519	MN	78	M	1/5/2021	1/5/2021	Narrative: Symptoms: Palpitations & Syncope Treatment: EPINEPHRINE 1 MG ONCE ,EPINEPHRINE 1 MG ONCE ,SODIUM BICARBONATE 50 ML ONCE
1/9/2021	956903		86	M	12/22/2020	12/27/2020	mi Narrative: patient with asymptomatic covid 19, covid positive 12/10/2020.
1/9/2021	956966		86	M	12/25/2020	12/25/2020	hypoxia, secretions,cough, dyspnea Narrative: ALS patient on hospice with ongoing history of aspiration pneumonia, receiving tube feeds. Developed increase in secretions, hypoxemia, temp and with recently noted clogged feeding tube.
1/9/2021	964629		64	M	12/17/2020	12/27/2020	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 patient 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.
1/9/2021	964636		81	M	12/17/2020	12/22/2020	Patient 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 lower extremity ischemic wounds with very poor potential to heal due to advanced peripheral vascular disease.

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1/9/2021	930910	HI	52	F	1/8/2021	1/8/2021	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.
1/8/2021	930487	NC	86	M	1/8/2021	1/8/2021	Medical doctor state patient has a acute cardiac attack
1/8/2021	929764	WA	45	M	12/28/2020	12/29/2020	The patient was found deceased at home about 24 hours after immunization. Date of Death:: 12/29/2020; estimated time of death 6:00pm
1/8/2021	928062	MA	85	M	1/5/2021	1/5/2021	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.
1/8/2021	928513	MI	72	F	1/5/2021	1/6/2021	Resident passed away in her sleep
1/8/2021	928933	IA	56	F	12/23/2020	1/8/2021	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
1/8/2021	929359	FL	76	M	1/6/2021	1/6/2021	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
1/8/2021	929997	WI	86	M	1/4/2021	1/5/2021	Patient received vaccine on 1/4/2021. He was in Hospice for CHF and renal failure, but was able to get up in his wheelchair and eat and take medications and talk. On 1/5/2021 am, he was noted to be very lethargic an could only mumble, could not swallow. No localizing neurologic findings. He was too lethargic to get up in chair.
1/8/2021	930154	OH	60	M	1/5/2021	1/8/2021	Notified today that he passed away. No other details known at this time.
1/8/2021	930466	LA	82	F	1/5/2021	1/5/2021	Fever, shortness of breath and chest pain that resulted in a heart attack a few hours after vaccination
1/8/2021	930876	TX	88	M	1/7/2021	1/8/2021	Death
1/8/2021	958443		1	F	12/24/2020	12/26/2020	death by suicide Narrative: death by suicide; 12/26/20, self inflicted gun shot wound; found deceased by family member

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1/8/2021		930431	CT		F	1/6/2021	1/8/2021	Cardiac event, 2 days after vaccination, patient expired.
1/7/2021		926462		91	M	12/28/2020	1/4/2021	Patient developed hypoxia on 1/4/2021 and did not respond to maximal treatment and passed way on 1/5/2021
1/7/2021		925556		81	M	12/30/2020	1/6/2021	Expired 1/05/2021
1/7/2021		925264	OK	77	M	12/31/2020		PT was found deceased in his home on 1/5/2021
1/7/2021		926269	MD	74	M	1/4/2021	1/5/2021	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
1/7/2021		926600	MO	65	M	1/4/2021	1/6/2021	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.
1/7/2021		926797	SD	93	M	12/31/2020	1/1/2021	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.
1/7/2021		927189	CA	74	M	1/7/2021	1/7/2021	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
1/7/2021		927260	WI	87	F	12/28/2020	1/6/2021	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.

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1/7/2021	926568		77	M	12/28/2020	12/30/2020	patient declined 12/30/2020 and was transferred to hospital where he did not respond to treatment and passed away 1/4/2020
1/7/2021	925154	FL	84	F	1/3/2021	1/4/2021	Deceased
1/6/2021	924456	CA	85	F	1/5/2021	1/5/2021	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.
1/6/2021	923993	NC	62	M	12/30/2020	1/2/2021	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.
1/6/2021	924186	MI	91	F	12/30/2020	1/3/2021	Resident expired 1/3/21
1/6/2021	924464	IA	61	F	1/5/2021	1/6/2021	coughing up blood, significant hemoptysis -- > cardiac arrest. started day after vaccine but likely related to ongoing progression of lung cancer

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1/6/2021	924664	HI	92	F	1/2/2021	1/5/2021	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.
1/6/2021	924126	MI	84	F	12/30/2020	1/1/2021	resident expired 1/1/2021
1/5/2021	921572	WI	87	M	12/29/2020	12/30/2020	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.

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1/5/2021	920368	IN	92	F	12/29/2020	12/30/2020	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

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1/5/2021	920545	SD	93	M	1/4/2021	1/4/2021	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.
1/5/2021	920815	KY	58	F	12/30/2020	1/4/2021	Found deceased in her home, unknown cause, 6 days after vaccine.
1/5/2021	920832	NY	104	F	12/30/2020	1/1/2021	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
1/5/2021	920326	IN	89	F	12/29/2020	12/30/2020	Redness and warmth with edema to right side of neck and under chin. Resident was on Hospice services and expired on 1.1.21
1/5/2021	921175	NJ	77	F	1/3/2021	1/3/2021	Resident received Covid Vaccine, noted after 30 mins with labored breathing BP 161/77, HR 116, R 38, T 101.4,
1/5/2021	921667	OH	39	F	12/29/2020	1/3/2021	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.

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1/5/2021		921768	WA	58	F	1/4/2021	1/4/2021	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.
1/5/2021		921880	VA	96	M	1/2/2021	1/2/2021	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
1/5/2021		922977	NY	71	M	12/21/2020	12/27/2020	Fever, RespDepression & COVID positive REMDESIVIR (EUA) 200 mg x1 then 100 mg daily
1/5/2021		921547	AR	65	M	1/2/2021	1/4/2021	DEATH ON 1/4/2021, RESIDENT RECIEVED VACCINE ON 1/2/20
1/5/2021		921481	OH	88	M	12/29/2020	1/1/2021	Vaccine given on 12/29/20 by Pharmacy. On 1/1/21, resident became lethargic and sluggish and developed a rash on forearms. He was a Hospice recipient and doctor and Hospice ordered no treatment, just to continue to monitor. When no improvement of codition reported, doctor and Hospice ordered comfort meds (Morphine, Ativan, Levsin). Resident expired on 1/4/2021
1/4/2021		919108	NY	100	F	12/22/2020	12/23/2020	Fever, Malaise
1/4/2021		918065	CA	64	M	12/30/2020	1/1/2021	1/1/2020: Residents was found unresponsive. Pronounced deceased at 6:02pm
1/4/2021		918388	FL	65	F	12/30/2020	1/1/2021	Resident found unresponsive without pulse, respirations at 04:30 CPR performed, expired at 04:52 by Rescue

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1/4/2021	918418	FL	65	M	12/30/2020	1/1/2021	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.
1/4/2021	918518	NE	50	F	12/31/2020	12/31/2020	syncopal episode - arrested - CPR - death
1/4/2021	919537	MN	96	F	1/3/2021	1/3/2021	Resident exhibited no adverse events during 30 minute monitoring following vaccine administration. Resident found without pulse at 1900.
1/4/2021	918487	MI	94	M	1/2/2020	1/4/2021	Two days post vaccine patient went into cardiac arrest and passed away.
1/3/2021	917793	AR	78	F	12/22/2020	12/29/2020	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.
1/3/2021	917790	AR	90	F	12/22/2020	12/29/2020	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.
1/1/2021	917117	AR	82	M	12/22/2020	12/28/2020	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.

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12/31/2020	915682	KY	85	F	12/30/2020	12/30/2020	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
12/31/2020	915562	KY	88	F	12/30/2020	12/30/2020	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
12/31/2020	915880	MT	99	M	12/30/2020	12/30/2020	Patient died within 12 hours of receiving the vaccine.
12/31/2020	915920	OH	96	F	12/28/2020	12/28/2020	Resident received vaccine in am and expired that afternoon.
12/30/2020	913733	PA	85	F	12/29/2020	12/29/2020	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.
12/30/2020	914604	MI	74	M	12/16/2020	12/20/2020	Spouse awoke 12/20 and found spouse dead. Client was not transferred to hospital.
12/30/2020	914621	IA	89	F	12/22/2020	12/27/2020	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.
12/30/2020	914690	CA	83	F	12/23/2020	12/24/2020	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.
12/30/2020	914805	IL	63	M	12/28/2020	12/29/2020	RESIDENT CODED AND EXPIRED

<i>RECVDATE</i>	<i>VAERS_ID</i>	<i>STATE</i>	<i>AGE_YRS</i>	<i>SEX</i>	<i>VAX_DATE</i>	<i>ONSET_DATE</i>	<i>SYMPTOM_TEXT</i>
12/30/2020	914895	NE	78	M	12/28/2020	12/30/2020	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)
12/30/2020	914917	IL	63	M	12/19/2020	12/23/2020	Death by massive heart attack. Pfizer-BioNTech COVID-19 Vaccine EUA
12/30/2020	914961	KY	88	F	12/30/2020	12/30/2020	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
12/30/2020	914994	KY	90	F	12/30/2020	12/30/2020	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
12/29/2020	913143	TX	84	F	12/29/2020	12/29/2020	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.
12/28/2020	910363	CA	84	M	12/23/2020	12/26/2020	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.
12/25/2020	909095	CO	66	M	12/23/2020	12/25/2020	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