

Search Results

From the 10/1/2021 release of VAERS data:

Found 53 cases where Location is New Hampshire and Vaccine is COVID19 and Patient Died

Case Details

This is page 4 out of 6

Result pages: prev 123456 next

VAERS ID: <u>1139056 (history)</u> **Vaccinated:** 2021-03-11 **Form:** Version 2.0 **Onset:** 2021-03-15

Age: 60.0 Days after vaccination: 4

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-03-26

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA	-/2	LA/SYR

Administered by: Public Purchased by: ?

Symptoms: Cellulitis, Death, Rash

SMQs:, Anaphylactic reaction (broad), Hypersensitivity (narrow), Drug reaction with eosinophilia

and systemic symptoms syndrome (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 2021-03-25
Days after onset: 10
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: *****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

Current Illness: No

Preexisting Conditions: Managed high blood pressure

Allergies: No

Diagnostic Lab Data: CDC Split Type:

Write-up: ****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.

 VAERS ID:
 1187918 (history)
 Vaccinated:
 0000-00-00

 Form:
 Version 2.0
 Onset:
 2021-04-05

 Age:
 15.0
 Submitted:
 0000-00-00

 Sex:
 Female
 Entered:
 2021-04-09

Location: New Hampshire

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA	- / UNK	-/-

Administered by: Private Purchased by: ?

Symptoms: Cardiac arrest, Intensive care

SMQs:, Torsade de pointes/QT prolongation (broad), Anaphylactic reaction (broad), Arrhythmia related investigations, signs and symptoms (broad), Shock-associated circulatory or cardiac conditions (excl torsade de pointes) (narrow), Acute central respiratory depression (broad), Cardiomyopathy (broad), Respiratory failure (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 2021-04-06
Days after onset: 1
Permanent Disability? No

Recovered? No

Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: levothyroxine

Current Illness:

Preexisting Conditions: Trisomey 21, Atrioventricular canal s/p repair, hypothyroidism, asthma, obstructive sleep apnea, cervical spine instability, hypotonia, scoliosis, feeding difficulties, renal dysplasia, autism, chronic constipation, bronchopulmonary dysplasia, mixed conductive and sensorineural hearing loss, binocular vision disorder, gastroesophgeal reflux,

Allergies: Cefdinir, Sulfa, Ex-Lax, NSAIDS

Diagnostic Lab Data:

CDC Split Type:

Write-up: 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

VAERS ID: <u>1198617 (history)</u> **Vaccinated:** 2021-02-23 **Form:** Version 2.0 **Onset:** 2021-02-23

Age: 88.0 Days after vaccination: 0

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-12

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA	028L20A / 1	RA / UN
COVID19: COVID19 (COVID19 (MODERNA)) / MODERNA	023M20A / 2	LA / UN

Administered by: Senior Living Purchased by: ?

Symptoms: Chills, Death, Decreased appetite, Diarrhoea, Dizziness, Fatigue, Injection site pain, Pyrexia

SMQs:, Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Pseudomembranous colitis (broad), Extravasation events (injections, infusions and implants) (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (narrow), Vestibular disorders (broad), Noninfectious diarrhoea (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 2021-03-06
Days after onset: 11
Permanent Disability? No

Recovered? No Office Visit? Yes ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: 1) Spironolacton-E-HCTZ 25-25 Tab (Daily) 2) Pravastatin Sodium 10 MG Tab (Daily) 3) Metoprolol Tartrate 50 MG Tab (Twice Daily) 4) Lorazapam 0.05 MG Tablet (As

Needed) 5) Bayer 6) D3 **Current Illness:** None

Preexisting Conditions: 1) High Blood Pressure (Medicated For) 2) High Cholesterol (Medicated

For)

Allergies: None

Diagnostic Lab Data: Patient was seen by doctor and spoke with doctor on phone with no tests and/or laboratory results that I'm currently aware of.

CDC Split Type:

Write-up: 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

VAERS ID: <u>1219577</u> (history) **Vaccinated:** 2021-03-26

Form: Version 2.0 **Onset:** 2021-03-27

Age: 84.0 Days after vaccination: 1

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-16

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL9269 / 1	LA / IM

Administered by: Senior Living Purchased by: ?

Symptoms: <u>Blood creatinine increased</u>, <u>Blood potassium increased</u>, <u>Blood urea increased</u>, <u>Condition aggravated</u>, <u>Dyspnoea</u>, <u>Full blood count</u>, <u>General physical health deterioration</u>, <u>Hypotension</u>, <u>International normalised ratio increased</u>, <u>Laboratory test abnormal</u>, <u>Metabolic function test</u>, <u>Unresponsive to stimuli</u>, <u>White blood cell count increased</u>

SMQs:, Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Liver-related coagulation and bleeding disturbances (narrow), Anaphylactic reaction (narrow), Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Neuroleptic malignant syndrome (broad), Retroperitoneal fibrosis (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Hypotonic-hyporesponsive episode (broad), Chronic kidney disease (broad), Tumour lysis syndrome (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Dehydration (broad), Hypokalaemia (broad)

Life Threatening? No

Birth Defect? No

Died? Yes

Date died: 2021-03-30
Days after onset: 3
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Atorvastatin 40, Cholecalciferol, MVI, Omeprazole, Polytehylene Glycol powder, Potassium Chloride ER 20 MEQ, Senna, Setraline, Spironoloctone, Torsemide, Warfarin 4mg, Colace.

Current Illness: 3/15 Adm with deconditioning, acute/chronic CHF, severe mitral valve stenosis, left atrial thrombus, A-fib. 3/25 Adm - ADL dysfunction, deconditioning, CHF, severe mitral valve stenosis.

Preexisting Conditions: Mitral valve disease, mitral valvuloplasty-1998. Tachycardia and Bradycardia, Pacemaker-2002. Pulmonary hypertension, Tircuspid valve regurgitation. GERD, Dyslipidemia, HTN, Insomia, Depression.

Allergies: Codeine, Hydrocodone, Morphine

Diagnostic Lab Data: 3/27/2021- CBC/BMP, INR. WBC- 15.93, BUN- 61, Crea- 1.95, K+ 5.2, INR

5.3. Sent to ER with hypotension and abnormal labs. 82/50mmHg, Pulse of 61.

CDC Split Type:

Write-up: 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.

VAERS ID: <u>1219816 (history)</u> **Vaccinated:** 2021-02-25 **Form:** Version 2.0 **Onset:** 2021-03-23

Age: 63.0 Days after vaccination: 26

Sex:MaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-16

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	- / 1	-/-

Administered by: Senior Living Purchased by: ?

Symptoms: Aspiration, Barium swallow abnormal, Blood creatinine normal, Blood urea increased, Cardiomegaly, Chest X-ray abnormal, Condition aggravated, Death, Decubitus ulcer, Dyskinesia, Dysphagia, General physical health deterioration, Hyperhidrosis, Lung infiltration, Osteoarthritis, Prealbumin, Rib deformity, Scoliosis, Spinal osteoarthritis, Weight decreased, White blood cell count normal

SMQs:, Acute renal failure (broad), Cardiac failure (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Dyskinesia (narrow),

Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Chronic kidney disease (broad), Arthritis (narrow), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Hypoglycaemia (broad), Infective pneumonia (broad)

Life Threatening? No

Birth Defect? No

Died? Yes

Date died: 2021-03-30
Days after onset: 7
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Proscar, Keppra, Synthroid, Magnesium Oxide, Tamsulosin, Prosource powder, Vitamin C

Current Illness: Worsening bilateral hip pressure wounds, primary care giver at home unable to and is having difficulty providing care at home due to resident overall decline.

Preexisting Conditions: Dysphagia, Epilepsy, Alzeimer''s disease, Trisomy 21, Hx of UTI, Benign Prostatic Hyperplasia, Hypothyroidism, abnormal posture, Hx of pneumonia and at risk of aspiration.

Allergies: Ciprofloxacin

Diagnostic Lab Data: 2/25 Diet texture downgraded to puree. 2/28 T-100.0 diaphoretic, intermittent jerking of BUE. 3/2 Significant weight loss, he has total of 30 lbs weight loss in the past year. 03/01 WBC- 7.31, BUN- 17, CREA- 0.79. 3/01 CXR- The cardiac silhouette is mildly enlarged. Mild S-shaped scoliosis. Moderate diffuse spondylosis. Chronic deformities of the left ribs. There are changes of degenerative joint disease. Bilateral basilar air space infiltration of the lower lobes. 3/10 CXR- Bilateral lower lobe infiltrates. Started on IM Rocephin x 7 days. Increasing difficulty swallowing. 3/10: wbc- 6.87, bun-17, Crea- 0.74, Pre-albumin- 21.2. 3/11 WBC- 5.57, BUN-16, CREA- 0.80. MBS done showed sever dysphagia and aspiration with all consistency. Hospice eval. 3/20- WBC-10.28, BUN- 22, CREA- 0.79. 3/22 Admitted to Hospice. 3/21 O2 at of 70% AP- 120, R-50, suipplemental O2 initiated. 3/23-Resident passed.

CDC Split Type:

Write-up: Resident passed on 3/23/2021. Resident continues to decline medically. 2/22 He was admitted to nursing home with worsening pressure injury.

VAERS ID: <u>1220012</u> (history) **Vaccinated:** 2021-01-08 **Form:** Version 2.0 **Onset:** 2021-03-22

Age: 90.0 Days after vaccination: 73

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-16

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL3248 / 1	LA / IM
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EN5318 / 2	LA / IM

Administered by: Senior Living Purchased by: ?

Symptoms: Blood creatinine normal, Blood thyroid stimulating hormone decreased, Blood urea normal, Death, Diet refusal, General physical health deterioration, Haemoglobin decreased, Herpes zoster, Hypophagia, Lethargy, Red blood cell count decreased, Refusal of treatment by patient, Weight decreased, White blood cell count normal

SMQs:, Haematopoietic erythropenia (narrow), Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Hypothyroidism (broad), Hyperthyroidism (broad), Hypoglycaemia (broad), Opportunistic infections (broad)

Life Threatening? No

Birth Defect? No

Died? Yes

Date died: 2021-03-22
Days after onset: 0
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Aliskiren Fumarate, Citalopram Hydrobromide, Donezepil, HCL, Isosorbide Mononitrate ER, Miralax, Protonix, Remeron, Synthroid, Eliquis 2.5, Ferrous Sulfate, Keppra, Lamictal, Mighty Shake, Senokot S.

Current Illness: Hx of Covid-19- 05/09/2020. Receiving palliative care

Preexisting Conditions: Dementia, Cerebral infarct, PVD, Atherosclerotic heart disease, supraventricular tachycardia, Dyshphagia, Hypothyroidism, Essential HTN, Anxiety, Zoster, Postviral fatigue syndrome, Vitamin D deficiency, Hx of Pulmonary Embolism, long term use of anticoagulant, SIADH, TIA, Unspecified convulsion, Hyperlipidemia, MDD, Abnormal EEG.

Allergies: Lisinopril, Statins, Sulfa Antibiotics.

Diagnostic Lab Data: She has history of elevated D-Dimer. 3/10 WBC- 6.85, RBC- 3.63, HBG- 11.1, BUN-18, CREA- 0.89, TSH- 1.030.

CDC Split Type:

Write-up: 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.

 VAERS ID: 1235825 (history.)
 Vaccinated: 2021-03-26

 Form:
 Version 2.0
 Onset: 0000-00-00

 Age:
 Submitted: 0000-00-00

 Sex:
 Female
 Entered: 2021-04-21

Location: New Hampshire

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL9269 / 1	-/-

Administered by: Senior Living Purchased by: ? Symptoms: Bradycardia, Hypotension, Investigation

SMQs:, Anaphylactic reaction (broad), Neuroleptic malignant syndrome (broad), Arrhythmia related investigations, signs and symptoms (broad), Dehydration (broad), Hypokalaemia (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 0000-00-00 **Permanent Disability?** No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? Yes Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations: Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data: Test Name: critical labs; Result Unstructured Data: Test Result:Unknown

results

CDC Split Type: USPFIZER INC2021412017

Write-up: 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

 VAERS ID: 1235832 (history)
 Vaccinated: 2021-03-26

 Form:
 Version 2.0
 Onset: 0000-00-00

 Age:
 Submitted: 0000-00-00

 Sex:
 Female
 Entered: 2021-04-21

Location: New Hampshire

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL9269 / 1	- / -

Administered by: Senior Living Purchased by: ?
Symptoms: Confusional state, Dyspnoea, Hypoxia, Sepsis

SMQs:, Anaphylactic reaction (broad), Asthma/bronchospasm (broad), Neuroleptic malignant syndrome (broad), Anticholinergic syndrome (broad), Dementia (broad), Acute central respiratory depression (broad), Pulmonary hypertension (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad), Noninfectious meningitis (broad), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Respiratory failure (broad), Hypoglycaemia (broad), Infective pneumonia (broad), Sepsis (narrow), Opportunistic infections (broad)

Life Threatening? No

Birth Defect? No

Died? Yes

Date died: 0000-00-00 **Permanent Disability?** No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? Yes Hospitalized? Yes, ? days

Extended hospital stay? No

Previous Vaccinations:

Other Medications:

Current Illness:

Preexisting Conditions:

Allergies:

Diagnostic Lab Data:

CDC Split Type: USPFIZER INC2021415135

Write-up: 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 soncomitant 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

VAERS ID: <u>1237884</u> (history) **Vaccinated:** 2021-01-08

Form: Version 2.0 Onset: 2021-04-03

Age: 90.0 Days after vaccination: 85

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-21

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL3248 / 1	RA / IM
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EN5318 / 2	LA / IM

Administered by: Senior Living Purchased by: ?

Symptoms: Blood creatinine increased, Blood urea increased, Chest X-ray abnormal, Condition aggravated, Death, Decubitus ulcer, Deep vein thrombosis, Dyskinesia, Dysphagia, Full blood count, Haematocrit decreased, Haemoglobin decreased, Hepatitis C RNA increased, International normalised ratio increased, Lung infiltration, Metabolic function test, Muscular weakness, Pleural effusion, Pneumonia, Red blood cell count decreased, Ultrasound Doppler abnormal, White blood cell count increased

SMQs:, Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Liver-related coagulation and bleeding disturbances (narrow), Liver infections (narrow), Haematopoietic erythropenia (narrow), Peripheral neuropathy (broad), Haemorrhage laboratory terms (broad), Interstitial lung disease (narrow), Neuroleptic malignant syndrome (broad), Systemic lupus erythematosus (broad), Anticholinergic syndrome (broad), Retroperitoneal fibrosis (broad), Embolic and thrombotic events, vessel type unspecified and mixed arterial and venous (narrow), Embolic and thrombotic events, venous (narrow), Dyskinesia (narrow), Oropharyngeal conditions (excl neoplasms, infections and allergies) (narrow), Thrombophlebitis (broad), Guillain-Barre syndrome (broad), Noninfectious encephalitis (broad), Noninfectious encephalopathy/delirium (broad),

Noninfectious meningitis (broad), Gastrointestinal nonspecific symptoms and therapeutic procedures (broad), Haemodynamic oedema, effusions and fluid overload (narrow), Cardiomyopathy (broad), Eosinophilic pneumonia (broad), Chronic kidney disease (broad), Tumour lysis syndrome (broad), Drug reaction with eosinophilia and systemic symptoms syndrome (broad), Infective pneumonia (narrow), Opportunistic infections (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 2021-04-03
Days after onset: 0
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Aspirin, Calcium Carbonate, Ceftriaxone, Co-Q10, Cyanocobalamin, Lidocaine Patch 4%, Magnesium Lactate, Micro-K, Mirtazapine, MVI, Omeprazole, Senna-S, Tylenol, Venlafaxine, Anusol-HC cream, Chlorxihidine Gluconate Sol"n, Gabapentin, Met **Current Illness:** Pneumonia, Abnormal blood levels and overall medical decline.

Preexisting Conditions: Exposed lumbar hardware, mulitple pressure injury, Pain, Dysphagia, Anemia, Chronic pain syndrome, HTN, GERD, A-fib, age-related osteoporosis, CKD, Chronic viral Hep C, Hx of MRSA, Hemiplegia and Hemiparesis following cerebral infarct, MDD, Insomnia, Anxiety, Dysarthria, Diverticulitis of the intestine, protein-calorie malnutrition, opoid dependence, Spondylosis without myelopathy or radiculopathy, Hx of DVT.

Allergies: Codeine, Celebrex, Diuretic

Diagnostic Lab Data: Chest X-ray (02/24 Diffuse bilateral infiltrates and 03/25/2021 Congestive failure with superimposed bilateral infiltrates and bilateral effusions), Duplex Ultrasound of RLE and RUE= Extensive thrombus extending from the subclavian vein through the axilarry vein adn aslo involving brachial vein and radial vein and ulnar vein. DVT in popliteal vein. CBC and BMP-Multiple lab works were one. 02/24- BUN- 23, Crea- 1.10WBC- 13.93, RBC- 3.55, h/h- 8.8/29.1. INR- 1.3. 02/25- inr-1.6, 02/26- 4.2, 02/27 INR-5.5, She was on Lovenox bridge with Coumadin at the time and after high level of INR, Lovenox was then held.

CDC Split Type:

Write-up: 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.

VAERS ID: <u>1238123</u> (history) **Vaccinated:** 2021-03-26 **Form:** Version 2.0 **Onset:** 2021-04-14

Age: 71.0 Days after vaccination: 19

Sex:FemaleSubmitted:0000-00-00Location:New HampshireEntered:2021-04-21

Vaccination / Manufacturer	Lot / Dose	Site / Route
COVID19: COVID19 (COVID19 (PFIZER-BIONTECH)) / PFIZER/BIONTECH	EL9269 / 1	LA / IM

Administered by: Senior Living Purchased by: ?

Symptoms: Arthralgia, Blood calcium normal, Blood chloride decreased, Blood creatinine increased, Blood glucose increased, Blood potassium increased, Blood sodium decreased, Blood urea increased, Death, Fatigue, Haematocrit decreased, Haemoglobin decreased, Headache, Malaise, Platelet count decreased, Red blood cell count decreased

SMQs:, Rhabdomyolysis/myopathy (broad), Acute renal failure (broad), Haematopoietic erythropenia (narrow), Haematopoietic thrombocytopenia (narrow), Haemorrhage laboratory terms (broad), Hyperglycaemia/new onset diabetes mellitus (narrow), Systemic lupus erythematosus (broad), Retroperitoneal fibrosis (broad), Hyponatraemia/SIADH (narrow), Chronic kidney disease (broad), Arthritis (broad), Tumour lysis syndrome (narrow), Drug reaction with eosinophilia and systemic symptoms syndrome (broad)

Life Threatening? No Birth Defect? No

Died? Yes

Date died: 2021-04-14
Days after onset: 0
Permanent Disability? No

Recovered? No Office Visit? No ER Visit? No

ER or Doctor Visit? No

Hospitalized? No

Previous Vaccinations:

Other Medications: Amlodipine, Aspercreme with Lidocaine Creame 4%, Aspirin 81, Buspirone HCl, Doxazosin, Escitalopram, Letrozole, Levothyroxine Sodium, Protonix, Oxycodone, Vitamin D, Eliquis, Metoprolol tartrate, Preparation H, Brimonidine Tartrate Solution

Current Illness: Positive for C-diff, resident refused dialysis at times,. Resident has been reporting GI discomfort. L BKA wound and Sacral wound.

Preexisting Conditions: Hx of Sepsis, stump complication, weakness, Aorvalve stenosis, Bacteremia, Malignant Neoplasm of endometrium, Vitamin D Defficiency, Hx of Covid-19 received monoclonal anitbodies on 11/2020, Anemia, Hypothyroidism, Type 2 DM, Hyperlipidemia, MDD, Insomnia, HTN, Glaucoma, A-fib, CHF, AV Fistula, Lhyphedema, Chrcot's joint, Ends stage renal disease-dialysis dependent, Hx of venous thrombosis and embolism.

Allergies: Megestrol, Actos, Glucophage, Medrol Sudafed

Diagnostic Lab Data: 4/14- BUN- 64, CREA- 9.30. Calcium- 9.9, Sodium- 131, Potassium- 6.3,

Chloride- 96, Glucose- 237, RBC- 3.76, H/H- 10.3/33.8, Platelet- 122

CDC Split Type:

Write-up: 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.

Result pages: prev 123456 next

New Search

Link To This Search Result:

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