Understanding VAERS

The U.S. Department of Health & Human Services (HHS) established the Vaccine Adverse Event Reporting System (VAERS) in 1990 as a national surveillance system designed to detect potential safety concerns related to U.S.-licensed vaccines[1]. This system operates as a collaborative effort between the Centers for Disease Control & Prevention (CDC) and the U.S. Food & Drug Administration (FDA) to monitor vaccine safety and respond to any concerning trends[4]. As a passive surveillance system, VAERS relies on voluntary reports from patients, parents, caregivers, healthcare providers (HCPs), and vaccine manufacturers to help identify unusual or unexpected patterns of adverse events following vaccination[1].

VAERS was created to streamline and enhance the effectiveness of prior vaccine safety reporting systems–the CDC's Monitoring System for Adverse Events Following Immunization (MSAEFI) and the FDA's Spontaneous Reporting System[5]. These two databases played an essential role in implementing the National Childhood Vaccine Injury Act (NCVIA) of 1986, which requires HCPs and vaccine manufacturers to report adverse vaccine reactions[4]. By consolidating these systems, VAERS improved data accessibility, facilitated compliance with federal regulations, and strengthened public health monitoring efforts.

Despite its importance, VAERS has inherent limitations due to its passive nature. One of its primary weaknesses is underreporting, as not all adverse events following vaccination are documented[3]. Additionally, because VAERS accepts reports from anyone and everyone, the quality or completeness of the submitted data can vary significantly[3]. VAERS does not confirm causation, therefore the presence of a report does not necessarily mean that a vaccine caused the reported event. Instead, the system functions as an early warning tool, helping public health officials detect safety signals that may warrant further investigation[3].

For pharmacy professionals, VAERS is a valuable resource in ensuring vaccine safety and adherence to reporting requirements. Pharmacists, as well as other HCPs, are required under the NCVIA to report any known or suspected adverse vaccine reactions and, as a pharmacy technician, you might be called upon to file these reports on their behalf[5]. To file a report, individuals must visit the official VAERS website at

vaers.hhs.gov and select “Report an Adverse Event”[2]. Before submission, it is essential to gather all necessary patient and vaccine information described on the full checklist document provided, including patient demographics (e.g., age, sex, and date of birth) and vaccine details (e.g., brand name and dosage)[2]. VAERS provides two methods for report submission: an online portal offering a guided experience, or an offline option, where users can complete a fillable PDF form, with instructions, and upload it to the system manually[2].

VAERS is an essential tool for monitoring vaccine safety and protecting public health through early detection of potential adverse events that pose a threat to patient health. As a future pharmacy technician, I recognize that my active involvement in this system is critical regardless of how simple my role is. By ensuring that data is accurately collected and reported in a timely manner, I help maintain the integrity of the national database.

Works Cited

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