

# List of Vaccine Names, Best ASIIS Selection and CPT/CVX Codes



This list matches the vaccine name or codes in Arizona State Immunization Information System (ASIIS) with the brand name or other common names of the vaccines you use most often.

Vaccine trade name or common name	Fund	Best ASIIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Commercialized COVID-19 Vaccine (2024-2025 Formula) - NEW</b>								
COMIRNATY® Pfizer COVID-19 Vaccine (2024-2025 Formula)	VFC VFA	COVID-19, mRNA, LNP-S, PF, tris-sucrose, 30 mcg/0.3 mL (12+)	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 00069-2432-10 (10 pack, 1 dose syringe)	91320	309
Pfizer COVID-19 Vaccine (2024-2025 Formula)	VFC	COVID-19, mRNA, LNP-S, PF, tris-sucrose, 10 mcg/0.3 mL (5- <12y)	5 yr to < 12 yr EUA	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-4438-02 (10 pack, 1 dose vial)	91319	310
	VFC	COVID-19, mRNA, LNP-S, PF, tris-sucrose, 3 mcg/0.3 mL (6m- <5y)	6 mo to < 5 yr EUA	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-4426-02 (10 pack-3 dose vials) (30 doses)	91318	308
Spikevax™ Moderna COVID-19 Vaccine (2024-2025 Formula)	VFC VFA	COVID-19, mRNA, LNP-S, PF, 50 mcg/0.5 mL (12+)	12+ years	0.5 ml	IM	Moderna – MOD NDC: 80777-0110-93 (10 pack, 1 dose syringe)	91322	312
Moderna COVID-19 Vaccine (2023-2024 Formula)	VFC	COVID-19, mRNA, LNP-S, PF, 25 mcg/0.25 mL (6m- <12y)	6 mo to < 12 yr	0.25 ml	IM	Moderna – MOD NDC: 80777-0291-80 (10 pack, 1 dose syringe)	91321	311

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Commercialized COVID-19 Vaccine (2023-2024 Formula)</b>								
COMIRNATY® Pfizer COVID-19 Vaccine (2023-2024 Formula) <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, tris-sucrose, 30 mcg/0.3 mL <b>(12+)</b>	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 00069-2377-10 (10 pack, 1 dose syringe)	91320	309
Pfizer COVID-19 Vaccine (2023-2024 Formula) <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, tris-sucrose, 10 mcg/0.3 mL <b>(5-&lt;12y)</b>	5 yr to < 12 yr EUA	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-4331-02 (10 pack, 1 dose vial)	91319	310
		COVID-19, mRNA, LNP-S, PF, tris-sucrose, 3 mcg/0.3 mL <b>(6m-&lt;5y)</b>	6 mo to < 5 yr EUA	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-4315-02 (10 pack-3 dose vials) (30 doses)	91318	308
Spikevax™ Moderna COVID-19 Vaccine (2023-2024 Formula)	VFC VFA	COVID-19, mRNA, LNP-S, PF, 50 mcg/0.5 mL <b>(12+)</b>	12+ years	0.5 ml	IM	Moderna – MOD NDC: 80777-0102-95 (10x10 pack, 1 dose vial) (100 doses)	91322	312
COMIRNATY® Pfizer COVID-19 Vaccine (2023-2024 Formula) <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, tris-sucrose, 30 mcg/0.3 mL <b>(12+)</b>	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 00069-2392-10 (10 pack, 1 dose syringe)	91320	309
Moderna COVID-19 Vaccine (2023-2024 Formula)	VFC	COVID-19, mRNA, LNP-S, PF, 25 mcg/0.25 mL <b>(6m-&lt;12y)</b>	6 mo to < 12 yr	0.25 ml	IM	Moderna – MOD NDC: 80777-0287-92 (10x10 pack, 1 dose vial) (100 doses)	91321	311
Novavax COVID-19 Vaccine (2023-2024 Formula) <i>(discontinued)</i>		COVID-19, subunit, rS-nanoparticle+Matrix-M1 Adjuvant, PF, 0.5 mL	12+ years	0.5 ml	IM	Novavax – NVX NDC: 80631-0105-02 (2pack-5dose vials) (10 doses)	91304	313
COMIRNATY® Pfizer COVID-19 Vaccine (2023-2024 Formula) <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, tris-sucrose, 30 mcg/0.3 mL <b>(12+)</b>	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 00069-2362-10 (10 pack, 1 dose vial)	91320	309

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Discontinued COVID-19 Vaccine - Historical Data only</b>								
Pfizer COVID-19 Vaccine - Bivalent Original and Omicron BA.4/BA.5 <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, bivalent booster, PF, 30 mcg/0.3 mL dose	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-0304-02	91312	300
		Covid-19, Mrna, Lnp-S, Bivalent Booster, Pf, 30 Mcg/0.3 MI Dose	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-1404-02	91312	300
		COVID-19, mRNA, LNP-S, bivalent booster, PF, 10 mcg/0.2 mL dose	5 yr to < 12 yr	0.2 ml	IM	Pfizer, INC – PFR NDC: 59267-0565-02	91315	301
		COVID-19, mRNA, LNP-S, bivalent, PF, 3 mcg/0.2 mL dose	6 mo to < 5 yr	0.2 ml	IM	Pfizer, INC – PFR NDC: 59267-0609-02	91317	302
Moderna COVID-19 Vaccine - Bivalent Original and Omicron BA.4/BA.5 <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, bivalent booster, PF, 50 mcg/0.5 mL or 25mcg/0.25mL dose	12+ years	0.5 ml	IM	Moderna – MOD NDC: 80777-0282-99	91313	229
			6 yr to < 12 yr	0.25 ml			91314	
		COVID-19, mRNA, LNP-S, bivalent booster, PF, 10 mcg/0.2 mL	6 mo to < 6 yr	0.2 ml	IM	Moderna – MOD NDC: 80777-0283-99	91316	230
Pfizer COVID-19 Vaccine <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose, tris-sucrose	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-1025-04	91305	217
		COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 59267-1000-02	91300	208
		COVID-19, mRNA, LNP-S, PF, 10 mcg/0.2 mL dose, tris-sucrose	5yr to < 12	0.2 ml	IM	Pfizer, INC – PFR NDC: 59267-1055-04	91307	218
		COVID-19, mRNA, LNP-S, PF, 3 mcg/0.2 mL dose, tris-sucrose	6 mo to < 5 yr	0.2 ml	IM	Pfizer, INC – PFR NDC: 59267-0078-04	91308	219
COMIRNATY® Pfizer COVID-19 Vaccine <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose, tris-sucrose	12+ years	0.3 ml	IM	Pfizer, INC – PFR NDC: 00069-2025-10	91305	217
Moderna COVID-19 Vaccine <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose	12+ years	0.5 ml	IM	Moderna – MOD NDC: 80777-0273-99	91301 91306	207
		COVID-19, mRNA, LNP-S, PF, 50 mcg/0.5 mL dose	6 to < 12 yr	0.5 ml	IM	Moderna – MOD NDC: 80777-0275-99	91309	221
		COVID-19, mRNA, LNP-S, PF, pediatric 25 mcg/0.25 mL dose	6 mo to < 6 yr	0.25 ml	IM	Moderna – MOD NDC: 80777-0279-99	91311	228
Spikevax™ Moderna COVID-19 Vaccine <i>(discontinued)</i>		COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose	12+ years	0.5 ml	IM	Moderna – MOD NDC: 80777-0100-99	91301 91306	207
Janssen COVID-19 Vaccine <i>(discontinued)</i>		COVID-19 vaccine, vector-nr, rS Ad26, PF, 0.5 mL	18+ years	0.5 ml	IM	Janssen – JSN NDC: (59676-0580-15)	91303	212

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Discontinued COVID-19 Vaccines - Historical Data only</b>								
Novavax COVID-19 Vaccine ( <i>discontinued</i> )		COVID-19, subunit, rS-nanoparticle+Matrix-M1 Adjuvant, PF, 0.5 mL	12+ years	0.5 ml	IM	Novavax – NVX NDC: 80631-0102-10	91304	211
Novavax COVID-19 Vaccine ( <i>discontinued</i> )		COVID-19, subunit, rS-nanoparticle+Matrix-M1 Adjuvant, PF, 0.5 mL	12+ years	0.5 ml	IM	Novavax – NVX NDC: 80631-0100-10	91304	211
AstraZeneca COVID-19 Vaccine		COVID-19 vaccine, vector-nr, rS-ChAdOx1, PF, 0.5 mL	18+ years	0.5 ml	IM	AstraZeneca – ASZ NDC: 00310-1222-15	91302	210
Sinopharm (BIBP) COVID-19 Vaccine		COVID-19 IV Non-US Vaccine (BIBP, Sinopharm)				Sinopharm-Biotech – SPH		510
Coronavac (Sinovac) COVID-19 Vaccine		COVID-19 IV Non-US Vaccine (CoronaVac, Sinovac)				Sinovac – SNV		511
SARS-COV-2 (COVID-19) vaccine, UNSPECIFIED		<b>DO NOT USE</b>						213
SARS-COV-2 COVID-19 Non-US Vaccine, Specific Product Unknown		<b>DO NOT USE</b>						500

Vaccine trade name or common name	Fund	Best ASIIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Combination Vaccines</b>								
Vaxelis™	VFC	DTaP,IPV,Hib,HepB	6 weeks - 4 years	0.5 ml	IM	Merck – MSD NDC: 63361-0243-10 (10 pack, 1 dose vial) NDC: 63361-0243-15 (10 pack, 1 dose syringe)	90697	146
Quadracel™	VFC	DTaP-IPV	4 - 6 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0564-15 (10 pack, 1 dose syringe) NDC: 49281-0564-10 (10 pack, 1 dose vial)	90696	130
Kinrix®	VFC	DTaP-IPV	4 - 6 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0812-52 (10 pack, 1 dose T-L syringe)	90696	130
Pediarix®	VFC	DTaP-HepB-IPV	6 weeks - 6 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0811-52 (10 pack, 1 dose syringe)	90723	110
Pentacel®	VFC	DTaP-Hib-IPV	6 weeks - 4 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0511-05 (5 pack, 1 dose vial)	90698	120
Twinrix®	VFC VFA	HepA-HepB	18 years & older	1.0 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0815-52 (10 pack, 1 dose T-L syringes; No needle)	90636	104
ProQuad®	VFC	MMRV	12 months - 12 years	0.5 ml	SC	Merck – MSD NDC: 00006-4171-00 (10 pack, 1 dose vial)	90710	94
Comvax (discontinued)		Hib-Hep B	6 weeks - 15 months	0.5 ml	IM	Merck – MSD NDC: 0006-4898-00	90748	51
MenHibrix (discontinued)		Meningococcal C/Y-HIB PRP	6 weeks - 18 months	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0801-11	90644	148

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<b>Dengue</b>								
Dengvaxia®	VFC	dengue fever tetravalent	6 - 16 years	0.5 ml	SC	Sanofi Pasteur – PMC NDC: 49281-0605-01 (10 pack, 1 dose vial)		56
<b>Diphtheria, Tetanus and Pertussis</b>								
Daptacel®	VFC	DTaP	6 weeks - 6 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0286-10 (10 pack, 1 dose vial)	90700	106
Infanrix®	VFC	DTaP	6 weeks - 7 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0810-52 (10 pack, 1 dose T-L syringes; No needle)	90700	20
Tenivac® Tetanus and diphtheria toxoids adsorbed	VFC	Td (adult), 2 Lf tetanus toxoid, presv free, adsorbed	7 years & older	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0215-10 (10 pack, 1 dose vial) NDC: 49281-0215-15 (10 pack, 1 dose syringe)	90714	113
TDVAX™ Tetanus and diphtheria toxoids adsorbed	VFC VFA	Td (adult), 2 Lf tetanus toxoid, presv free, adsorbed	7 years & older	0.5 ml	IM	Grifols – GRF NDC: 13533-0131-01 (10 pack, 1 dose vial)	90714	09
Boostrix® Tetanus Diphtheria & Acellular Pertussis	VFC VFA	Tdap	10 years & older	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0842-52 (10 pack, 1 dose syringe, no needle)	90715	115
						GlaxoSmithKline – SKB NDC: 58160-0842-11 (10 pack, 1 dose vial)		
Adacel® Tetanus Diphtheria & Acellular Pertussis	VFC VFA	Tdap	10 - 64 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0400-10 (10 pack, 1 dose vial) NDC: 49281-0400-20 (5 pack, 1 dose BD Luer Lock Syringe)	90715	115
Decavac (discontinued) Tetanus and diphtheria toxoids adsorbed		Td (adult), 5 Lf tetanus toxoid, presv free, adsorbed	7 years & older	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-291-83 or 49281-291-10	90718	113
Diphtheria and tetanus toxoids adsorbed		DT (Ped)	6 weeks - 6 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0225-10	90702	28
DTaP, 5 Pertussis Antigen		DTaP, 5 Pertussis Antigen					90700	106
Tetanus and diphtheria toxoids adsorbed		Td Adult	7 years & older				90714	09
Whenever DTaP was given, even if the brand name is unknown		DTaP					90700	20
Diphtheria, tetanus toxoids, & whole cell pertussis vaccine (will be from historical records)		DTP					90701	01

Vaccine trade name or common name	Fund	Best ASIIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Hepatitis A</b>								
<b>Vaqta®</b> (2 doses for pediatric/adolescents)	VFC	Hep A, ped/adol, 2 dose	12 months - 18 years	0.5 ml (25 U)	IM	Merck – MSD NDC: 00006-4095-02 (10 pack, 1 dose syringe)	90633	83
<b>Havrix®</b> (2 doses for pediatric/adolescent)	VFC	Hep A, ped/adol, 2 dose	12 months - 18 years	0.5 ml (720 EL.U)	IM	GlaxoSmithKline – SKB NDC: 58160-0825-52 (10 pack, 1 dose syringes, no needle)	90633	83
<b>Vaqta®</b> (2 doses for adults)	VFA	Hep A, adult	19 years & older	1.0 ml (50u)	IM	Merck – MSD NDC: 00006-4096-02 (10 pack, 1 dose syringe)	90632	52
<b>Havrix®</b> (2 doses for adults)	VFA	Hep A, adult	19 years & older	1.0 ml (1440 EL.U)	IM	GlaxoSmithKline – SKB NDC: 58160-0826-52 (10 pack, 1 dose syringes, no needle)	90632	52
<b>Havrix®</b> (3 doses for pediatric/adolescent)		Hep A, ped/adol, 3 dose	12 months - 18 years	0.5 ml (360 EL.U)	IM	GlaxoSmithKline – SKB	90634	84
<b>Hepatitis B</b>								
<b>Engerix B®</b> Ped/Adol (3 dose schedule)	VFC	Hep B Ped/Adol - Preserv Free	Birth - 19 years	0.5 ml 10µg	IM	GlaxoSmithKline – SKB NDC: 58160-0820-52 (10 pack, 1 dose T-L syringe, no needle)	90744	08
<b>Recombivax HB®</b> Ped/Adol	VFC	Hep B Ped/Adol - Preserv Free	Birth - 19 years	0.5 ml 5µg	IM	Merck – MSD NDC: 00006-4981-00 (10 pack, 1 dose vial)		
<b>Engerix B®</b> for adults	VFA	Hep B, adult	20 years & older	1.0 ml 20µg	IM	GlaxoSmithKline – SKB NDC: 58160-0821-11 (10 pack, 1 dose vial) NDC: 58160-0821-52 (10 pack, 1 dose T-L syringe, no needle)	90746	43
<b>Heplisav-B®</b>	VFA	HepB (recombinant), CpG adjuvanted	18 years & older	0.5mL	IM	Dynavax – DVX NDC: 43528-0003-05 (5 pack, 1 dose syringe)	90739	189
<b>PreHevbrio</b>	VFA	HepB recombinant, 3-antigen, Al(OH) <sub>3</sub>	18 years & older	1.0 ml	IM	VBI Vaccines – VBI NDC: 75052-0001-10 (10 pack, 1 dose vial)	90759	220
<b>Recombivax HB®</b> Adult		Hep B, adult	20 years & older	1.0 ml 10µg	IM	Merck – MSD NDC: 00006-4995-41 (10 pack, 1 dose vial)	90746	43
<b>Recombivax HB®</b> Dialysis (3 dose schedule)		Hepatitis B - Dialysis	18 years & older	1.0 ml 40µg	IM		90740	44

\* Various choices and dosages available depending on specific individual cases, such as high risk or dialysis.

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<b>HIB</b>								
PedvaxHIB®	VFC	Hib (PRP-OMP)	2 months - 5 years	0.5 ml	IM	Merck – MSD NDC: 00006-4897-00 (10 pack, 1 dose vial)	90647	49
ActHIB®	VFC	Hib (PRP-T)	2 months - 5 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0545-03 (5 pack, 1 dose vial)	90648	48
Hiberix®	VFC	Hib (PRP-T)	6 weeks - 4 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC:58160-0726-15 (10 pack, 1 dose vial)	90648	48
OmniHib (discontinued)		Hib (PRP-T)					90648	48
HibTITER (discontinued)		Hib-Hboc					90645	47
ProHIBit (discontinued)		Hib-PRP-D					90646	46
<b>Human Papilloma Virus</b>								
Gardasil®9	VFC VFA	HPV9	9 - 45 years	0.5 ml	IM	Merck – MSD NDC: 00006-4121-02 (10 pack, 1 dose syringe)	90651	165
<b>Immune Globulin Products</b>								
HyperHEP B S/D or HepaGam B (Hepatitis B Immune Globulin)		HBIG (Hepatitis B Immune Globulin)			<i>See pkg insert for dosage and admin recommendations</i>	Talecris Biotherapeutics – TAL OR Cangene Corp - CNJ	90371	30
GamaSTAN S/D (Immune Globulin) Note: Used for post-exposure prophylaxis for Hep A and MMR exposure		IG (Immune Globulin IM)				Talecris Biotherapeutics – TAL	90281	86
Immune Globulin, intravenous Note: Rarely used for post-exposure prophylaxis		IGIV				Many Manufacturers	90283	87
HyperRAB S/D (Rabies Immune Globulin)		RIG				Talecris Biotherapeutics – TAL	90375	34
Synagis (Respiratory Syncytial Virus Immune Globulin)		RSV-IGIM	Birth - 24 months			MedImmune – MED	90378	93
HyperTET S/D (Tetanus Immune Globulin)		TIG				Talecris Biotherapeutics – TAL	90389	13
VariZIG (Varicella Zoster Immune Globulin) Note: Used for post exposure prophylaxis to Chickenpox		VZIG				Cangene Corporation (Canada) – CNJ	90396	36



Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Influenza - Reflects the vaccine for the 2024-2025 Flu Season</b>								
Fluzone® Influenza virus vaccine, trivalent (IIV3)	VFC VFA	Influenza, split virus, trivalent, preservative	6 months & older	0.25 ml MDV	IM	Sanofi Pasteur – PMC NDC: 49281-0641-15 (10 dose vial)	90657	141
				0.5 ml MDV			90658	
Fluzone® Influenza virus vaccine, trivalent (IIV3)	VFC VFA	Influenza, split virus, trivalent, PF	6 months & older	0.5 ml PFS	IM	Sanofi Pasteur – PMC NDC: 49281-0424-50 (10 pack, 1 dose syringe)	90656	140
FluLaval® Influenza virus vaccine, trivalent (IIV3)	VFC	Influenza, split virus, trivalent, PF	6 months & older	0.5 ml PFS	IM	GlaxoSmithKline – SKB NDC: 19515-0810-52 (10 pack, 1 dose syringe)	90656	140
Flucelvax® Influenza virus vaccine, trivalent (cIIV3)	VFC VFA	Influenza, MDCK, trivalent, PF	6 months & older	0.5 ml PFS	IM	Seqirus – SEQ NDC: 70461-0654-03 (10 pack, 1 dose syringe)	90661	153
		Influenza, MDCK, trivalent, preservative		0.5 ml MDV		NDC: 70461-0554-10 (10 dose vial)	90661	320
FluMist® Influenza virus vaccine, trivalent, live (LAIV3)	VFC	Influenza, live, trivalent, intranasal	2 - 49 years	0.2 ml Sprayer	NAS	MedImmune – MED (AstraZeneca) NDC: 66019-0311-10 (10 pack, 1 dose sprayer)	90660	111
Afluria® Influenza virus vaccine, trivalent (IIV3)	VFC	Influenza, split virus, trivalent, PF	36 months & older	0.5 ml PFS	IM	Seqirus – SEQ NDC: 33332-0024-03 (10 pack, 1 dose syringe)	90656	140
Afluria® Influenza virus vaccine, trivalent (IIV3)		Influenza, split virus, trivalent, preservative	6 months & older	0.25 ml MDV	IM	Seqirus – SEQ NDC: 33332-0124-10 (10 dose vial)	90657	141
				0.5 ml MDV			90658	
Fluarix® Influenza virus vaccine, trivalent (IIV3)		Influenza, split virus, trivalent, PF	6 months & older	0.5 ml PFS	IM	GlaxoSmithKline – SKB NDC: 58160-0884-52 (10 pack, 1 dose TipLok syringe)	90656	140
FLUAD® Influenza vaccine, inactivated (IIV), subunit, adjuvanted		Influenza, adjuvanted, trivalent, PF	65 years & older	0.5 ml PFS	IM	Seqirus – SEQ NDC: 70461-0024-03 (10 pack, 1 dose syringe)	90653	168
Fluzone® - High Dose Influenza virus vaccine (IIV)		Influenza, high-dose, trivalent, PF	65 years & older	0.5 ml PFS	IM	Sanofi Pasteur – PMC NDC: 49281-0124-65 (10 pack, 1 dose syringe)	90662	135
Flublok® Influenza virus vaccine, trivalent (RIV3)		Influenza, recombinant, trivalent, PF	18 years & older	0.5 ml PFS	IM	Sanofi Pasteur – PMC NDC: 49281-0724-10 (10 pack, 1 dose syringe)	90673	155

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<b>Japanese Encephalitis</b>								
IXIARO		Japanese Encephalitis-IM	2 months & older	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 42515-0001-01	90738	134
JE-VAX (discontinued)		Japanese Encephalitis	12 months & older		SC	The Research Foundation for Microbial Diseases of Osaka University (BIKEN)	90735	39
<b>Measles, Mumps &amp; Rubella</b>								
M-M-R®II	VFC VFA	MMR	12 months & older	0.5 ml	SC	Merck – MSD NDC: 00006-4681-00 (10 pack, 1 dose vial)	90707	03
Priorix	VFC VFA	MMR	12 months & older	0.5 ml	SC	GlaxoSmithKline – SKB NDC: 58160-0824-15 (10 pack, 1 dose vial)	90707	03
<b>Meningococcal</b>								
MenQuadfi® Meningococcal polysaccharide (groups A, C, W, Y-135) TT conjugate	VFC VFA	Meningococcal polysaccharide (groups A, C, W, Y-135) TT conjugate	2 years & older	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0590-10 (10 pack, 1 dose vial)	90619	203
PENBRAYA™ Meningococcal polysaccharide (MenACY-TT conjugate),(MenB)	VFC VFA	meningococcal polysaccharide (MenACY-TT conjugate),(MenB),PF	10 - 25 years	0.5 ml	IM	Pfizer, INC – PFR NDC: 00069-0600-01 (1 pack, 1 dose kit)	90623	316
PENBRAYA™ Meningococcal polysaccharide (MenACY-TT conjugate),(MenB)						Pfizer, INC – PFR NDC: 00069-0600-05 (5 pack, 1 dose kit)		
Menveo® one-vial Meningococcal Conjugate vaccine (Serogroups A,C,Y,W-135)	VFC VFA	Meningococcal MCV40	10 - 55 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0827-30 (10 pack, 1 dose vial) does not require reconstitution	90734	136
Menveo® two-vial Meningococcal Conjugate vaccine (Serogroups A,C,Y,W-135)	VFC		2 months - 55 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0955-09 (5 pack, 1 dose - 2 vials) requires reconstitution	90734	136
Bexsero® Meningococcal recombinant protein and outer membrane vesicle vaccine (Serogroup B)	VFC VFA	Meningococcal B, OMV	10 - 25 years	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0976-20 (10 pack, 1 dose syringe)	90620	163
Trumenba® Meningococcal Recombinant Lipoprotein Vaccine (Serogroup B)	VFC VFA	Meningococcal B, recombinant	10 - 25 years	0.5 ml	IM	Pfizer, INC – PFR NDC: 00005-0100-10 (10 pack, 1 dose syringe)	90621	162
Menactra® (discontinued) Meningococcal Conjugate vaccine (Serogroups A,C,Y,W-135)		Meningococcal MCV4P	9 months - 55 years	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0589-05 (5 pack, 1 dose vial)	90734	114
Menomune (discontinued) A/C/Y/W-135 Meningococcal Polysaccharide vaccine		Meningococcal (MPSV4)	2 years & older	0.5 ml	SC	Sanofi Pasteur – PMC	90733	32

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Mpox (Smallpox/Mpox Vaccine)</b>								
JYNNEOS	VFC VFA	Vaccinia, smallpox monkeypox vaccine live, PF, SQ or ID injection	18 years & older	0.5 ml	SC	Bavarian Nordic – BN NDC: 50632-0001-03 (10 pack, 1 dose vial)	90611	206
				0.1 ml	ID			
	PUB			0.5 ml	SC	Bavarian Nordic – BN NDC: 50632-0001-02 (20 pack, 1 dose vial)		
				0.1 ml	ID			
ACAM2000		Smallpox (Vaccinia) Vaccine, Live		15 jabs 0.0025 ml	PerC	Emergent Product Development Gaithersburg Inc. NDC: 71665-0330-02	90622	75
<b>Pneumococcal</b>								
Pneumovax® 23 Pneumococcal, polyvalent	VFC VFA	Pneumococcal polysaccharide PPV23	2 years & older with health risks 50 years & older	0.5 ml	SC/IM	Merck – MSD NDC: 00006-4837-03 (10 pack, 1 dose syringe)	90732	33
Vaxneuvance™ Pneumococcal 15-valent	VFC VFA	Pneumococcal conjugate PCV15, polysaccharide CRM197 conjugate, adjuvant, PF	6 weeks & older	0.5 ml	IM	Merck – MSD NDC: 00006-4329-03 (10 pack, 1 dose syringe)	90671	215
Pevnar 20™ Pneumococcal 20-valent	VFC VFA	Pneumococcal conjugate PCV20, polysaccharide CRM197 conjugate, adjuvant, PF	6 weeks & older	0.5 ml	IM	Pfizer, INC – PFR NDC: 00005-2000-10 (10 pack, 1 dose syringe)	90677	216
Pevnar 20™ Pneumococcal 20-valent						Pfizer, INC – PFR NDC: 00005-2000-20 (1 pack, 1 dose syringe)		
Pevnar 13™ (discontinued) Pneumococcal Conjugate, 13 valent		Pneumococcal conjugate PCV 13	6 weeks - 17 years	0.5 ml	IM	Pfizer, INC – PFR NDC: 00005-1971-02 (10 pack, 1 dose syringe)	90670	133
Pevnar (discontinued) (Pneumococcal Conjugate, 7 valent) (Note: to be documented for vaccine given before 04/2010)		Pneumococcal PCV-7					90669	100
<b>Polio</b>								
IPOL® Poliovirus vaccine, inactivated	VFC VFA	IPV	6 weeks & older	0.5 ml	SC/IM	Sanofi Pasteur – PMC NDC: 49281-0860-10 (10 dose vial)	90713	10
Poliovirus vaccine, live oral historical		OPV					90712	02
<b>Rabies</b>								
Imovax		Rabies - IM Diploid cell culture		1.0 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0250-51	90675	175
RabAvert		Rabies - IM fibroblast culture		1.0 ml	IM	GlaxoSmithKline – SKB NDC: 63851-0501-01	90675	176
Rabies, ID		rabies, intradermal injection		0.1 ml	ID		90676	40

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>Respiratory Syncytial Virus (RSV)</b>								
Abrysvo™	VFC VFA	RSV, bivalent, protein subunit RSVpreF, diluent reconstituted, 0.5 mL, PF	32-36 weeks of pregnancy or 60 years and older	0.5 ml	IM	Pfizer, INC – PFR NDC: 00069-0344-01-VFC-only (1 pack, 1 dose kit) NDC: 00069-0344-05-VFA only (5 pack, 1 dose kit) NDC: 00069-0344-10 (10 pack, 1 dose kit) 00069-2465-01 (1 pack, 1 dose vial) 00069-2465-10 (10 pack, 1 dose vial)	90678	305
AREXVY	VFA	RSV, recombinant, protein subunit RSVpreF, adjuvant reconstituted, 0.5 mL, PF	60 years and older	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0848-11 (10 pack, 1 dose vial)	90679	303
mRESVIA		Respiratory syncytial virus (RSV), mRNA, injectable, preservative free	60 years and older	0.5 ml	IM	Moderna – MOD NDC: 58160-0848-11 (10 pack, 1 dose syringel)	90683	326
<b>Respiratory Syncytial Virus (RSV) Monoclonal Antibody</b>								
BEYFORTUS™	VFC	RSV, mAb, nirsevimab-alip, 0.5 mL, neonate to 24 months	0 - 24 months	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0575-15 (10 pack, 1 dose syringe)	90380	306
	VFC	RSV, mAb, nirsevimab-alip, 1.0 mL, neonate to 24 months	0 - 24 months	1.0 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0574-15 (10 pack, 1 dose syringe)	90381	307
<b>Rotavirus</b>								
RotaTeq® (3 dose)	VFC	Rotavirus, pentavalent	6 - 32 weeks	2.0 ml	Oral	Merck – MSD NDC: 00006-4047-41 (10 pack, 1 dose tube) NDC: 00006-4047-20 (25 pack, 1 dose tube)	90680	116
Rotarix® (2 dose)	VFC	Rotavirus, monovalent	6 - 24 weeks	1.5 ml	Oral	GlaxoSmithKline – SKB NDC: 58160-0740-21 (10 pack, 1 dose tube)	90681	119

Vaccine trade name or common name	Fund	Best ASIS Selection	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT Code	CVX Code
<b>TB Test</b>								
Purified Protein Derivative		PPD Test		0.1 ml	ID	Parkdale Pharmaceuticals – PD	86580	N/A
QuantiFERON – TB Gold Test (QGT-G)		QuantiFERON – TB Gold Test (QGT-G)		N/A	Blood Draw	N/A	86480	N/A
Bacillus Calmette-Guerin (BCG) live		BCG					90585	19
<b>Typhoid</b>								
Typhoid ViCPS (Typhim Vi)		Typhoid, ViCPS	2 years & older	0.5 ml	IM	Sanofi Pasteur – PMC NDC: 49281-0790-20 NDC: 49281-0790-51	90691	101
Typhoid, Oral (Vivotif Berna)		Typhoid, oral	6 years & older	4 tabs	Oral	Crucell - CRU	90690	25
Typhoid, parenteral		Typhoid, parenteral					90692	41
<b>Varicella</b>								
Varivax® Chicken Pox Vaccine	VFC VFA	Varicella	1 years & older	0.5 ml	SC	Merck – MSD NDC: 00006-4827-00 (10 pack, 1 dose vial)	90716	21
<b>Yellow Fever</b>								
Yellow Fever (Yf-Vax)		Yellow Fever	9 months & older	0.5 ml	SC	Sanofi Pasteur – PMC NDC: 49281-915-01 (single dose vial) NDC: 49281-915-05 (multi dose vial)	90717	37
Stamaril®		Yellow fever vaccine - alt					90717	183
<b>Zoster ("Shingles")</b>								
Shingrix®	VFA	Zoster, recombinant, adjuvanted	50 years & older	0.5mL	IM	GlaxoSmithKline - SKB NDC: 58160-0819-12 (1 pack, 1 dose vial) NDC: 58160-0823-11 (10 pack, 1 dose vial)	90750	187
Zostavax®		Zoster, live	50 years & older	0.65 ml	SC	Merck – MSD NDC: 00006-4963-41 (10 pack, 1 dose vial)	90736	121

## Notes

On the Vaccination View/Add Screen: there are two places to look for the appropriate vaccine choice when entering a vaccination date. Always look FIRST at the vaccine names that appear on the screen. ALL routine vaccines will appear. For less common vaccines that you can't find on this list, go to the "select" box at the bottom of the vaccine list, and choose your vaccine from the drop-down list and enter the date administered. "Unspecified" vaccines should only be used for entering historical vaccines when the specific vaccine type is unknown.

When managing your vaccine inventory in ASIS: make sure the vaccine types and lot numbers you enter match the vaccine types and lot numbers in the system. If you don't see the correct lot number on your Vaccination Detail screen, you may be entering a different vaccine (i.e., DTaP vs. DTaP-5 pertussis antigen.) Be sure to speak with the person entering your lot numbers if you notice any issues/problems.

PFS = Prefilled Syringe; MDV = Multidose vial; SDV = Single Dose vial; PFMS = Prefilled micro syringe

IM = Intramuscular; SC = Subcutaneous; ID = Intradermal; NAS = Intranasal; IV = Intra venous; PerC = Percutaneous scarification