

Complete List of Vaccine Names and CPT/CVX Codes



A list that matches the vaccine name or codes in Washington State Immunization Information System (WA IIS) with the brand name or other common names of the vaccines you use most often.

Vaccine trade name or common name	Best WAIS Selection	State Supplied	Age (Range)	Dose	Route	Manufacturer/ NDC Number	CPT code	CVX code
Combination Vaccines								
Pediarix	DTAP/HepB/IPV	✓	6 weeks +	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0811-52	90723	110
Pentacel	DTaP/HIB/IPV	✓	6 weeks - 5 yrs	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0510-05	90698	120
ProQuad	MMR/V	✓	1 yr +	0.5 ml	SQ	Merck- MSD NDC: 00006-4999-00	90710	94
Kinrix	DTaP/IPV	✓	4 - 6 yrs	0.5 ml	IM	GlaxoSmithKline – SKB NDC: 58160-0812-11	90696	130
Comvax	HEPB/HIB	✓	6 weeks +	0.5 ml	IM	Merck- MSD NDC: 00006-4898-00	90748	51
Twinrix	HepA/HepB		18 + yrs	1.0 ml	IM	GlaxoSmithKline – SKB	90636	104
MenHibrix	Meningococcal C/Y-HIB-PRP		6 weeks – 18 months	0.5ml	IM	GlaxoSmithKline – SKB	90644	148
Diphtheria, Tetanus and Pertussis								
Diphtheria and tetanus toxoids adsorbed	DT (Pediatric)	✓	6 weeks +	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0225-10	90702	28
Daptacel*	DTaP or DTaP, 5 Pertussis Antigen	✓	6 weeks +	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0286-10	90700	106
Infanrix*	DTaP	✓	6 weeks +	0.5 ml	IM	GlaxoSmithKline – SKB NDC:58160-0810-11		20
Decavac Tetanus and diphtheria toxoids adsorbed Note: To be discontinued after supply runs out	Td Adult, Preserv free	✓	7+ yrs	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0291-83	90718	113

* DTAP: Either CVX code (20 or 106) is acceptable in data exchange. In regards to inventory reporting, DTaP (CVX-20) is the default vaccine type that will be shown, in the event no lot number is not linked to the vaccine type, it will show as DTaP, 5 Pertussis Antigen (CVXC-106).

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Diphtheria, Tetanus and Pertussis (conti.)								
Tenivac Tetanus and diphtheria toxoids adsorbed Note: New after Decavac is used up	Td Adult, Preserv free	✓	7+ yrs	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0215-10	90718	113
Boostrix Tetanus Diphtheria & Acellular Pertussis	Tdap	✓	7-65+ yrs	0.5 ml	IM	GlaxoSmithKline – SKB NDC:58160-0842-11	90715	115
Adacel Tetanus Diphtheria and Acellular Pertussis	Tdap	✓	7-65+yrs	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0400-10		
Tripedia	DTaP		6 weeks +	0.5 ml	IM	Sanofi Pasteur – PMC	90700	20
DTaP, 5 Pertussis Antigen	DTaP, 5 Pertussis Antigen						90700	106
Whenever DTaP was given, even if the brand name is unknown	DTaP						90700	20
Tetanus and diphtheria toxoids adsorbed	Td Adult		7+ yrs	0.5 ml	IM	Merck - MSD	90714	09
Diphtheria, tetanus toxoids, & whole cell pertussis vaccine (will be from historical records)	DTP							
Hepatitis A								
Havrix (2 doses for pediatric/adolescent)	Hep A 2 dose - Ped/Adol	✓	12 months - 18 yrs	0.5 ml (720 EL.U)	IM	GlaxoSmithKline – SKB NDC: 58160-0825-11	90633	83
Vaqta (2 doses for pediatric/adolescents)	Hep A 2 dose - Ped/Adol	✓	12 months - 18 yrs	0.5 ml (25 U)	IM	Merck- MSD NDC: 00006-4831-41		
Havrix (3 doses for pediatric/adolescent)	Hep A 3 dose - Ped/Adol		12 months - 18 yrs	0.5 ml (360 EL.U)	IM	GlaxoSmithKline – SKB	90634	84
Vaqta (2 doses for adults)	Hep A 2 dose - Adult		19+ yrs	1.0 ml (50u)	IM	Merck- MSD	90632	52
Havrix (2 doses for adults)	Hep A 2 dose - Adult		19+ yrs	1.0 ml (1440 EL.U)	IM	GlaxoSmithKline – SKB		

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Hepatitis B								
Engerix-B Ped/Adol (3 dose schedule)	HepB Ped/Adol Preserv. Free	✓	Birth - 19 yrs	0.5 ml 10µg	IM	GlaxoSmithKline – SKB NDC: 58160-0820-11	90744	08
Recombivax HB Ped/Adol	HepB Ped/Adol Preserv. Free	✓	Birth - 19 yrs	0.5 ml 5µg	IM	Merck- MSD NDC: 00006-4981-00		
Engerix-B (4 dose schedule)	Hepatitis B - dialysis	✓		2.0 ml 40µg <i>Two X 20 µg in 1 or 2 injections</i>	IM	GlaxoSmithKline – SKB NDC: 58160-0820-11	90747	44
Recombivax HB for adults	Hep B 2 dose – Adol/Adult		11-15 years	1.0 ml 10µg	IM	Merck- MSD	90743	43
Hepatitis B (conti.)								
Engerix-B for adults	Hep B Adult		20 + yrs	1.0 ml 20µg	IM	GlaxoSmithKline – SKB	90746	43
Recombivax HB for adults			20 + yrs	1.0 ml 10µg	IM	Merck- MSD		
Various dosages depending on specific individual cases, such as high risk or dialysis.	<i>Note: there are various choices available to reflect the specific situation</i>							
HIB								
ActHib	Hib-PRP-T	✓	2 months - 5 yrs	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0545-05	90648	48
PedvaxHib	Hib-PRP-OMP	✓	2 months - 5 yrs	0.5ml	IM	Merck- MSD NDC: 00006-4897-00	90647	49
Hiberix	Hib-PRP-T		12 months – 4 years	0.5ml	IM	GlaxoSmithKline – SKB NDC:58160-0806-05	90648	48
OmniHib	Hib-PRP-T		2 months - 5 yrs	0.5 ml	IM	GlaxoSmithKline – SKB		
HibTITER	Hib-Hboc		2 months - 5 yrs	0.5ml	IM	Wyeth Ayerst – WAL	90645	47
ProHIBit (discontinued)	Hib-PRP-D							

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Human Papilloma Virus								
Gardasil	HPV, quadrivalent	✓	9 - 26 yrs	0.5ml	IM	Merck- MSD NDC: 00006-4045-41	90649	62
Cervarix™	HPV, bivalent	✓	10-25 yrs	0.5ml	IM	GlaxoSmithKline – SKB NDC: 58160-0830-52	90650	118
Immune Globuline Products (This list is not comprehensive by brand name or manufacturer)								
HyperHEP B S/D or HepaGam B (Hepatitis B Immune Globulin)	HBIG (Hepatitis B Immune Globulin)			See pkg insert for dosage and admin recommendations	IM	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)			See pkg insert for dosage and admin recommendations	IM	Talecris Biotherapeutics - TAL	90281	86
Immune Globulin, intravenous Note: Rarely used for post-exposure prophylaxis	IGIV			See pkg insert for dosage and admin recommendations	IV	Many Manufacturers	90283	87
HyperRAB S/D (Rabies Immune Globulin)	RIG			See pkg insert for dosage and admin recommendations	IM	Talecris Biotherapeutics - TAL	90375	34
Synagis (Respiratory Syncytial Virus Immune Globulin)	RSV-IGIM			See pkg insert for dosage and admin recommendations	IM	MedImmune – MED	90378	93
HyperTET S/D (Tetanus Immune Globulin)	TIG			See pkg insert for dosage and admin recommendations	IM	Talecris Biotherapeutics - TAL	90389	13
VariZIG (Varicella Zoster Immune Globulin) Note: Used for post exposure prophylaxis to Chickenpox	VZIG			See pkg insert for dosage and admin recommendations	IM	Cangene Corporation (Canada) – CNJ	90396	36
Influenza								
Fluzone Preservative Free (state supplied)	Influ Split, 6-35 mos, pres free	✓	6 - 35 mos	0.25 ml PFS	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0113-25	90655	140
Fluzone Contains Preservative	Influ Split, 36+ mos	✓	3 -18 yrs	0.5ml MDV	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0392-15	90658	141

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Influenza Conti.								
FLUARIX Quadrivalent	Influenza, inj, quad PF, 36+ mos	✓	3+ yrs	0.5ml PFS	IM	GlaxoSmithKline – SKB NDC: 58160-0900-52	90686	150
Flumist Quadrivalent	Influenza, live intranasal, quadrivalent	✓	2 - 18 yrs	0.2 ml PIS	IN	MedImmune – MED NDC: 66019-0300-10	90672	149
Afluria Contains Preservative	Influ Inact 9 + yrs w/Thimerosol		9+ yrs	0.5ml MDV	IM	CSL Biotherapies, INC	90658	141
Afluri Preservative Free	Influ Inact 9+yrs pres free		9+ yrs	0.5ml PFS	IM	CSL Biotherapies, INC	90656	140
FLUARIX	Influ Split, 36+ mos pres free		3+ yrs	0.5ml PFS	IM	GlaxoSmithKline – SKB	90656	140
FLUARIX Quadrivalent	Influenza, inj, quad PF, 36+ mos		3+ yrs	0.5ml PFS	IM	GlaxoSmithKline – SKB	90686	150
Flublok	Inf, recomb, inj, 18+ yrs, PF		18-49 yrs	0.5ml SDV	IM	Protein Sciences Corp – PSC	90673	155
Flucelvax	Influ split, 18+ yrs, PF		18+ yrs	0.5ml PFS	IM	Novartis Pharmaceutical Corp. – NOV	90661	153
FluLaval	Influ split, 18+ years		18+ yrs	0.5 ml MDV	IM	GlaxoSmithKline – SKB NDC: N/A	90658	141
Flumist Quadrivalent	Influenza, live intranasal, quadrivalent		2 - 49 yrs	0.2 ml PIS	IN	MedImmune - MED	90672	149
Fluvirin PF	Influ Inact 48+ mos pres free		3 - 18 yrs	0.5ml PFS	IM	Novartis Pharmaceutical Corp. – NOV	90656	140
Fluvirin Contains preservative	Influ Inact. 48+ mos, w/Thimerosol		4+ yrs	0.5ml MDV	IM	Novartis Pharmaceutical Corp. – NOV	90658	141
Fluzone Preservative Free	Influ Split, 36+ mos, pres free		3+ yrs	0.5ml SDV; PFS	IM	Sanofi Pasteur – PMC (AKA: Aventis)	90656	140
Fluzone Contains Preservative	Influ Split, 36+ mos		3+ yrs	0.5ml MDV	IM	Sanofi Pasteur – PMC (AKA: Aventis)	90658	141

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Influenza Conti.								
Fluzone High Dose	Influenza, High Dose		65+ yrs	0.5ml PFS	IM	Sanofi Pasteur – PMC (AKA: Aventis)	90662	135
Fluzone Intradermal	Influenza, Intradermal PF		18-64yr	0.1mL PFMS	ID	Sanofi Pasteur – PMC (AKA: Aventis)	90654	144
Japanese Encephalitis								
JE-VAX - Japanese Encephalitis	Japanese Encephalitis		12- 35 mos, 3 yrs +	0.5ml 1.0 ml	SQ	Sanofi Pasteur – PMC (AKA: Aventis)	90735	39
IXIARO - Japanese Encephalitis	Japanese Encephalitis-IM		17 yrs +	0.5ml	IM	Novartis Pharmaceutical Corp. – NOV	90738	134
Measles, Mumps & Rubella								
MMRII - Measles, Mumps & Rubella	MMR	✓	1+ yrs	0.5ml	SQ	Merck- MSD NDC: 00006-4681-00	90707	03
Meningococcal								
Menactra Meningococcal Conjugate vaccine (Serogroups A, C, Y, W-135)	Meningococcal (MCV4P)	✓	9 mos-55 yr	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0589-05	90734	114
Menveo Meningococcal Conjugate vaccine (Serogroups A, C, Y, W-135)	Meningococcal (MCV4O)	✓	2-55 yr	0.5 ml	IM	Novartis Pharmaceutical Corp. – NOV NDC: 46028-0208-01	90734	136
Menomune A/C/Y/W-135 Meningococcal Polysaccharide vaccine	Meningococcal (MPSV4)		3-18 mos (2 doses), 19+ mos (1 dose)	0.5 ml	SQ	Sanofi Pasteur – PMC (AKA: Aventis)	90733	32
Pneumonia								
Prenar 13 (Pneumococcal Conjugate, 13 valent)	Pneumococcal, PCV-13	✓	2 - 59 months	0.5ml	IM	Wyeth Ayerst – WAL NDC: 00005-1971-02	90670	133
Pneumovax 23 (Pneumococcal, polyvalent)	Pneumococcal, (PPSV)	✓	≥2 yrs w/health risks	0.5ml	SQ/IM	Merck- MSD NDC: 00006-4943-00	90732	33
Pnu-Imune 23	Pneumococcal, (PPSV)		65+ yrs,	0.5ml	SQ/IM	GlaxoSmithKline – SKB	90732	33


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Pneumonia Conti.								
Prennar (Pneumococcal Conjugate, 7 valent) (Note: to be documented for vaccine given before 04/2010)	Pneumococcal, (PCV)		2 - 59 months	0.5ml	IM	Wyeth Ayerst – WAL	90669	100
Polio								
IPOL Poliovirus vaccine, inactivated	IPV	✓	6 weeks +	0.5 ml	SQ	Sanofi Pasteur – PMC (AKA: Aventis) NDC: 49281-0860-10	90713	10
Poliovirus vaccine, live oral	OPV							
Rabies								
Imovax	Rabies			1.0 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis)	90675	18
Rabavert	Rabies			1.0 ml	IM	Novartis Pharmaceutical Corp. – NOV		
Rabies, ID	Rabies, Intradermal			0.1ml	ID		90676	40
Rotavirus							90680	116
Rotateq	Rotavirus, pentavalent RV5	✓	2-32 months	2.0 ml	ORAL	Merck- MSD NDC: 00006-4047-41		
Rotarix	Rotavirus, monovalent RV1	✓	6-24 weeks	1.0 ml	ORAL	GlaxoSmithKline – SKB NDC: 58160-0845-52	90681	119
TB test							90681	119
Purified Protein Derivative (PPD)	PPD Test			0.1 ml	ID	Parkdale Pharmaceuticals – PD	86580	96
QuantiFERON – TB Gold Test (QGT-G)	QuantiFERON – TB Gold Test (QGT-G)			N/A	Blood Draw	N/A	86480	N/A
Typhoid								
Typhoid ViCPs	Typhoid, ViCPs		2 yr +	0.5 ml	IM	Sanofi Pasteur – PMC (AKA: Aventis)	90691	101
Typhoid, Oral (Vivotif Berna)	Typhoid, Oral		6 yr +	4 tabs	ORAL	Berna Products Corp.- BPC	90690	25


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Typhoid Conti.								
Typhoid, parenteral	Typhoid, parenteral							
Varicella								
Varivax Chicken Pox Vaccine	Varicella	✓	1+ yrs	0.5 ml	SQ	Merck- MSD NDC: 00006-4827-00	90716	21
Yellow Fever								
Yellow Fever	Yellow Fever		9+ months	0.5ml	SQ	Sanofi Pasteur – PMC (AKA: Aventis)	90717	37
Zoster ("Shingles")								
Zostavax	Zoster		50 + yrs	0.65 ml	SQ	Merck- MSD	90736	121

Notes

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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.
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If your practice manages vaccine inventory in WA IIS: make sure the vaccine types you enter match the vaccine types your lot number manager has entered. If you don't see the correct lot number on your Vaccination Detail screen, you and your lot number manager may be entering different vaccines (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.
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FLU Notes to consider

 - ✍ **PFS** = Prefilled Syringe; **MDV** = Multidose vial; **SDV** - Single Dose vial; **PFMS** – Prefilled micro syringe
 - ✍ **WA IIS** staff discourage the use of the vaccine type "Influenza Whole". This vaccines type has not been used in the U.S. for some time