

**Vaccines for Children (VFC), birth through 18 years & Vaccine for Adults (VFA), 19 through 64 years
Vaccine Availability Effective 7/1/2019**

VERMONT DEPARTMENT OF HEALTH – IMMUNIZATION PROGRAM

VACCINE	BRAND NAME	NDC	CPT CODE	CVX CODE	VERMONT AVAILABILITY			
					VFC	VFA	NOTES	
9vHPV	Gardasil 9	00006-4121-02	90651	165	✓	✓	Age 9 – 26 only *	
DTaP	Daptacel	49281-0286-10	90700	106	✓			
	Infanrix	58160-0810-11		20				
DTaP-HepB-IPV	Pediarix	58160-0811-52	90723	110	✓			
DTaP-IPV/Hib	Pentacel	49281-0510-05	90698	120	✓			
DTaP-IPV	Kinrix	58160-0812-11	90696	130	✓			
	Quadracel	49281-0562-10						
HepA	Vaqta	00006-4095-02	90633	83	✓			
		00006-4096-02	90632	52		✓		
	Havrix	58160-0825-52	90633	83	✓			
		58160-0826-52	90632	52		✓		
HepB	Recombivax HB	00006-4981-00	90744	08	✓			
		00006-4093-02						
	Engerix B	58160-0820-52	90746	43			✓	
		58160-0821-52					✓	
	HepB	HepB	43528-0003-05	90739	189		✓	
HepA-HepB	Twinrix	58160-0815-52	90636	104		✓		
Hib	PedvaxHIB	00006-4897-00	90647	49	✓		Refer adults to hospital pharmacy	
	ActHIB	49281-0545-03	90648	48				
	Hiberix	58160-0818-11						
Influenza 2019-20	Fluzone Quad	49281-0419-10	90686	150	✓			
		49281-0419-50						
	FluLaval Quad	19515-0906-52				✓	✓	
	Fluarix Quad	58160-0896-52				✓	✓	
	Flucelvax Quad	70461-0319--03				90674	171	✓
FluMist Quad	66019-0306-10	90672	149	✓				
IPV	IPOL	49281-0860-10	90713	10	✓		Refer adults to travel clinics	
MenACWY	Menactra	49281-0589-05	90734	114	✓	✓		
	Menveo	58160-0955-09		136				
MenB	Trumenba	00005-0100-10	90621	162	✓	✓		
	Bexero	58160-0976-06	90620	163				
		58160-0976-20						
MMR	MMR II	00006-4681-00	90707	03	✓	✓		
MMRV	ProQuad	00006-4171-00	90710	94	✓			
PCV13	Prevnar 13	00005-1971-02	90670	133	✓	✓		
PPSV23	Pneumovax 23	00006-4943-00	90732	33	✓	✓		
		00006-4837-03						
RV	RotaTeq	00006-4047-41	90680	116	✓			
	Rotarix	58160-0854-52	90681	119				
RZV	Shingrix	58160-0819-12	90750	187		✓	Age 50 – 64 only	
		58160-0823-11						
Td	TDVAX	13533-0131-01	90714	09	✓	✓		
Tdap	Boostrix	58160-0842-11	90715	115	✓	✓		
	Adacel	49281-0400-10						
VAR	Varivax	00006-4827-00	90716	21	✓	✓		

* Practices will be notified upon publication of new ACIP recommendations in the MMWR for expanded use of 9vHPV. Age availability will expand to age 9 through 45 years.