



Indiana State
Department of Health

**INDIANA STATE DEPARTMENT OF HEALTH
IMMUNIZATION DIVISION
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Contents:

**Vaccine List
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Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation or Name	Mfr.	CHIRP Mfr. Abbrev	Age group licensed or within ACIP guidelines to receive vaccine	Admin. Route	Comments
DIPHTHERIA, TETANUS, AND PERTUSSIS VACCINES							
Daptacel (2002)	DTaP (Diphtheria, Tetanus, acellular Pertussis)	DTAP	Sanofi Pasteur (SP)	PMC	6 weeks-6 years	IM	Cannot be used on or after 7 th birthday, but if given, dose can be counted. Not licensed for 5 th dose.
Infanrix (1997)	DTaP	DTAP	Glaxo Smith Kline (GSK)	SKB	6 weeks-6 years	IM	Cannot be used on or after 7 th birthday, but if given, dose can be counted.
DT (1984)	Diphtheria and tetanus Toxoids absorbed	DT (Pediatric)	Sanofi Pasteur (SP)	PMC	6 weeks – 6 years	IM	Pediatric formulation. Used if patient has contraindication to pertussis component
DTaP , brand unknown, historical data entry	DTaP	DTaP- unspecified					
DTP (various brands) Will be historical entry	<i>DTP</i> (Diphtheria, Tetanus, whole-cell Pertussis)	<i>DTP</i>				IM	<i>NO LONGER LICENSED</i> (see <i>Discontinued Vaccines</i> page)
Historical data entry: unable to determine if DTP or DTaP, given between 1991-1997	unspecified	DTP-unspecified			6 weeks-6 years		Would have been given during transitional years of 1991-1997
Pediarix	See Combination Vaccines page						
Kinrix	See Combination Vaccines page						
Pentacel	See Combination Vaccines page						
Td (generic) (1970)	Td (Tetanus and diphtheria toxoids adsorbed)	Td (Adult)	Mass. Biological Lab		7 years and older	IM	Used if tetanus indicated for ages 7-9 years; used as tetanus booster for all ages every 10 years; used for wound management if indicated within 5 years of last tetanus vaccine
Tetanus Toxoid, historical entry (1978)	TT	Tetanus Toxoids, NOS	SP	PMC	7 years and older	IM	Single antigen tetanus vaccine Given only if allergic to diphtheria toxoid.

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Boostrix (2005)	Tdap (Tetanus, diphtheria, acellular pertussis)	Tdap	GSK	SKB	10+ years	IM	Recommended for persons 11-18 years and adults 19-64 years who have not received Tdap. Also licensed/recommended for adults 65+ who have close contact with infant < 12 months
Adacel (2005)	Tdap	Tdap	SP	PMC	10 - 64 years	IM	Recommended for persons 11-18 years and adults 19-64 years who have not received Tdap. Also recommended for adults 65+ who have close contact with infant < 12 months (off-label)
Tenivac (2003)	Td	Td (Adult) preservative free	SP		7 years and older	IM	7 years and older

HAEMOPHILUS INFLUENZAE TYPE B (HIB) VACCINES

ActHib (1993)	Hib (PRP-T)	Hib-PRP-T	SP	PMC	6 weeks – 59 months	IM	4 dose series (includes booster dose). Children starting late may not receive all doses.
Pedvax-Hib (1989)	Hib (PRP-OMP)	Hib-PRP-OMP	Merck	MSD	6 weeks – 59 months	IM	3 dose series (includes booster dose). Children starting late may not receive all doses. Any combination (or unknown type) of Hib vaccine =must have 4 doses.
Hiberix (2009)	Hib (PRP-T)	Hib-PRP-T	GSK	SKB	6 weeks -- 4 years	IM	Primary series: One dose each at 2, 4, and 6 months. Booster: One dose at 15 through 18 months of age.
Pentacel	See Combination Vaccines page						
Historical data entry: Hib		Hib-Unspecified					

HEPATITIS A VACCINES

Havrix (1995) (Pediatric/Adol.)	Hepatitis A	HepA 2dose- Ped/Adol	GSK	SKB	1-18 years	IM	2 doses, 6 months apart Dose = 0.5 ml
Havrix (Adult)	Hepatitis A	HepA 2dose- Adult	GSK	SKB	19 years and older	IM	2 doses, 6 months apart. Dose = 1.0 ml
Vaqa (1996) (Pediatric/Adol.)	Hepatitis A	Hep A 2 dose- Ped/Adol	Merck	MSD	1-18 years	IM	2 doses, 6-18 months apart Dose = 0.5 ml

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Vaqt (Adult)	Hepatitis A	HepA 2dose-Adult	Merck	MSD	19 years and older	IM	2 doses, 6-12 months apart. Dose = 1.0 mL
Historical Data Entry: Hep A Vaccine type unknown	Hepatitis A	Hep A- unspecified				IM	
Twinrix (2001)	See Combination Vaccines page						

HEPATITIS B VACCINES

Engerix-B (1989) (Pediatric/Adol.)	Hepatitis B	Hepatitis B-- adol. or pediatric	GSK	SKB	Birth through 19 years	IM	3 dose series. Do not restart series. Observe minimum ages & intervals. Do not give gluteal.
Engerix-B (Adult)	Hepatitis B	Hep B Adult	GSK	SKB	20 years and older	IM	3 dose series. Do not restart series. Do not give gluteal. Vaccinate adults 19-64 diagnosed with diabetes
Hepilisav-B (Adult)	Hepatitis B	Hep B (Adjuvanted)	Dynavax	DVX	18 years and older	IM	2 doses, 1 month apart. Dose = 0.5 mL
Recombivax HB (1986) (Pediatric/ Adolescent)	Hepatitis B	Hepatitis B-- adol. or pediatric	Merck	MSD	Birth through 19 years	IM	3 dose series. Do not restart series. Observe minimum ages & intervals. Do not give gluteal. 2 pediatric doses may be substituted for one adult dose.
Recombivax HB (2-dose) for age 11-15 years (1999)	Hepatitis B	HepB 2 dose- Adol/Adult	Merck	MSD	Ages 11-15 years ONLY	IM	2 doses given 4-6 months apart will complete series with this vaccine. Do not give gluteal.
Recombivax HB (Adults)	Hepatitis B	HepB Adult	Merck	MSD	20 years and older	IM	3 dose series. Do not restart series. Do not give gluteal. Vaccinate adults 19-64 diagnosed with diabetes
Pediarix	See Combination Vaccines page						
Twinrix	See Combination Vaccines page						

Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation or Name	Mfr.	CHIRP Mfr. Abbrev	Age group licensed or within ACIP guidelines to receive vaccine	Admin Route	Comments
Atypical dosage based on patient's health history, i.e. dialysis	Hepatitis B	Note that there are choices on various dosages in CHIRP (dialysis, High risk)				IM	
Historical data entry: vaccine type unknown	Hepatitis B	Hep B-unspecified				IM	
HUMAN PAPILLOMAVIRUS VACCINES							
Gardasil 9 (2014)	HPV9	HPV 9-valent vaccine	Merck	MSD	9-26 years	IM	2 or 3 dose series. Observe minimum ages and intervals.
Historical data entry: vaccine type unknown	HPV	HPV-NOS				IM	
MEASLES, MUMPS, AND RUBELLA							
MMR-II (1971)	MMR Measles, mumps, rubella	MMR	Merck	MSD	1 year and older	SC	2 dose series given at 12-15 mos. & at 4-6 years of age. Doses must be separated by at least 4 weeks.
ProQuad (2005)	See Combination Vaccines page						
MENINGOCOCCAL VACCINES							
Menactra (2005)	Meningococcal conjugate (MCV4)	Mening MCV4P	SP	PMC	9 months - 55 years	IM	Routinely recommended for children 11-12 years of age with booster dose at 16 years of age
	<p>6/2009: Children through age 18 years who received their first dose of MCV4 or MPSV4 at ages 2-6 years and remain at increased risk for meningococcal disease should receive an additional dose of MCV4 at 3 years after their first dose.</p> <p>Children through age 18 years who received a dose of MCV4 or MPSV4 after age 6 and remain at increased risk for meningococcal disease should receive an additional dose of MCV4 at 5 years after their previous dose.</p>						
Menveo (2010)	Meningococcal conjugate (MCV4)	Mening MCV4O	Novartis	GSK	2 months-55 years	IM	Routinely recommended for children 11-12 years of age with booster dose at 16 years of age
Bexsero (2015)	Meningococcal Serogroup B	Meningococcal B, OMV	GSK	SKB	10 years and older	IM	Category B recommendation for 16-23 year olds 2 dose series

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Trumenba (2014)	Meningococcal Serogroup B	Meningococcal B, recombinant	Pfizer	PFR	10 years and older	IM	Category B recommendation for 16-23 year olds 2 or 3 dose series
Menjugate (Novartis), Meningitec (Pfizer) NeisVac-C (GSK)	<i>Men- C , MCC</i>	<i>Meningococcal C conjugate</i>					<i>Not licensed in US, would be administered in other country. 2 doses.</i>
Historical data entry: vaccine type unknown	Meningococcal	Meningococcal NOS					Does not count towards school requirement. Use only when unable to determine if MCV4 or MPSV4 was administered
PNEUMOCOCCAL VACCINES							
Prevnar 13 (2010)	Pneumococcal conjugate (PCV13)	Pneumococcal (PCV13)	Pfizer	PFR	6 weeks – 64 years (ACIP vote August 2014 to offer <i>routinely</i> in adults 65+)	IM	4 dose series, if child is behind may not receive all doses of vaccine. Recommend single supplemental dose for children ages 14-59 months who received only PCV7 vaccine. Adults at high-risk for IPD should receive dose of PCV13 followed by recommended doses of PPSV23
Pneumovax23 (1977)	Pneumococcal polysaccharide or polyvalent vaccine (PPSV)	Pneumococcal (PPSV)	Merck	MSD	2 years and older	SC or IM	Recommendation is for adults age 65 and older: 1 dose. Second dose if given before age 65 years. (continued...)_ Given age 2 yrs and older if high risk condition. (See Pink Book.)
Historical Data Entry: vaccine type unknown	Pneumococcal	Pneumococcal- unspecified					

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POLIO VACCINES							
IPOL (1990)	IPV (Polio)	IPV	SP	PMC	6 weeks – 18 years	IM or SC	Adults with no history or vaccination or travelers to foreign countries may need IPV series. 4 th dose on or after 4 th birthday and 6 month interval from prior dose required for grades K-8 for 2018- 2019 school year
	*Minimum ages and intervals should not be used for vaccine administration in first 6 mos of life unless at imminent risk of exposure to polio.						
Kinrix	See Combination Vaccines page						
Pentacel	See Combination Vaccines page						
Pediarix	See Combination Vaccines page						
Historical data entry: vaccine type unknown, given prior to year 2000	Polio	Polio-Unspecified					
ROTAVIRUS VACCINES							
Rotateq (2006)	Rotavirus, live, oral vaccine (RV5)	Rotavirus-pentavalent	Merck	MSD	6-32 weeks	oral	3 dose series; complete series by 8 months, 0 days.
Rotarix (2008)	Rotavirus live, oral vaccine (RV1)	Rotavirus-monovalent	GSK	SKB	6-24 weeks	oral	2 dose series; complete series by 8 months, 0 days.
Historical Data Entry: vaccine type unknown	Rotavirus	Rotavirus NOS					

Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation Or Name	Mfr.	CHIRP Mfr. Abbrev	Age group licensed or within ACIP guidelines to receive vaccine	Admin Route	Comments
VARICELLA/ZOSTER VACCINES							
Varivax (1995)	Varicella vaccine (VZV)	Varicella	Merck	MSD	1 year and older	SC	2 doses recommended, Ages 12 month-12 years, doses separated by 3 months Ages 13 and older: doses separated by 4 weeks.
ProQuad (2005)	See Combination Vaccines page						
Zostavax (2006)	Zoster	Zoster, live	Merck	MSD	FDA: ≥ 50 years ACIP: ≥ 60 years	SC	1 dose.
Shingrix (2017)	Zoster	Zoster recombinant	GSK	SKB	≥ 50 years	IM	2 dose series at 0 & 2-6 months.
COMBINATION VACCINES							
MMR-II (1978)	Measles, Mumps and Rubella	MMR	Merck	MSD	1 year and older	SC	2 dose series given at 12-15 mos. & at 4-6 years of age.
ProQuad (2005)	Measles, Mumps, Rubella <i>and</i> Varicella	MMR/Varicella	Merck	MSD	1 year and older	SC	2 doses. Ages 12 months-12 years, doses separated by 3 months.
Pediarix (2002)	DTaP + HepB + IPV (Infanrix, Engerix-B, IPV)	DTaP/HepB/IPV	GSK	SKB	6 weeks through 6 years	IM	Licensed for Primary series only: first three doses of DTaP and IPV. Note minimum intervals for Hep B component.
Pentacel (2008)	DTaP + IPV + Hib (Daptacel + IPV + ActHib)	DTaP/IPV/Hib	SP	PMC	6 weeks – 4 years	IM	4 doses at 2-4-6- and 15-18 months.
Twinrix (2001)	Hepatitis B adult + Hepatitis A pediatric	HepA/HepB	GSK	SKB	18 years and older	IM	3 dose series. Also approved for 4-dose accelerated schedule.
Kinrix (2008)	DTaP + IPV	DTaP/IPV	GSK	SKB	4-6 years	IM	Licensed for 4 th dose of IPV and 5 th dose of DTaP only.
Quadracel (2015)	DTaP + IPV	DTaP/IPV	SP	PMC	4-6 years	IM	Licensed for 4 th or 5 th dose of IPV and 5 th dose in DTaP series

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INFLUENZA VACCINES							
Afluria Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent, preservative free	Seqirus	SEQ	≥18 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Afluria Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent	Seqirus	SEQ	≥18 years	IM	Dose = 0.5 mL 5.0 mL multidose vial (by needle/syringe) 18 - 64 years (by jet injector)
Fluarix Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent, preservative free	GSK	SKB	≥3 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
FluLaval Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent, preservative free	GSK	SKB	≥6 months	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
FluLaval Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent	GSK	SKB	≥6 months	IM	Dose = 0.5 mL 5.0 mL multidose vial
Fluzone Quadrivalent, pediatric	Inactivated influenza vaccines, quadrivalent (IIV4s)	Influenza, injectable, quadrivalent, preservative free, pediatric	SP	PMC	6 through 35 months	IM	Dose = 0.25 mL 0.25 mL prefilled syringe
Fluzone Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent, preservative free	SP	PMC	≥3 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe 0.5 mL single-dose vial

Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation Or Name	Mfgr	Chirp Mfgr Abbrev	Age Group Licensed or Within ACIP guidelines To Receive Vaccine	Admin. Route	Comments
Fluzone Quadrivalent	Inactivated influenza vaccines, quadrivalent (IIV4s)	influenza, injectable, quadrivalent	SP	PMC	≥6 months	IM	Dose = 0.5 mL 5.0 mL multidose vial
Flucelvax Quadrivalent	Inactivated influenza vaccine, quadrivalent (ccIIV4), cell culture-based	Influenza, injectable, MDCK, preservative free, quadrivalent	Seqirus	SEQ	≥4 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Flucelvax Quadrivalent	Inactivated influenza vaccine, quadrivalent (ccIIV4), cell culture-based	Influenza, injectable, MDCK, quadrivalent, preservativet	Seqirus	SEQ	≥4 years	IM	Dose = 0.5 mL 5.0 mL multidose vial
Fluzone Intradermal Quadrivalent	Inactivated influenza vaccine, quadrivalent (IIV4), intradermal	influenza, intradermal, quadrivalent, preservative free	SP	PMC	18 through 64 years	ID	0.1 mL single-dose prefilled microinjection system
Afluria	Inactivated Influenza Vaccines, trivalent (IIV3s), standard-dose	Influenza, seasonal, injectable, preservative free	Seqirus	SEQ	≥5 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Afluria	Inactivated Influenza Vaccines, trivalent (IIV3s), standard-dose	Influenza, seasonal, injectable	Seqirus	SEQ	≥5 years	IM	Dose = 0.5 mL 5.0 mL multidose vial (by needle/syringe) 18 - 64 years (by jet injector)

Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation Or Name	Mfgr	Chirp Mfgr Abbrev	Age Group Licensed or Within ACIP guidelines To Receive Vaccine	Admin. Route	Comments
Fluvirin	Inactivated Influenza Vaccines, trivalent (IIV3s), standard-dose	Influenza, seasonal, injectable, preservative free	Seqirus	SEQ	≥4 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Fluvirin	Inactivated Influenza Vaccines, trivalent (IIV3s), standard-dose	Influenza, seasonal, injectable	Seqirus	SEQ	≥4 years	IM	Dose = 0.5 mL 5.0 mL multidose vial
Fluad	Adjuvanted inactivated influenza vaccine, trivalent (aIIV3)	influenza, trivalent, adjuvanted	Seqirus	SEQ	≥65 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Fluzone High-Dose	Inactivated Influenza Vaccine, trivalent (IIV3), high-dose	Influenza, high dose seasonal	SP	PMC	≥65 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Flublok Quadrivalent	Recombinant Influenza Vaccine, quadrivalent (RIV4)	influenza, recombinant, quadrivalent, injectable, preservative free	Protein Sciences	PSC	≥18 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
Flublok	Recombinant Influenza Vaccine, trivalent (RIV3)	influenza, recombinant, injectable, preservative free	Protein Sciences	PSC	≥18 years	IM	Dose = 0.5 mL 0.5 mL prefilled syringe
FluMist Quadrivalent	Live Attenuated Influenza Vaccine, quadrivalent (LAIV4)		MedImmune	MED	2 through 49 years	Intra-nasal	0.2 mL single-dose prefilled intranasal sprayer

Vaccine Brand Name (Year licensed by FDA)	Vaccine Generic Name	CHIRP Abbreviation Or Name	Mfgr	Chirp Mfgr Abbrev	Age Group Licensed or Within ACIP guidelines To Receive Vaccine	Admin. Route	Comments
Historical Data Entry: vaccine type unknown	Influenza	Influenza unspecified					

SEASONAL INFLUENZA VACCINES: IMPORTANT INFORMATION

Seasonal Influenza Vaccine: Children 6 months through 8 years who have received fewer than 2 doses of seasonal influenza vaccine before July 1, 2018 should receive 2 doses of influenza vaccine at least 4 weeks apart. Children who received 2 doses prior to the current 2018-2019 influenza season will only need 1 dose during the current season.

**Influ Inact 48+ mos pres free and Influenza Inact 48+ mos w/Thimerosal are other CHIRP codes which may be used for the trivalent Fluvirin® vaccine

***Influ 36+ mos pres free is another CHIRP code that can be used with the trivalent Fluarix® and Fluzone® vaccine in the single-dose syringe presentation

DISCONTINUED VACCINES

Vaccine Brand Name	Vaccine Generic Name	CHIRP Abbreviation Or Name	Manufacturer	Years of Use	Comments
Acel-Immune	DTaP	DTaP	Pfizer (WLV)	1991-2000	
Attenuvax	Measles (live)	Measles	Merck		
bCAPSA 1	Hib (polysaccharide)			1985-1989	
Biavax II	Mumps + Rubella	Rubella/mumps	Merck		12 months and older
Cendevax	Rubella (live)	rubella		1969-79	
Certiva	DTaP		NAV/ALI	1998-2000	
Cervarix	HPV2	HPV, bivalent	GSK	Discontinued 2016	
Decavac	Td	AdultTd- Preserv. Free	SP	1953-2012	
Comvax	Hepatitis B pediatric + Pedvax-Hib	HepB/Hib	Merck	Discontinued 2014	
Dip-Pert-Tet	DTP (Diphtheria, Tetanus, whole-cell Pertussis)	DTP		Prior to 1997	
Ditanrix	Td				
<i>Diphtheria Toxoid</i>	<i>Diphtheria (D)</i>	<i>Diphtheria Toxoid</i>			<i>Not available.</i>
Ecolarix	Rubella (live) + measles	M/R		NA	
Gardasil	HPV4	HPV, quadrivalent	Merck	Through 2017	
GENHEVAC B PASTEUR	Hep B				
Heptavax-B	Hepatitis B (plasma derived)			1981-1990	
Hexavac	DTaP + Polio + Hep B + Hib				
Hlberix	Hib				
Hib-Immune	Hib polysaccharide			1985-1989	
HibTiter	Hib (Hboc)	Hib-Hboc	Pfizer	1990-2007	
HibVax	Hib (polysaccharide)			1985-1989	
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, live virus for nasal administration	MedImmune	2009 - 2010	2-49 years
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, multi-dose with thimerosal	CSL	2009 - 2010	3 years and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, multi	SP	2009 - 2010	6 months and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, multi	ID Biomedical/GSK	2009 - 2010	18 years and older

Vaccine Brand Name	Vaccine Generic Name	CHIRP Abbreviation Or Name	Manufacturer	Years of Use	Comments
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, multi	Novartis	2009 - 2010	4 years and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, all formulations		2009 - 2010	
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, single dose	Novartis	2009 -2010	4 years and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, single dose	SP	2009 - 2010	36 months and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, single dose	CSL	2009 - 2010	36 months and older
Influenza A (H1N1) 2009 monovalent	Influenza	Novel H1N1, .25 single dose w/out thimerosal	SP	2009 - 2010	6-35 months
M-Vac	Measles	measles		1963-79	
M-M-Vax	Measles + mumps			1973	
Menhibrix	Mening + Hib	Meningococcal C/Y-HIB PRP	GSK	2012 - 2017	2, 4, 6 & 12-15 months. Administer 4 th dose through 18 months
Menomune	Meningococcal polysaccharide	Meningococcal (MPSV4)	SP	1981-2017	2 years and older
MeruVaxII	Rubella (live)	Rubella	Merck	1969 - 1979	
MumpsVax	Mumps (live)	Mumps	Merck		
OmniHib	Hib (PRP-T)	Hib-PRP-T	GSK		
Orimune	Polio (live, oral)	OPV	Lederle	1961-2000	
Pentacoq	DTP* + Polio + Hib				
Pfizer-Vax Measles-K	Measles (inactivated)			1963-1968	
Pfizer-Vax Measles-L	Measles live			1965-1970	
Pnu-Immune23	Pneumococcal vaccine	Pneumococcal(PPV23)		1979-1983	
Poliovax	Polio (inactivated)		SP	1988-91	
ProHIBit	Hib (PRP-D)	Hib-PRP-D	Pasteur-Merieux	1987-2000	Was a booster dose only
Pprevnar 7	PCV7	PCV7	Pfizer	2000-2011	Replaced by PCV13
Purogenated	DT (pediatric)				
Quadrigen	DTP-Polio			1959-1968	
Rotashield	Rotavirus, RV	Rotavirus tetravalent	WLV	1998-1999	
Rubelogen	Rubella (live)			1969-1972	
Rubeovax	Measles (live)			1963-1971	
Solgen	DTP*	DTP	Lederle	1962-77	

Vaccine Brand Name	Vaccine Generic Name	CHIRP Abbreviation Or Name	Manufacturer	Years of Use	Comments
Tetracoq	DTP* + polio				
Tetramune	DTP* + Hib		Lederle		
Tridipigen,	DTP	DTP		Prior to 1997	
TriHibit	DTaP + ActHib +	DtAp/Hib	SP	1996-2011	
Tri-Immunol,	DTP	DTP	Lederle	Prior to 1997	
Trinivac	DTP*	DTP		1952-64	
Tripacel	DTaP	DTaP	SP	1992-2011	<i>Discontinued</i>
Tripedia	DTaP	DTaP			
Tritanrix	DTP* + Hep B		GSK		
Trivivac		DTP		Prior to 1997	
Attenuvax* monovalent	measles	measles	Merck	1963-2009	*No longer available as monovalent vaccine, still used in M-M-R II.
MumpsVax* monovalent	mumps	mumps	Merck	1967-2009	*No longer available as monovalent vaccine, still used in M-M-R II. 2 doses are now required in Indiana
MeruVaxII* monovalent	rubella	rubella	Merck	1969-2009	*No longer available as monovalent vaccine, still used in M-M-R II. 1 dose required

*DTP = DTwP

Additional discontinued vaccine information can be found at:

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/discontinued-vac.pdf>

COMMON VACCINES GIVEN OUTSIDE THE US

Vaccine Abbreviation / Name	What It means
SABIN Imovax Polio	Mexico: Polio virus vaccine Canada: Polio vaccine
Triple	Mexico: DTP (pertussis, difteria, tetano)
Td-IPV	UK: given to 13-18 yr olds
Tripacel	Canada: DTP
Guadruple	Mexico: DTP & Hib
Penta	Canada: DTP + Hib
Quadracel	Canada: DTaP + IPV
Pentavalente	Mexico: DTP + Hep B + Hib
Pentavac	Outside US: DTaP + Hib + IPV
Pentacoq	Outside US: DTP + Hib + IPV
Guadracel	Outside US: DTaP + IPV
Priorix	Canada: MMR (measles, mumps, rubella)
Triple Viral (SRP)	Mexico: Sarampion, rubeola, parotiditis oc paperas (MMR)
SR	Mexico: Sarampion, rubeola (measles & rubella only)
Antisarampion	Mexico: Measles only
Antihepatitis B	Mexico: Hepatitis B vaccine
Varivax II Varilrix	Canada: varicella vaccine
Varicela	Mexico: varicella vaccine
Avaxim Epaxal Berna	Canada: Hepatitis A vaccine
Twinrix Jr	Canada and Outside US: Hep A + Hep B vaccine (pediatric)
Group A & C Mencevax AC	Canada: Meningococcal polysaccharide vaccine
Menjugate Neis Vac-C	Canada: meningococcal conjugate vaccine
Antineumococica Conjugada (7 serotipos)	Mexico: pneumococcal conjugate vaccine (PCV7)
Pnu-Immune 23	Canada: Pneumococcal polysaccharide vaccine (PPV23)

Additional foreign language vaccine product information can be found at

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/foreign-products-tables.pdf>