## Vaccine Fact Sheet

Brand Name and Manufacturer	Adacel® Sanofi Pasteur	Boostrix® GlaxoSmithKline (GSK)
Protects Against	Tetanus, diphtheria, and pertussis	Tetanus, diphtheria, and pertussis
Routine Schedule	One (I) booster dose: II-I2 years	One (I) booster dose: I I-I2 years
Minimum Intervals	No minimum interval since priorTd	No minimum interval since priorTd
Approved for use in	Persons aged 10 through 64 years	Persons aged 10 years and older
Administration	Intramuscular (IM) injection	Intramuscular (IM) injection
Packaging	Vaccine is packaged as 10 single-dose 0.5mL vials or 5 single-dose 0.5mL prefilled Luer-Lok syringes	Vaccine is packaged as 10 single-dose 0.5mL vials or 10 single-dose 0.5mL prefilled syringes without needles
Storage	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>DO NOT FREEZE</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>DO NOT FREEZE</b>
Full ACIP Recommendations	http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6001a4. htm?s_cid=mm6001a4_w	http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6001a4. htm?s_cid=mm6001a4_w
	ACIP Recommendations in Pregnant Women http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm	ACIP Recommendations in Pregnant Women http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm
VFC Letter	Not available on EZIZ	Not available on EZIZ
Billing Codes	CHDP code: 72 CPT code for vaccine: 90715 CPT code for administration: 90460 or 90461 Medi-Cal Fee-For-Service (FFS) administration: 90715 with modifiers –SK (high-risk) and –SL (VFC) ICD-10-CM code (encounter for immunization): Z23 *http://www.aafp.org/practice-management/payment/coding/admin.html	CHDP code: 72 CPT code for vaccine: 90715 CPT code for administration: 90460 or 90461 Medi-Cal Fee-For-Service (FFS) administration: 90715 with modifiers –SK (high-risk) and –SL (VFC) ICD-10-CM code (encounter for immunization): Z23 *http://www.aafp.org/practice-management/payment/coding/admin.html
Comments	<ul> <li>Licensed in 2005</li> <li>ACIP recommends 1 dose of Tdap for children ages 7 through 10 years who are not fully vaccinated</li> </ul>	<ul> <li>Licensed in 2005</li> <li>ACIP recommends 1 dose of Tdap for children ages 7 through 10 years who are not fully vaccinated</li> </ul>

- through 10 years who are not fully vaccinated against pertussis.
- I dose of Tdap is recommended for those ages II through 18 years with preferred administration at 11 through 12 years.
- Any adult 19 years of age and older who has not received Tdap should get one as soon as feasible. This dose can replace one of the 10-yearTd booster
- Persons who anticipate close contact with infants should receive Tdap if they haven't previously re ceived it, ideally at least 2 weeks before contact with
- Pregnant women should get a dose of Tdap during each pregnancy, preferably at 27 through 36 weeks gestation, irrespective of receiving Tdap in the past.
- A single dose of Tdap is recommended for health care personnel who have not previously received Tdap as an adult and who have direct patient contact.
- Tdap can be administered regardless of interval since the previous Td dose.

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- Any adult 19 years of age and older who has not received Tdap should get one as soon as feasible. This dose can replace one of the 10-yearTd booster doses.
- Boostrix should be used for adults 65 years and older.
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