



Vaccine Fact Sheet

DTaP-HepB-IPV combination vaccine

Brand Name and Manufacture	Pediarix® GlaxoSmithKline (GSK)
Protects Against	Diphtheria, tetanus, pertussis, hepatitis B, and polio
Routine Schedule	Three (3) dose series: 2, 4, and 6 months
Minimum Intervals	4 week minimum interval between dose 1 and 2 8 weeks between dose 2 and 3
Approved for use in	Children aged 6 weeks through 6 years
Administration	Intramuscular (IM) injection
Packaging	Vaccine is packaged as 10 single dose 0.5mL pre-filled disposable syringes without needles.
Storage	Refrigerate between 36°F and 46°F (2°C to 8°C) DO NOT FREEZE
Full ACIP Recommendations	http://www.cdc.gov/vaccines/recs/provisional/downloads/combo-vax-Aug2009-508.pdf
VFC Letter	Not available on EZIZ
Billing Codes	CHDP code: 68 CPT code for vaccine: 90723 CPT code for administration*: 90460, 90461 Medi-Cal Fee-For-Service (FFS) administration: 90723 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 style="list-style-type: none">• Licensed in 2002• May be used for dose 2 or 3 of DTaP series on children who have received 1 or 2 doses of single antigen or combination vaccine containing DTaP, Hep B or IPV from different manufacturers• Not approved for fourth or fifth doses for DTaP or for the fourth dose of IPV