







# Vaccine Fact Sheet: Hepatitis B



Topic	Recombivax HB®	Engerix-B®	HEPLISAV-B
<b>Manufacturer</b>	Merck <a href="#">Detailed Prescribing Information</a>	GlaxoSmithKline (GSK) <a href="#">Detailed Prescribing Information</a>	Dynavax <a href="#">Detailed Prescribing Information</a>
<b>Protects Against</b>	Hepatitis B Virus	Hepatitis B Virus	Hepatitis B Virus
<b>Approved Ages</b>	Children from birth through 19 years of age (Pediatric/Adolescent Formulation) Adults 20 years and older (Adult Formulation)	Children from birth through 19 years of age (Pediatric/Adolescent Formulation) Adults 20 years and older (Adult Formulation)	Persons aged 18 years of age and older
<b>CDPH Immunization Program Offering Product</b>	  	 	
<b>Routine Schedule</b>  <a href="#">The Hepatitis B Timing Guide</a>	<b>Children:</b> Three (3) dose series: Birth, 1-2, and 6-18 months <b>Adults:</b> Three (3) dose series: 0, 1, and 6 months apart	<b>Children:</b> Three (3) dose series: Birth, 1-2, and 6-18 month <b>Adults:</b> Three (3) dose series: 0, 1, and 6 months apart	<b>Adults:</b> Two (2) dose series, one month apart
<b>Minimum Intervals</b>	4 week minimum interval between dose 1 and 2 8 week minimum interval between dose 2 and 3 16 week minimum interval between dose 1 and 3 (dose 3 should not be given before 24 weeks of age)	4 week minimum interval between dose 1 and 2 8 week minimum interval between dose 2 and 3 16 week minimum interval between dose 1 and 3 (dose 3 should not be given before 24 weeks of age)	4 week minimum interval between dose 1 and 2

## Vaccine Fact Sheet: Hepatitis B (Continued)

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<b>Administration</b>	Intramuscular (IM) injection	Intramuscular (IM) injection	Intramuscular (IM) injection
<b>Packaging</b>	<p>Pediatric/Adolescent Formulation: Vaccine is packaged as 10 single-dose 0.5mL vials or 10 single-dose 0.5mL pre-filled syringes without needles</p> <p>Adult Formulation: Vaccine is packaged as 1 single-dose 1mL vial or 10 single-dose 1mL single-dose vials, or 10 single-dose pre-filled syringes without needles</p>	<p>Pediatric/Adolescent Formulation: Vaccine is packaged as 10 single-dose 0.5mL pre-filled syringes without needles</p> <p>Adult Formulation: Vaccine is packaged as 10 single-dose 1mL vials or 10 single-dose 1mL pre-filled syringes without needles</p>	Vaccine is packaged as 1 single-dose 0.5mL pre-filled syringe or 5 single-dose 0.5mL dose prefilled syringes
<b>Storage</b>	Refrigerate between 35°F and 46°F (2°C to 8°C) <b>Do not freeze</b>	Refrigerate between 35°F and 46°F (2°C to 8°C) <b>Do not freeze</b>	Refrigerate between 36°F to 46°F (2°C to 8°C) <b>Do not freeze</b>
<b>Full ACIP Recommendations</b>	<a href="#">ACIP Recommendations</a>	<a href="#">ACIP Recommendations</a>	<a href="#">ACIP Recommendations</a>
<b>VFC Letter</b>	Not available	Not available	Not available
<b>Billing Codes</b>	<p>CPT code for vaccine: 90744</p> <p>CPT Administration code: 90460</p> <p>Medi-Cal Fee-For-Service (FFS) administration code: 90744-SL</p> <p>ICD-9-CM code: V05.3</p>	<p>CPT code for vaccine: 90744</p> <p>CPT Administration code: 90460</p> <p>Medi-Cal Fee-For-Service (FFS) administration code: 90744-SL</p> <p>ICD-9-CM code: V05.3</p>	<p>CPT code for vaccine: 90739</p> <p>CPT code for administration: 90471</p> <p>Medi-Cal Fee-For-Service (FFS) administration: 90739</p> <p>ICD-10-CM code (encounter for immunization): Z23</p>
<b>Comments</b>	Licensed in 1986	Licensed in 1989	Licensed in 2017

Refer to [Vaccine Fact Sheets](https://www.eziz.org/Resources/VaccineFactSheets) (EZIZ.org/Resources/VaccineFactSheets).