

New York State Immunization Information System
Flat File Transfer Specification

Version 1.6

Last Updated: June 2010

Change History

Published / Revised Date	Version #	Author	Section / Nature of Change
11/01/2007	1.0	EDS	Draft for Initial NYSIIS Implementation
01/01/2008	1.1	EDS	Corrected example for Client File to match specification
02/18/2008	1.2	EDS	Corrected manufacturer name for PMC
03/12/2008	1.3	EDS	Corrected typo for CPT 90633 Updated codes for Immunization Information Source
08/19/2008	1.3	EDS	Deleted Files may be zipped...
01/21/2009	1.4	EDS	Updated vaccine list

Introduction

Immunization data is passed to the central registry using three flat files containing patient, immunization, and comment information (optional) respectively. The files will be linked via a 24-character Record Identifier supplied by the provider of the file. This identifier will uniquely identify each patient and will appear in each immunization and comment (optional) record to link the immunization and comment (optional) to the client. Character fields need to be left justified and blank-filled, number fields right justified and blank-filled, and date fields in format MMDDYYYY with leading zeroes. If a site is unable to supply any information for a specified field, the entire field needs be filled with blanks.

Below are the fields to include in each of the files. Files need to be generated using the ASCII character set. Records will be fixed length and need to be terminated with a carriage return/line feed.

When submitting data, please submit as much as possible of the listed elements below for completeness. At a minimum fields identified with a 'Y' in the required column must be submitted for NYSIIS to process the file. All fields that are in **BOLD** lettering are mandated by New York State Legislation for immunizations administered after January 1, 2008 and need to be submitted to NYSIIS, however if your system is not capable of exporting some of the required fields by New York State Legislation it is expected that any of the required information that can not be submitted by data exchange will be subsequently added through the user interface to complete the record.

For instructions on how to do a data exchange with NYSIIS please reference Chapter 13 of the User Manual.

Patient Data

Column	Data type	Required	Default	Notes
Record Identifier	Char(24)	Y		Supplied by sender, used to link a Patient to Immunization records.
Patient Status	Char(1)		A	Use the NYSIIS code set for Patient Status .
First Name	Char(25)	Y		If patient does not have a first name, "NO FIRST NAME" must be entered in this field.
Middle Name	Char(25)			
Last Name	Char(35)	Y		
Name Suffix	Char(10)			JR, III, etc.
Birth Date	Date(8)	Y		MMDDYYYY
Death Date	Date(8)			MMDDYYYY
Mothers First Name	Char(25)			
Mothers Maiden Last Name	Char(35)			
Sex (Gender)	Char(1)			Use the NYSIIS code set for Sex (Gender).
Race	Char(1)			Use the NYSIIS code set for Race .
Ethnicity	Char(2)			Use the NYSIIS code set for Ethnicity .
Contact Allowed	Char(2)		02	Controls whether notices are sent. Use the NYSIIS code set for Contact . If <null> default to 02.

Column	Data type	Required	Default	Notes
Consent to Share	Char(1)		<null>	Indicates whether the patient has given written consent to share data with the registry. Patients Under 19: Entry into NYSIIS mandated by law NYSIIS system accepts all data for these patients, regardless of the value of this indicator. Patients Over 19: Use Y, N or <null>. Records with 'N' are rejected. Records with null are only accepted if they match with an existing Yes record.
Patient ID	Char(20)			Identifier within the sending organization's system
Responsible Party First Name	Char(25)			
Responsible Party Middle Name	Char(25)			
Responsible Party Last Name	Char(35)			
Responsible Party Relationship	Char(2)			Use the NYSIIS code set for Relationship .
Street Address	Char(55)			
PO Box Route Line	Char(55)			
Other Address Line	Char(55)			
City	Char(52)			
State	Char(2)			
Zip	Char(9)			If +4 zip is used, the first 5 characters and second 4 characters are concatenated into a single value, without separators.
County	Char(5)			Use the NYSIIS code set for County .
Phone	Char(17)			Format as digits only starting with the area code, ex. 6081234567.
Sending Organization	Char(5)			This is ID of the provider organization that owns this client and corresponding immunization records. Contact the NYSIIS Help Desk for the appropriate organization ID. * This field is optional if an organization is sending all of its own records. This field is required if an organization other than the organization that owns the record(s) is transmitting this file.

Immunization Data

Column	Data type	Required	Default	Notes
Record Identifier	Char(24)	Y		Supplied by sender, used to link Immunizations to a Patients record.
Vaccine Group	Char(16)	*		Use the NYSIIS code set for Vaccine Codes. *Either Vaccine Group or CPT Code is required.
CPT Code	Char(5)	*		
Trade Name	Char(24)			Use the NYSIIS code set for Vaccine Codes.
Vaccination Date	Date(8)	Y		MMDDYYYY
Administration Route Code	Char(2)			Use the NYSIIS code set for Administration Route.
Body Site Code	Char(4)			Use the NYSIIS code set for Body Site.
Reaction Code	Char(8)			Use the NYSIIS code set for Reaction.
Manufacturer Code	Char(4)			Use the NYSIIS code set for Manufacturers.

Column	Data type	Required	Default	Notes
Immunization Information Source	Char(2)		00	Indicates whether this immunization was administered by your organization or the immunization information is historical from client record. Use 00 for an immunization which was administered by the sending organization. For Historical Doses, please use values 01 through 08. Use the NYSIIS code set for Immunization Information Source .
Lot Number	Char(30)			Converted records will be stored in NYSIIS as historical records, so the Lot Number will not correspond to inventory tracked in NYSIIS, but Lot Number can still be stored as historical information.
Provider Name	Char(50)			The historical provider name.
Administered By Name	Char(50)			The name of the person who administered the vaccination.
Site Name	Char(30)			The name of the clinic site where the vaccination occurred.
Sending Organization	Char(5)			This is ID of the provider organization that owns this patient and corresponding immunization records. Contact the NYSIIS Help Desk for the appropriate organization ID. * This field is optional if an organization is sending all of its own records. This field is required if an organization other than the organization that owns the record(s) is transmitting this file.
Financial Class (VFC Eligibility Status)	Char(4)			Populate with appropriate HL7 table 0064 values – Valid Values V00 (VFC Eligibility not determined/unknown), V01 (Not VFC eligible), V02 (VFC Eligible - Medicaid/Medicare Managed Care), V03 (VFC Eligible – Uninsured), V04 (VFC Eligible – American Indian /Alaskan Native), V05 (VFC Eligible – Underinsured), and CH00 (S-Chip Coverage Not VFC eligible).
Vaccine Purchased With (Funding Type)	Char(3)			Populate with appropriate value from HL7 table NIP008 – Valid values PVF (private fund) or PBF (public funds)

Comment Code (Optional File – Not Required)

Column	Data type	Required	Default	Notes
Record Identifier	Char(24)	Y		Supplied by sender, used to link Comments to a Patients record. This field is required if a comment code is being sent.
Comment Code	Char(2)	Y		Use the NYSIIS code set for Comments.
Applies to Date	Date(8)			The date to which the comment applies. MMDDYYYY

Notes on Refusals:

Refusals are sent in the optional Comment file. Please bear the following in mind when sending in refusals or receiving output flat files from NYSIIS.

- The NYSIIS system will write out multiple refusals for the same vaccine on different dates for those clients who have them.
- The NYSIIS system will accept incoming refusals of the same vaccine on different dates and file them both. However, if they both have the same applies-to date, then only one will be stored.

c) The sending organization in the patient file will become the refusal owner. In general, only the organization who owns the refusal is permitted to edit it. However, in the case of parent and child organizations, the parent may edit the child's refusals and vice versa.

Examples

Records need to be **blank** filled. In the following example, blanks are represented with the '*' character for illustrative purposes only.

Patient Record

```
17727736*****ACORA*****NOU*****LYNESS*****
*****JR*****09102002*****LUANE*****SILONG*****MBH**
*123456*****JEWELL*****DANFOTH*****GREENLEE*****
*****98486*TEXAS*AVENUE*****BOX*491*****
*****APT*740*****GREENFIELD*****
*****NY12821***NY0054932227713*****3680*
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Immunization Record

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17727736*****Hib*****90648OmniHib*****08132003IDLG*****PMC*004230xy
3b*****
*****3680*V02*PBF
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Comment Code Record

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17727736*****3110092008
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Table Item	Code	Description
Administration Route	ID	Intradermal
	IM	Intramuscular
	IN	Intranasal
	IV	Intravenous
	PO	Oral
	SC	Subcutaneous
	TD	Transdermal
	MP	Multiple Puncture (Small Pox)
Body Site	LA	Left Arm
	LG	Left Gluteus Medius
	LT	Left Thigh
	LD	Left Deltoid
	LVL	Left Vastus Lateralis
	LLFA	Left Lower Forearm
	RA	Right Arm
	RG	Right Gluteus Medius
	RT	Right Thigh
	RD	Right Deltoid
	RVL	Right Vastus Lateralis
	RLFA	Right Lower Forearm
Patient Status	A	Active
	M	Moved or Gone Elsewhere
	N	Inactive
	P	Permanently Inactive – Deceased Clients
Comments	03	Allergy to baker's yeast (anaphylactic)
	04	Allergy to egg ingestion (anaphylactic)
	05	Allergy to gelatin (anaphylactic)
	06	Allergy to neomycin (anaphylactic) MMR & IPV
	07	Allergy to Streptomycin (anaphylactic)
	08	Allergy to Thimerosal (anaphylactic)
	10	Anaphylactic(life-threatening) reaction of previous doses of nonspecific vaccine group.
	22	Chronic illness
	21	Current acute illness, moderate to severe
	14	Current diarrhea, moderate to severe
	16	Current fever with moderate-to-severe illness
	18	Guillain-Barre Syndrome (GBS) within 6 weeks after DTP/DTaP
	26	Hepatitis B ANTIBODY to surface antigen, positive(immune)
	26	Hepatitis B titer – immune
	29	History of Pertussis
	31	History of Rubella
	23	Immune globulin(IG) administration, recent or simultaneous
	24	Immunity: Diphtheria
	25	Immunity: Haemophilus Influenzae type B
	26	Immunity: Hepatitis B
	27	Immunity: Measles
	28	Immunity: Mumps
	29	Immunity: Pertussis
	30	Immunity: Poliovirus
	31	Immunity: Rubella

Table Item	Code	Description
	32	Immunity: Tetanus
	33	Immunity: Varicella (chicken pox)
	34	Immunodeficiency (family history)OPV & VZV
	35	Immunodeficiency (household contact) OPV
	36	Immunodeficiency (in recipient) OPV & MMR & VZV
	27	Measles titer – immune
	28	Mumps titer – immune
	37	Neurologic disorders, underlying (seizure disorder)
	38	Otitis media (ear infection) moderate to severe
	P1	Refusal of DT
	P2	Refusal of DtaP
	P3	Refusal of HepB
	P4	Refusal of Hib
	P5	Parental refusal of MMR
	P6	Refusal of Pneumococcal
	P7	Refusal of Polio
	P8	Refusal of TD
	P9	Refusal of Varicella
	PB	Refusal of HepA
	PC	Refusal of Influenza
	PG	Refusal of Pertussis
	39	Pregnancy (in recipient)
	31	Rubella titer – immune
	40	Thrombocytopenia
	41	Thrombocytopenia purpura (history)
	33	Varicella titer – immune
	01	No contact allowed – Notices are not to be sent.
	02	Contact Allowed – Notices will be sent.
Contact		
	NY001	Albany
	NY003	Allegany
	NY005	Bronx
	NY007	Broome
	NY009	Cattaraugus
	NY011	Cayuga
	NY013	Chautauqua
	NY015	Chemung
	NY017	Chenango
	NY019	Clinton
	NY021	Columbia
	NY023	Cortland
	NY025	Delaware
	NY027	Dutchess
	NY029	Erie
	NY031	Essex
	NY033	Franklin
	NY035	Fulton
	NY037	Genesee
	NY039	Greene
	NY041	Hamilton
	NY043	Herkimer
	NY045	Jefferson
	NY047	Kings
	NY049	Lewis
County		

Table Item	Code	Description
	NY051	Livingston
	NY053	Madison
	NY055	Monroe
	NY057	Montgomery
	NY059	Nassau
	NY061	New York
	NY063	Niagara
	NY065	Oneida
	NY067	Onondaga
	NY069	Ontario
	NY071	Orange
	NY073	Orleans
	NY075	Oswego
	NY077	Otsego
	NY079	Putnam
	NY081	Queens
	NY083	Rensselaer
	NY085	Richmond
	NY087	Rockland
	NY091	Saratoga
County	NY093	Schenectady
	NY095	Schoharie
	NY097	Schuyler
	NY099	Seneca
	NY089	St. Lawrence
	NY101	Steuben
	NY103	Suffolk
	NY105	Sullivan
	NY107	Tioga
	NY109	Tompkins
	NY111	Ulster
	NY113	Warren
	NY115	Washington
	NY117	Wayne
	NY119	Westchester
	NY121	Wyoming
NY123	Yates	
	NH	Non-Hispanic
Ethnicity	H	Hispanic
	00	New Immunization Administered (by Sending Organization)
Immunization Information Source	01	Source Unspecified
	02	Other Provider
	03	Parent Written Record
	04	Parent Recall
	05	Other Registry
	06	Birth Certificate
	07	School Record
	08	Public Agency
Manufacturers	AB	Abbott Laboratories (<i>Ross Products Division</i>)
	AD	Adams Laboratories
	ALP	Alpha Therapeutic Corporation
	AR	Armour (Inactive use ZLB)

Table Item	Code	Description
	AVB	Aventis Behring L.L.C. (<i>Centeon and Armour Pharmaceutica, Inactive use ZLB</i>)
	AVI	Aviron
	BA	Baxter Healthcare Corporation (Inactive use BAH)
	BAH	Baxter Healthcare Corporation (<i>Hyland, Immuno Intl. AG, and N. Amer. Vac</i>)
	BAY	Bayer (Including Miles And Cutter)
	BP	Berna Products (Inactive use BPC)
	BPC	Berna (<i>Including Swiss Serum And Vib</i>)
	CEN	Centeon (Inactive use AVB)
	CHI	Chiron Corporation (bought by Novartis on 4/20/2006 – after this date use NOV))
	CMP	Celltech Medeva Pharmaceuticals (Inactive use NOV)
	CNJ	Cangene Corporation
	CON	Connaught (Inactive use PMC)
	CSL	CSL Biotherapies
	DVC	DynPort Vaccine Company, LLC
	EVN	Evans Medical Limited (Inactive use NOV)
	GEO	GeoVax Labs, Inc
	GRE	Greer Laboratories Inc.
	IAG	Immuno International Ag (Inactive use BAH)
	IM	Merieux (Inactive use PMC)
	IUS	Immuno-U.S., Inc.
	JPN	Osaka University (Biken)
	KGC	Korea Green Cross Corporation
	LED	Lederle (Inactive use WAL)
	MA	Massachusetts Public Health Biologic Lab (Inactive use MBL)
	MBL	Massachusetts Biologics Laboratories
	MED	Medimmune, Inc.
	MIL	Miles (Inactive use BAY)
	MIP	Bioport Corporation (formerly Michigan Biologic Prod Inst.)
	MSD	Merck & Co., Inc.
	NAB	NABI (formerly North American Biologicals)
	NAV	North American Vaccine, Inc. (Inactive use BAH)
	NOV	Novartis Pharmaceutical Corp. (<i>Ciba-Geigy and Sandoz</i>)
	NVX	Novavax, Inc
	NYB	New York Blood Center
	OTC	Organon Teknika Corporation
	ORT	Ortho-Clinical Diagnostics (formerly Ortho Diagnostic Systems, Inc.)
	PFR	Pfizer (formerly Wyeth Pharmaceuticals)
	PMC	Sanofi Pasteur Inc. (<i>Connaught and Pasteur Merieux</i>)
	PD	Parkedale Pharmaceuticals (formerly Parke-Davis)
	PRX	Praxis Biologics (Inactive use WAL)
	PWJ	Powerject Pharmaceuticals (<i>Celltech Medeva and Evans Medical</i>)
	SCL	Sclavo, Inc.
	SI	Swiss Serum and Vaccine Inst. (Inactive use BPC)
	SKB	GlaxoSmithKline (<i>SmithKline Beecham and Glaxo Wellcome</i>)
	SOL	Solvay Pharmaceuticals
	TAL	Talecris Biotherapeutics (includes Bayer Biologicals)
	USA	Us Army Med Research
	VXG	VaxGen
	WA	Wyeth-Ayerst (Inactive use WAL)
	WAL	Wyeth-Ayerst (<i>Lederle and Praxis</i>)
	ZLB	ZLB Behring (includes Aventis Behring and Armour Pharmaceutical Company)
	OTH	Other manufacturer
	UNK	Unknown

Table Item	Code	Description
Race	I	American Indian or Alaska Native
	A	Asian or Pacific Islander
	B	Black or African-American
	W	White
	O	Other
U	Unknown	
Race		
Relationship	18	Self
	61	Aunt
	62	Brother
	33	Father
	87	Foster Father
	88	Foster Mother
	97	Grandfather
	98	Grandmother
	26	Guardian
	32	Mother
	B7	Sister
	64	Spouse
	48	Stepfather
	49	Stepmother
D3	Uncle	
Reaction Codes	10	Anaphylactic reaction
	CRYING	Persistent crying lasting >= 3 hours within 48 hours of immunization
	ERVISIT	Emergency room/doctor visit required
	FEVER105	Temperature >= 105 (40.5 C) within 48 hours of immunization
	HYPOTON	Hypotonic-hyporesponsive collapse within 48 hours of immunization
	PERTCONT	Pertussis allergic reaction
	SEIZURE	Seizure occurring within 3 days
	TETCONT	Tetanus allergic reaction
Sex (Gender)	F	Female
	M	Male
	U	Unknown
Vaccine Purchased With (Funding Type)	PVF	Private Funds
	PBF	Public Funds
Financial Class (VFC Eligibility Status)	V00	VFC Eligibility not determined/unknown
	V01	Not VFC Eligible
	V02	VFC Eligible – Medicaid/Medicare Managed Care
	V03	VFC Eligible – Uninsured
	V04	VFC Eligible – American Indian /Alaskan Native
	V05	VFC Eligible – Underinsured
	CH00	S-Chip Coverage Not VFC eligible.

Type	Table	Name	Value	Description
NYSIIS	WVGC	Vaccine Group Code (WVGC)		
	WVGC		Adeno	Adeno
	WVGC		Anthrax	Anthrax
	WVGC		BCG	BCG
	WVGC		Cholera	Cholera
	WVGC		Diphtheria	Diphtheria Antitoxin
	WVGC		DTP/aP	Diphtheria, Tetanus, Acellular Pertussis
	WVGC		Encephalitis	Encephalitis
	WVGC		Flu H1N1-09	Novel Influenza-09
	WVGC		HepA	Hepatitis A
	WVGC		HepB	Hepatitis B
	WVGC		Hib	Hib
	WVGC		HPV	Human Papilloma Virus
	WVGC		Ig	Ig
	WVGC		Influenza	Influenza
	WVGC		Lyme	Lyme
	WVGC		Measles	Measles Virus Vaccine
	WVGC		MMR	Measles, Mumps, Rubella
	WVGC		Meningo	Meningitis
	WVGC		Mumps	Mumps Virus Vaccine
	WVGC		Pertussis	Pertussis
	WVGC		Plague	Plague
	WVGC		Pneumococcal	Pneumonia Conjugate
	WVGC		Pneumo-Poly	Pneumonia Polysaccharide
	WVGC		Polio	Poliomyelitis
	WVGC		Rabies	Rabies
	WVGC		Rotavirus	Rotavirus
	WVGC		Rubella	Rubella Virus Vaccine
	WVGC		Tetanus	Tetanus Diphtheria
	WVGC		Td	Tetanus Diphtheria
	WVGC		Typhoid	Typhoid
	WVGC		Smallpox	Vaccinia
	WVGC		Varicella	Varicella
	WVGC		Yellow Fever	Yellow Fever
	WVGC		Zoster	Zoster
NYSIIS	WVTN	Vaccine Trade Name (WVTN)		
	WVTN		Acel-Imune	DTaP
	WVTN		ActHib	Hib-PRP-T
	WVTN		Adacel	TdaP > 7 years
	WVTN		Adeno T4	Adeno T4
	WVTN		Adeno T7	Adeno T7
	WVTN		AFLURIA	Influenza
	WVTN		AFLURIA Pres-Free	Preservative-Free Influenza
	WVTN		Anthrax	Anthrax
	WVTN		Attenuvax	Measles
	WVTN		BabyBIG	Botulism
	WVTN		BayTet	Tlg
	WVTN		BCG-Cancer	BCG-BC
	WVTN		BCG-TB	BCG-TB
	WVTN		Biavax II	Rubella-Mumps

	WVTN		BIG	Botulism
	WVTN		Boostrix	Tdap > 7 years
	WVTN		Botulinum-antitoxin	Botulinum-antitoxin
	WVTN		Botulism	Botulism
	WVTN		Certiva	DTaP
	WVTN		Cholera-I	Cholera-Inject
	WVTN		Cholera-O	Cholera-Oral
	WVTN		CMV-IgIV	CMV-IgIV
	WVTN		Comvax	HepB-Hib
	WVTN		DAPTACEL	DTaP,5 pertussis antigens
	WVTN		DECAVAC	Td Adult Pres-Free
	WVTN		Diphtheria	Diphtheria
	WVTN		Diphtheria-antitoxin	Diphtheria-antitoxin
	WVTN		Dryvax	Smallpox
	WVTN		DT	DT-Peds
	WVTN		DTP	DTP
	WVTN		Engerix-B Adult	HepB-Adult
	WVTN		Engerix-B dialysis	HepB-Dialysis 4 dose
	WVTN		Engerix-B Peds	HepB-Peds
	WVTN		Flebogamma	IgIV
	WVTN		Flu-Deleted	FLU, NOS
	WVTN		Flu-Imune	Influenza
	WVTN		Flu-Mist	FLU-Nasal
	WVTN		Flu-Shield	Influenza
	WVTN		Fluarix	Preservative Free Influenza
	WVTN		FluLaval	Influenza
	WVTN		Fluogen	Influenza
	WVTN		Fluvirin	Influenza
	WVTN		Fluvirin Pres-Free	Preservative-Free Influenza
	WVTN		Fluzone	Influenza
	WVTN		Fluzone Pres-Free	Preservative-Free Influenza
	WVTN		Gardasil	HPV, Quadrivalent
	WVTN		Havrix-Adult	HepA-Adult
	WVTN		Havrix-Peds 2 Dose	HepA-Ped 2 Dose
	WVTN		Havrix-Peds 3 Dose	HepA-Peds
	WVTN		HBIG	HBIG
	WVTN		Hiberix	Hib-PRP-D
	WVTN		Hib-TITER	Hib-HbOC
	WVTN		H1N1 Nasal	Novel Influenza-H1N1-09, nasal
	WVTN		H1N1 P-free, CSL	Novel Influenza-H1N1-09, preserve-free
	WVTN		H1N1 P-free, Novartis	Novel Influenza-H1N1-09, preserve-free
	WVTN		H1N1 P-free, Sanofi	Novel Influenza-H1N1-09, preserve-free
	WVTN		H1N1 CSL	Novel Influenza-H1N1-09
	WVTN		H1N1 Novartis	Novel Influenza-H1N1-09
	WVTN		H1N1 Sanofi Pasteur	Novel Influenza-H1N1-09
	WVTN		Ig	Ig
	WVTN		IG-RSV IgIM	IG-RSV IgIM
	WVTN		Imovax Rabies ID	Rabies-ID
	WVTN		Imovax Rabies IM	Rabies-IM
	WVTN		Infanrix	DTaP
	WVTN		IPOL	Polio-Inject
	WVTN		JE-Vax	Japanese Enceph
	WVTN		Kinrix	DTaP-IPV

WVTN		LYMERix	Lyme
WVTN		M-R-VAX	Measles-Rubella
WVTN		Measles	Measles
WVTN		Measles-Rubella (MERU)	Measles-Rubella
WVTN		Menactra	Meningococcal conjugate vaccine
WVTN		MENOMUNE	Meningococcal
WVTN		Meruvax II	Rubella
WVTN		MMR II	MMR
WVTN		Mumps	Mumps
WVTN		Mumps-Rubella (MURU)	Rubella-Mumps
WVTN		Mumpsvox	Mumps
WVTN		OmniHib	Hib-PRP-T
WVTN		ORIMUNE	Polio-Oral
WVTN		Pediarix	DTAP/Polio/Hep B
WVTN		Pentacel	DTaP-Hib-IPV
WVTN		PedvaxHIB	Hib-OMP
WVTN		Plague	Plague
WVTN		Pneumovax 23	Pneumococcal 23
WVTN		PNU-IMUNE 23	Pneumococcal 23
WVTN		Prevnar 7	Pneumo-Conjugate Vaccine, 7 valent
WVTN		Prevnar13	Pneumo-Conjugate Vaccine, 13 valent
WVTN		ProHIBit	Hib-PRP-D
WVTN		ProQuad	MMRV
WVTN		RabAvert	Rabies-IM
WVTN		Recombivax Peds	HepB-Peds
WVTN		Recombivax-Adult	HepB-Adult
WVTN		Recombivax-Dialysis	HepB-Dialysis 4 dose
WVTN		Rho(D)Full	Rho(D)Full
WVTN		Rho(D)IV	Rho(D)IV
WVTN		Rho(D)Mini	Rho(D)Mini
WVTN		Rlg	Rlg
WVTN		Rlg-HT	Rlg-HT
WVTN		Rotarix	Rotavirus monovalent
WVTN		RotaShield	Rotavirus tetravalent
WVTN		RotaTeq	Rotavirus pentavalent
WVTN		RSV-IgIM	RSV-IgIM
WVTN		RSV-IgIV	RSV-IgIV
WVTN		Rubella	Rubella
WVTN		Td	Td
WVTN		Tetramune	DTP-Hib
WVTN		Tlg	Tlg
WVTN		TriHIBit	DTaP-Hib
WVTN		Tripedia	DTaP
WVTN		TT	Tetanus
WVTN		Twinrix	HepA-HepB Adult
WVTN		Typhim Vi	Typhoid-ViCPs
WVTN		Typhoid	Typhoid-HP
WVTN		Typhoid-AKD	Typhoid-AKD
WVTN		Vaccinia, diluted	Vaccinia (smallpox), diluted
WVTN		Vaccinia VIG	Vaccinia immune globulin VIG
WVTN		VAQTA-Adult	HepA-Adult
WVTN		VAQTA-Peds 2 Dose	HepA-Ped 2 Dose
WVTN		VAQTA-Peds 3 Dose	HepA-Ped 3 Dose

	WVTN		Varivax	Varicella
	WVTN		Vivotif Berna/Ty21a	Typhoid-Oral
	WVTN		VZIg	VZIg
	WVTN		YF-VAX	Yellow Fever
	WVTN		Zostavax	Zoster (shingles), live

VACCINE CODES

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG	
90476	54	Adeno	Adeno T4	Adeno T4	Adenovirus type 4, live oral	WAL	
90477	55		Adeno T7	Adeno T7	Adenovirus type 7, live oral	WAL	
	82		Adeno		Adeno not otherwise specified Recorded as CVX 54		
90581	24	Anthrax	Anthrax	Anthrax	Anthrax	MIP	
90585	19	BCG	BCG-TB	BCG-TB	Bacillus Calmette-Guerin TB	OTC	
90586			BCG-BC	BCG-Cancer	Bacillus Calmette-Guerin bladder cancer	OTC	
90728			BCG		BCG not otherwise specified		
90725	26	Cholera	Cholera-Injectable	Cholera-I	Cholera injectable	CHI	
90592			Cholera-Oral	Cholera-O	Cholera Oral	CHI	
90719		Diphtheria	Diphtheria	Diphtheria	Diphtheria	PD	
90700	20	DTP/aP	DTaP	Acel-Imune	Diphtheria, tetanus, acellular pertussis	WAL	
				Certiva		BAH	
				Infanrix		SKB	
				Tripedia		PMC	
90701	01		DTP	DTP	Diphtheria, tetanus, whole cell pertussis	PMC	
90702	28		DT	DT	Diphtheria tetanus pediatric	PMC	
90720	22		DTP-Hib	Tetramune	DTP – Hib combination	WAL	
90721	50		DTaP-Hib	TriHIBit	DTaP-Hib combination	PMC	
90723	110		DTAP-HepB-Polio	Pediarix	DTAP-HepB-Polio combination	SKB	
90698	120		DTaP-Hib-IPV	Pentacel	DTaP-Hib-IPV combination	PMC	
	106		DTAP, 5 pertussis antigens	DAPTACEL	Diphtheria, tetanus, acellular pertussis, 5 antigens	PMC	
	107		DTaP		DTaP not otherwise specified Recorded as CVX 20		
	102		DTP-HIB-Hep B		DTP-HIB Hep B vaccine		
90696	130		DTaP-IPV	Kinrix	DTaP-IPV	SKB	
90663	125	Flu H1N1-09	Novel Influenza-H1N1-09, nasal	H1N1 Nasal	2009 Influenza-H1N1, nasal	MED	
	126		Novel Influenza-H1N1-09, preserve-free	H1N1 p-free, CSL H1N1 p-free, Novartis H1N1 p-free, Sanofi	2009 Influenza-H1N1, preservative free - injectable	CSL NOV PMC	
	127		Novel Influenza-H1N1-09	H1N1 CSL H1N1 Novartis H1N1 Sanofi Pasteur	2009 Influenza-H1N1, injectable	CSL NOV PMC	
	128		Novel Influenza-H1N1-09 all formulations		2009 Influenza-H1N1, not otherwise specified		
90632	52	HepA	HepA adult	Havrix-Adult VAQTA-Adult	Hepatitis A adult	SKB MSD	
90633	83		HepA ped-2 dose	Havrix-Peds 2 Dose VAQTA-Peds 2 Dose	Hepatitis A pediatric/adolescent 2 dose	SKB MSD	
90634	84		HepA ped-3 dose		VAQTA-Peds 3	Hepatitis A pediatric/adolescent 3 dose	MSD
					Havrix-Peds 3 Dose		SKB
90636	104			HepA-HepB Adult	Twinrix	Hepatitis A & Hepatitis B adult	SKB
90730	85			Hep A		Hep A not otherwise specified	
	31			Hep A-peds, NOS		Recorded as CVX 85	
90636	104	HepB	HepA-HepB Adult	Twinrix	Hepatitis A & Hepatitis B adult	SKB	
90723	110		DTAP-HepB-Polio	Pediarix	DTAP-HepB-Polio combination	SKB	
90731	45		Hep B		Hep B not otherwise specified		
90740	44		Hep B-dialysis 3 dose		Hepatitis B Dialysis 3 dose		
90743	43		HepB adult	Recombivax-Adult	Hepatitis B adult dose 1ml	MSD	
90744	08		HepB pediatric	Recombivax Peds	Hepatitis B pediatric/adolescent .5ml	MSD	
				Engerix-B Peds		SKB	
90745	42		Hep B, adolescent/high risk infant		Hep B, adolescent/high risk infant		
90746	43		HepB adult	Recombivax-Adult	Hepatitis B adult dose 1ml	MSD	
				Engerix-B Adult		SKB	
90747	44		HepB-dialysis 4 dose	Recombivax-Dialysis	Hepatitis B Dialysis 4 dose	MSD	
		Engerix-B dialysis		SKB			
90748	51	HepB-Hib	Comvax	HepB-Hib Combination	MSD		

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG		
90645	47	Hib	Hib-HbOC	Hib-TITER	Hemophilus influenza b HbOC 4 dose	WAL		
90646	46		Hib-PRP-D	ProHIBit	Hemophilus influenza b PRP-D booster	PMC		
90647	49		Hib-OMP	PedvaxHIB	Hemophilus influenza b OMP 3 dose	MSD		
90648	48		Hib-PRP-T	OmniHib	Hemophilus influenza b PRP-T 4 dose	PMC		
				ActHib		PMC		
				Hiberix		SKB		
90720	22			DTP-Hib	Tetramune	DTP – Hib combination	WAL	
90721	50			DTaP-Hib	TriHIBit	DTaP-Hib combination	PMC	
90737	17			Hib		Hib not otherwise specified		
90748	51			HepB-Hib	Comvax	HepB-Hib combination	MSD	
90698	120			DTaP-Hib-IPV	Pentacel	DTaP-Hib-IPV combination	PMC	
90649	62		HPV	HPV, Quadrivalent	Gardasil	Human Papilloma Virus	MSD	
90650	118			HPV, bivalent	Cervarix	Human Papilloma Virus	SKB	
	137	HPV, uncertain formulation						
90281	86	Ig	Ig	Ig	Ig human			
90283	87		IgIV	IgIV	IgIV	Ig IV human		
				Flebogamma				
90287	27		Botulinum-antitoxin	Botulinum-antitoxin	Botulinum-antitoxin	Botulinum antitoxin equine		
90288				Botulism	BabyBIG		Botulism Immune Globulin	
				Botulism	BIG			
90291	29			CMV-IgIV	CMV-IgIV	Cytomegalovirus Ig IV human		
90399				Ig	Ig	Unlisted immune globulin		
90296	12			Diphtheria-antitoxin	Diphtheria-antitoxin	Diphtheria antitoxin, equine		
90371	30			HBIG	HBIG	Hepatitis B Ig human		
90375	34			RIg	RIg	Rabies Ig human		
90376	34			RIg-HT	RIg-HT	Rabies Ig heat treated human		
90379	71			RSV-IgIV	RSV-IgIV	Respiratory syncytial virus Ig IV		
90384				Rho(D)Full	Rho(D)Full	Rho(D)Ig Rhlg human full-dose		
90385				Rho(D)Mini	Rho(D)Mini	Rho(D)Ig Rhlg human mini-dose		
90386				Rho(D)IV	Rho(D)IV	Rho(D)Ig Rhlg human IV		
90389	13			TiG	BayTet	Tetanus Ig human		
					TiG			
90393	79			Vaccinia immune globulin	Vaccinia VIG	Vaccinia Ig human		
90396	36			VZIG	VZIG	Varicella-zoster Ig human		
	117			VZIG (IND)	VariZIG		CNJ	
				Varicella IG				
90378	93		IG-RSV IM	RSV-IgIM	Synagis	Respiratory syncytial virus Ig		
90655	15		Influenza	Influenza, Preservative-Free	AFLURIA Pres-Free	Influenza preservative free, 6-35 months	CSL	
					Fluarix Pres-Free		SKB	
					Fluvirin Pres-Free		CHI	
					Fluzone Pres-Free		PMC	
90656					Influenza, Preservative-Free	AFLURIA Pres-Free	Influenza preservative free, 3+ years old	CSL
				Fluarix Pres-Free		SKB		
				Fluvirin Pres-Free		CHI		
				Fluzone Pres-Free		PMC		
90657					Influenza	AFLURIA	Influenza split virus 6-35 months	CSL
						Flu-Imune		WAL
						Flu-Shield		WAL
						FluLaval		SKB
			Fluogen	PD				
			Fluvirin	CHI				
			Fluzone	PMC				
90658			Influenza	AFLURIA	Influenza split virus, 3+ years old	CSL		
				Flu-Imune		WAL		
				Flu-Shield		WAL		
				FluLaval		SKB		
				Fluogen		PD		
				Fluvirin		CHI		
				Fluzone		PMC		
90659	16		Influenza, Whole virus		Influenza whole virus			
90660	111		Flu-nasal	Flu-Mist	Influenza live, for intranasal use	WAL		
90724	88		Influenza, NOS	Flu-Deleted	Influenza not otherwise specified			
90665	66	Lyme	Lyme	LYMErix	Lyme disease	SKB		

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG	
90735	39	Encephalitis	Japanese encephalitis	JE-Vax	Japanese encephalitis	JPN	
90705	05	Measles	Measles	Measles	Measles live 1964-1974 (Eli Lilly)	MSD	
				Attenuvax	Measles live	MSD	
90708	04	Measles-Rubella	Measles-Rubella	M-R-VAX	Measles and rubella live	MSD	
				Measles-Rubella (MERU)		MSD	
90704	07	Mumps	Mumps	Mumps	Mumps 1950-1978	MSD	
				Mumpsavax	Mumps live	MSD	
90709		Rubella-Mumps			Rubella and Mumps not otherwise specified		
	38	Rubella-Mumps	Rubella-Mumps	Biavax II	Rubella and mumps live	MSD	
				Mumps-Rubella (MURU)		MSD	
90707	03	MMR	MMR	MMR II	Measles, mumps and rubella live	MSD	
90710	94			MMRV		Proquad	Measles, mumps, rubella, varicella live
90733	32	Meningo	Meningococcal	MENOMUNE	Meningococcal polysaccharide	PMC	
90734	114		Meningococcal polysaccharide conjugate	Menactra	Meningococcal [Groups A, C, Y and W-135] Polysaccharide Diphtheria Toxoid Conjugate Vaccine	PMC	
	108	Meningococcal			Meningococcal not otherwise specified (no CPT assigned)		
90715	115	Pertussis	TDaP > 7 Years	Adacel	TDaP > 7 years	PMC	
				Boostrix		SKB	
90712	02	Polio	Polio oral	ORIMUNE	Poliovirus OPV live oral	WAL	
90713	10		Polio injectable	IPOL	Poliovirus inactivated IPV	PMC	
90723	110		DTAP-HepB-Polio	Pediarix	DTAP-HepB-Polio combination	SKB	
90698	120		DTaP-Hib-IPV	Pentacel	DTaP-Hib-IPV combination	PMC	
	89		Polio			Polio not otherwise specified	
90696	130		DTaP-IPV	Kinrix	DTaP-IPV	SKB	
90727	23	Plague	Plague	Plague	Plague	GRE	
90732	33	Pneumo-Poly	Pneumococcal 23	PNU-IMUNE 23	Pneumococcal polysaccharide 23 valent	WAL	
				Pneumovax 23		MSD	
90669	100	Pneumococcal	Pneumo-conjugate 7	Prevnar 7	Pneumococcal conjugate vaccine, 7 valent	WAL	
	109		Pneumococcal, NOS			Pneumococcal not otherwise specified	
90670	133		Pneumo-conjugate, 13 valent	Prevnar 13	Pneumococcal conjugate vaccine, 13 valent	PFRWAL	
90675	18	Rabies	Rabies-intramuscular	RabAvert	Rabies intramuscular	CHI	
				Imovax Rabies IM		PMC	
90676	40		Rabies-intradermal	Imovax Rabies ID	Rabies intradermal	PMC	
90726	90	Rabies-NOS			Rabies not otherwise specified		
90680	74	Rotavirus	Rotavirus, Tet	RotaShield	Rotavirus tetravalent live oral (removed on 10/16/1999)	WAL	
	116		Rotavirus, Pent	RotaTeq	Rotavirus pentavalent (after 02/02/2006)	MSD	
90681	119		Rotavirus, monovalent	Rotarix	Rotavirus monovalent	SKB	
	122		Rotavirus			Rotavirus not otherwise specified	
90706	06	Rubella	Rubella	Rubella	Rubella live	MSD	
				Meruvax II		MSD	
90708	04	Measles-Rubella	Measles-Rubella	Measles-Rubella (MERU)	Measles and rubella live	MSD	
				M-R-VAX		MSD	
90709		Rubella-Mumps			Rubella-Mumps not otherwise specified		
	38	Rubella-Mumps	Rubella-Mumps	Mumps-Rubella (MURU)	Rubella and mumps live	MSD	
				Biavax II		MSD	
	75	Smallpox	Smallpox	Dryvax	Vaccinia (Smallpox) dry	WAL	
	105		Vaccinia (Smallpox), diluted	Vaccinia, diluted	Vaccinia (smallpox), diluted		
90718	09	Td	Td	Td	Tetanus and diphtheria adult	PMC MBL	
90714	113		Td Adult Pres-Free	DECAVAC	Td preservative free – CPT code is effective 7/1/2005	PMC	

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG
90715	115		TDaP > 7 Years	Adacel Boostrix	TDaP > 7 years	PMC SKB
90703	35	Tetanus	Tetanus	TT	Tetanus	PMC
	112		Tetanus Toxoid		Tetanus not otherwise specified Recorded as CVX 35	
90690	25	Typhoid	Typhoid-oral	Vivotif Berna/Ty21a	Typhoid oral	
90691	101		Typhoid-ViCPs	Typhim Vi	Typhoid VI capsular polysaccharide	PMC
90692	41		Typhoid-H-P	Typhoid	Typhoid heat and phenol inactivated	
90693	53		Typhoid-AKD	Typhoid-AKD	Typhoid acetone-killed, dried (military)	
	91		Typhoid		Typhoid not otherwise specified (after 7/1/2005, no CPT code is associated with this vaccine group)	
90710	94	Varicella	MMRV	ProQuad	Measles, mumps, rubella, varicella live	MSD
90716	21		Varicella	Varivax	Varicella live	MSD
90717	37	Yellow Fever	Yellow Fever	YF-VAX	Yellow Fever live	PMC
90736	121	Zoster	Zoster (shingles), live	Zostavax	Zoster (shingles), live	MSD