Nebraska State Immunization Information System – Flat File Specification Version 7.2.6.3
(Revised 11/17/10)

Immunization data is passed to the central registry using three flat files containing client, 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 client 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 spaces.

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. If you have questions on concerning flat files, contact the Help Desk at nesiishelp@dhhs.ne.gov.

Client Data

Column	Data type	Required	Default	Notes
Record Identifier	Char(24)	Y		Supplied by sender, used to link a Client to Immunization records.
Client Status	Char(1)		A	Use the NESIIS code set for **Client Status**.
First Name	Char(25)	Y		If client 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)			These are mandatory fields in NESIIS. However, if the information is unavailable for historical records, fill these fields with blanks.
Mothers Maiden Last Name	Char(35)			
Sex (Gender)	Char(1)			Use the NESIIS code set for **Sex (Gender)**.
Race	Char(1)			Use the NESIIS code set for **Race**.
Ethnicity	Char(2)			Use the NESIIS code set for **Ethnicity**.
SSN	Char(9)			Must be a valid SSN to load. Invalid SSN's are considered to be any SSN with all of the same numbers (999999999), all consecutive numbers (123456789 or 012345678), any SSN containing non-numeric characters, any SSN beginning with '000' or ending with '0000'. A record with an invalid SSN will not be rejected itself, but the invalid SSN will be rejected and this will be noted in the response file.
Contact Allowed	Char(2)		02	Controls whether notices are sent. Use the NESIIS code set for **Contact**. If <null> default to 02.
Consent to Share	Char(1)		<null>	Controls visibility of records to other organizations. Use Y, N, or <null>. If incoming value is null, database will store as 'U' and UI will store as "Unknown". Null will be sent back on bidirectional and NESIIS to PO exchanges.
Chart Number	Char(20)			Identifier within the sending organization's system
Responsible Party First Name	Char(25)			The name of the contact person for the client if other than self.
Responsible Party Middle Name	Char(25)			
Responsible Party Last Name	Char(35)			
Responsible Party	Char(2)			Use the NESIIS code set for **Relationship**.

Column	Data type	Required	Default	Notes
Relationship				
Street Address	Char(55)			The primary address of the client/contact.
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)			Client's county of residence. Use the NESIIS code set for **Counties.**
Phone	Char(17)			Format as digits only starting with the area code, ex. 4021234567.
Sending Organization	Char(5)			This is ID of the provider organization that owns this client and corresponding immunization records. **Contact the NESIIS 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
Client Record Identifier	Char(24)	Y		Supplied by sender, used to link Immunizations to a Clients record.
Vaccine Group	Char(16)	*		Use the NESIIS code set for **Vaccine Codes**. ***Either Vaccine Group or CPT Code is required.***
CPT Code	Char(5)	*		
Trade Name	Char(24)			Use the NESIIS code set for **Vaccine Codes**.
Vaccination Date	Date(8)	Y		MMDDYYYY
Administration Route Code	Char(2)			Use the NESIIS code set for **Administration Route**.
Body Site Code	Char(4)			Use the NESIIS code set for **Body Site**.
Reaction Code	Char(8)			Use the NESIIS code set for **Reaction**.
Manufacturer Code	Char(4)			Use the NESIIS code set for **Manufacturers**.
Immunization Information Source	Char(2)		01	Indicates whether this immunization was administered by your organization or the immunization information is historical from client record. Use the NESIIS code set for **Immunization Information Source**.
Lot Number	Char(30)			Converted records will be stored in NESIIS as historical records, so the Lot Number will not correspond to inventory tracked in NESIIS, 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 client and corresponding immunization records. **Contact the NESIIS 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.

Comment Code (Optional File – Not Required)

Column	Data type	Required	Default	Notes
Client Record Identifier	Char(24)	Y		Supplied by sender, used to link Comments to a Clients record. This field is required if a comment code is being sent.
Comment Code	Char(2)	Y		Use the NESIIS 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 NESIIS.

a) The NESIIS system will write out multiple refusals for the same vaccine on different dates for those clients who have them.

b) The NESIIS 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 client 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.

Client Record

```
12345*******************AMELANA*******************RAE**********************TEST**********************
******************08141985********MARY*********************CARPENTER**************************FWNH*
********02Y******************33DAVID********************RAPHAEL******************TEST****************
**************33125*WEST*STREET*****************************************************************
*****************************************************************LINCOLN****************************
******************* NE685095026NE109*******4025556543*****
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Immunization Record

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12345*******************DTAP*****************TETRAMUNE***************10091985******************00****
*****************************************************************************************************
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Comment Code Record

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12345*******************3110091985
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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	**BN**	Bilateral Naris
	LA	Left Arm
	LG	Left Gluteous Medius
	LT	Left Thigh
	LD	Left Deltoid
	LVL	Left Vastus Lateralis
	LLFA	Left Lower Forearm
	RA	Right Arm
	RG	Right Gluteous Medius
	RT	Right Thigh
	RD	Right Deltoid
	RVL	Right Vastus Lateralis
	RLFA	Right Lower Forearm
Client Status	**A**	Active
	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)
	LA	Allergy to latex
	06	Allergy to neomycin (anaphylactic) MMR & IPV
	07	Allergy to Streptomycin (anaphylactic)
	08	Allergy to Thimerosal (anaphylactic)
	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
	33	History of Varicella/chicken pox
	23	Immune globulin(IG) administration, recent or simultaneous
	24	Immunity: Diphtheria
	25	Immunity: Haemophilus Infuluenzae type B
	HE	Immunity: Hepatitis A
	26	Immunity: Hepatitis B

Table Item	Code	Description
	27	Immunity: Measles
	28	Immunity: Mumps
	29	Immunity: Pertussis
	30	Immunity: Poliovirus
	31	Immunity: Rubella
	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
	MA	Physician documented exemption due to medical reasons for DTP/aP vaccine group
	MB	Physician documented exemption due to medical reasons for Pediatric DT vaccine
	MC	Physician documented exemption due to medical reasons for Hepatitis A vaccine group
	MD	Physician documented exemption due to medical reasons for Hepatitis B vaccine group
	ME	Physician documented exemption due to medical reasons for Hib vaccine group
	MF	Physician documented exemption due to medical reasons for MMR vaccine group
	MG	Physician documented exemption due to medical reasons for Meningococcal vaccine group
	MH	Physician documented exemption due to medical reasons for Pneumococcal vaccine group
	MI	Physician documented exemption due to medical reasons for Polio vaccine group
	MJ	Physician documented exemption due to medical reasons for Rotavirus vaccine group
	MK	Physician documented exemption due to medical reasons for Adult Td vaccine group
	ML	Physician documented exemption due to medical reasons for Varicella vaccine group
	RA	Client has been exposed to Rabies
	P1	Refusal of DT
	P2	Refusal of DtaP
	P3	Refusal of HepB
	P4	Refusal of Hib
	P5	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
	PD	Refusal of Meningococcal
	PE	Refusal of Rotavirus
	PF	Refusal of HPV
	PG	Refusal of Pertussis
	PS	Refusal of Smallpox
	PT	Refusal of Tdap
	39	Pregnancy (in recipient)
	31	Rubella titer – immune
	40	Thrombocytopenia
	41	Thrombocytopenia purpura (history)
	33	Varicella titer – immune
Contact	**01**	No contact allowed – Notices are not to be sent.
	02	Contact Allowed – Notices will be sent.

Table Item	Code	Description
Counties *(Nebraska)*	**NE001**	Adams
	NE003	Antelope
	NE005	Arthur
	NE007	Banner
	NE009	Blaine
	NE011	Boone
	NE013	Box Butte
	NE015	Boyd
	NE017	Brown
	NE019	Buffalo
	NE021	Burt
	NE023	Butler
	NE025	Cass
	NE027	Cedar
	NE029	Chase
	NE031	Cherry
	NE033	Cheyenne
	NE035	Clay
	NE037	Colfax
	NE039	Cuming
	NE041	Custer
	NE043	Dakota
	NE045	Dawes
	NE047	Dawson
	NE049	Deuel
	NE051	Dixon
	NE053	Dodge
	NE055	Douglas
	NE057	Dundy
	NE059	Fillmore
	NE061	Franklin
	NE063	Frontier
	NE065	Furnas
	NE067	Gage
	NE069	Garden
	NE071	Garfield
	NE073	Gosper
	NE075	Grant
	NE077	Greeley
	NE079	Hall
	NE081	Hamilton
	NE083	Harlan
	NE085	Hayes
	NE087	Hitchcock
	NE089	Holt
	NE091	Hooker
	NE093	Howard
	NE095	Jefferson
	NE097	Johnson
	NE099	Kearney
	NE101	Keith

Table Item	Code	Description
	NE103	Keya Paha
	NE105	Kimball
	NE107	Knox
	NE109	Lancaster
	NE111	Lincoln
	NE113	Logan
	NE115	Loup
	NE117	McPherson
	NE119	Madison
	NE121	Merrick
	NE123	Morrill
	NE125	Nance
	NE127	Nemaha
	NE129	Nuckolls
	NE131	Otoe
	NE133	Pawnee
	NE135	Perkins
	NE137	Phelps
	NE139	Pierce
	NE141	Platte
	NE143	Polk
	NE145	Red Willow
	NE147	Richardson
	NE149	Rock
	NE151	Saline
	NE153	Sarpy
	NE155	Saunders
	NE157	Scotts Bluff
	NE159	Seward
	NE161	Sheridan
	NE163	Sherman
	NE165	Sioux
	NE167	Stanton
	NE169	Thayer
	NE171	Thomas
	NE173	Thurston
	NE175	Valley
	NE177	Washington
	NE179	Wayne
	NE181	Webster
	NE183	Wheeler
	NE185	York
Counties *(Colorado)*	**CO075**	Logan
	CO095	Phillips
	CO115	Sedgwick
	CO123	Weld
	CO125	Yuma
Counties *(Iowa)*	**IA071**	Fremont
	IA085	Harrison
	IA129	Mills
	IA133	Monona
	IA149	Plymouth

Table Item	Code	Description
	IA155	Pottawattamie
	IA193	Woodbury
Counties *(Kansas)*	**KS013**	Brown
	KS023	Cheyenne
	KS039	Decatur
	KS089	Jewell
	KS117	Marshall
	KS123	Mitchell
	KS131	Nemaha
	KS137	Norton
	KS147	Phillips
	KS153	Rawlins
	KS157	Republic
	KS183	Smith
	KS201	Washington
Counties *(Missouri)*	**MO005**	Atchison
	MO087	Holt
Counties *(South Dakota)*	**SD007**	Bennett
	SD009	Bon Homme
	SD023	Charles Mix
	SD027	Clay
	SD047	Fall River
	SD053	Gregory
	SD113	Shannon
	SD121	Todd
	SD123	Tripp
	SD135	Yankton
Counties *(Wyoming)*	**WY015**	Goshen
	WY021	Laramie
	WY027	Niobrara
	WY031	Platte
Ethnicity	**NH**	Non-Hispanic
	H	Hispanic
Immunization Information Source	**00**	Administered Vaccine by providing organization
	01	Historical recorded from client record
Manufacturers	**AB**	Abbott Laboratories *(Ross Products Division)*
	AD	Adams Laboratories
	ALP	Alpha Therapeutic Corporation
	AR	Armour (Inactive use ZLB)
	AVB	Aventis Behring L.L.C. (*Centeon and Armour Pharmaceutica, Inactive use ZLB*)
	AVI	Aviron
	BA	Baxter Healthcare Corporation (Inactive use BAH)
	BAH	Baxter Healthcare Corporation (*Hyland, Immuno Intl. AG, and N. Amer. Vac*)
	BAY	Bayer (Including Miles And Cutter)
	BP	Berna Products (Inactive use BPC)
	BPC	Berna (*Including Swiss Serum And Vib*)
	CEN	Centeon (Inactive use AVB)
	CHI	Chiron Corporation (Inactive use NOV)
	CMP	Celltech Medeva Pharmaceuticals (Inactive use NOV)

Table Item	Code	Description
	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. (*Ciba-Geigy and Sandoz*)
	NVX	Novavax, Inc
	NYB	New York Blood Center
	OTC	Organon Teknika Corporation
	ORT	Ortho-Clinical Diagnostics (formerly Ortho Diagnostic Systems, Inc.)
	PMC	Aventis Pasteur (*Connaught and Pasteur Merieux*)
	PD	Parkedale Pharmaceuticals (formerly Parke-Davis)
	PFR	Pfizer, Inc.
	PRX	Praxis Biologics (Inactive use WAL)
	PWJ	Powerject Pharmaceuticals (*Celltech Medeva and Evans Medical*)
	SCL	Sclavo, Inc.
	SI	Swiss Serum and Vaccine Inst. (Inactive use BPC)
	SKB	GlaxoSmithKline (*SmithKline Beecham and Glaxo Wellcome*)
	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 (*Lederle and Praxis*) (Inactive use PFR)
	ZLB	ZLB Behring (includes Aventis Behring and Armour Pharaceutical Company)
	OTH	Other manufacturer
	UNK	Unknown
Race	**I**	American Indian or Alaska Native
	A	Asian or Pacific Islander
	B	Black or African-American
	W	White
	O	Other
	U	Unknown
Relationship	**18**	Self

Table Item	Code	Description
	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 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, unspecified formulation		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-BC	Bacillus Calmette-Guerin bladder cancer	OTC
90728			BCG, unspecified formulation		BCG, unspecified formulation	
90725	26	Cholera	Cholera-Injectable	Cholera-I	Cholera injectable	NOV
90592			Cholera-Oral	Cholera-O	Cholera Oral	NOV
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
90696	130		DTaP-IPV	Kinrix	DTaP-IPV combination	SKB
	106		DTAP, 5 pertussis antigens	DAPTACEL	Diphtheria, tetanus, acellular pertussis, 5 antigens	PMC
	107		DTaP, unspecified formulation		Recorded as CVX 20	
	102		DTP-HIB-HepB		DTP-HIB-Hep B vaccine	
90663	125	Flu H1N1-09	Novel Influenza-H1N1-09, nasal	H1N1 Flu-Mist	Novel Influenza-H1N1-09, live virus for nasal administration	MED
	126		Novel Influenza-H1N1-09, preserve-free	H1N1 Afluria, P-free	Novel influenza-H1N1-09, preservative-free, injectable	CSL
				H1N1 Fluvirin, P-free		NOV
				H1N1 Fluzone, P-free		PMC
	127		Novel Influenza-H1N1-09	H1N1 Afluria	Novel influenza-H1N1-09, injectable	CSL
				H1N1 Fluvirin		NOV
				H1N1 Fluzone		PMC
	128		Novel Influenza-H1N1-09 all formulations		Novel Influenza-H1N1-09, All formulations	
90655	140	Influenza	Influenza, seasonal, preservative free	Fluvirin, P-free	Influenza, seasonal, injectable, preservative free	NOV
				Fluzone, P-free		PMC
				Afluria, P-free		CSL
				Agriflu, P-free		NOV
90656				Fluvirin, P-free		NOV
				Fluzone, P-free		PMC
				Afluria, P-free		CSL
				Agriflu, P-free		NOV
90662	135		Influenza High-Dose Preservative-Free	Fluzone High-Dose P-free	Influenza, seasonal, high dose, preservative-free	PMC
90657	141		Influenza, seasonal, injectable	Flu-Immune	Influenza, seasonal, injectable	WAL
				Flu-Shield		WAL
				Fluzone		PMC
				Afluria		CSL
				Fluvirin		NOV
				Fluogen		PD
				Fluarix		SKB
90658				Flu-Immune		WAL
				Flu-Shield		WAL
				Fluzone		PMC
				Afluria		CSL
				Fluvirin		NOV
				Fluogen		PD
				Fluarix		SKB

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG
90660	111		Influenza, live, intranasal	Flu-Mist	Seasonal influenza virus vaccine, live, attenuated, for intranasal use	WAL
90659	16		Influenza, Whole virus		Seasonal influenza whole virus	
90724	88		Influenza, unspecified formulation	Flu-Deleted	Seasonal influenza, unspecified formulation *CVX 15 has been retired by the CDC and replaced by CVX 140 and 141* *If CVX 15 is sent it will be recorded as CVX 88 Influenza, unspecified formulation*	
90632	52	HepA	HepA adult	Havrix-Adult	Hepatitis A adult	SKB
				VAQTA-Adult		MSD
90633	83		HepA ped-2 dose	Havrix-Peds 2 Dose	Hepatitis A pediatric/adolescent 2 dose	SKB
				VAQTA-Peds 2 Dose		MSD
90634	84		HepA ped-3 dose	Havrix-Peds 3 Dose	Hepatitus A pediatric/adolescent 3 dose	SKB
						MSD
90636	104		HepA-HepB Adult	Twinrix	Hepatitus A & Hepatitus B adult	SKB
90730	85		Hep A, unspecified formulation		Hep A, unspecified formulation	
	31		Hep A-peds, unspecified formulation		Recorded as CVX 85	
90636	104	HepB	HepA-HepB Adult	Twinrix	Hepatitus A & Hepatitus B adult	SKB
90723	110		DTAP-HepB-Polio	Pediarix	DTAP-HepB-Polio combination	SKB
90731	45		Hep B, unspecified formulation		Hep B, unspecified formulation	
90740	44		Hep B-dialysis 3 dose		Hepatitis B Dialysis 3 dose	
90743	43		HepB adult	Recombivax-Adult	Hepatitis B adult dose 1ml	MSD
				Engerix-B Adult		SKB
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
90645	47	Hib	Hib-HbOC	HibTITER	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, unspecified formulation		Hib, unspecified formulation	
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, quadrivalent	MSD
90650	118		HPV, Bivalent	Cervarix	Human Papilloma Virus, bivalent	SKB
	137		HPV, unspecified formulation		HPV, unspecified formulation	
90281	86	Ig	Ig	Ig	Ig human	
90283	87		IgIV	IgIV	Ig IV human	
				Flebogamma		
90287	27		Botulinum-antitoxin	Botulinum-antitoxin	Botulinum antitoxin equine	
90288			Botulism	BabyBIG	Botulism Immune Globulin	
				Botulism		
				BIG		

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG
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	
90378	93		RSV-IgIM	RSV-IgIM	Respiratory syncytial virus Ig	
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-Ig	VacciniaIg human	
90396	36		VZIg	VZIg	Varicella-zoster Ig human	
	117		VZIG (IND)	VariZIG		CNJ
			Varicella IG			
90665	66	Lyme	Lyme	LYMErix	Lyme disease	SKB
90735	39	Encephalitis	Japanese encephalitis-SC	JE-Vax	Japanese encephalitis-Subcutaneous administration	JPN
90738	134		Japanese encephalitis-IM	Ixiaro	Japanese Encephalitis-Intramuscular administration	NOV
90705	05	Measles	Measles	Measles	Measles live 1964-1974 (Eli Lilly)	MSD
				Attenuvax	Measles live	MSD
90708	04		Measles-Rubella	M-R-VAX	Measles and rubella live	MSD
				Measles-Rubella (MERU)		MSD
90704	07	Mumps	Mumps	Mumps	Mumps 1950-1978	MSD
				Mumpsvax	Mumps live	MSD
90709			Rubella-Mumps, unspecified formulation			
	38		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	MSD
90733	32	Meningo	Meningococcal MPSV4	MENOMUNE	meningococcal polysaccharide vaccine (MPSV4)	PMC
90734	114		Meningococcal MCV4P	Menactra	meningococcal polysaccharide (groups A, C, Y and W-135) diphtheria toxoid conjugate vaccine (MCV4P)	PMC
	136		Meningococcal MCV4O	Menveo	meningococcal oligosaccharide (groups A, C, Y and W-135) diphtheria toxoid conjugate vaccine (MCV4O)	NOV
	108		Meningococcal, unspecified formulation		Meningococcal, unspecified formulation	
	11	Pertussis	Pertussis	Pertussis	Pertussis vaccine	
90727	23	Plague	Plague	Plague	Plague	GRE
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
90696	130		DTaP-IPV	Kinrix	DTaP-IPV combination	SKB
	89		Polio, unspecified formulation		Polio, unspecified formulation	
90732	33	Pneumo-Poly	Pneumococcal 23	PNU-IMUNE 23	Pneumococcal polysaccharide 23 valent	WAL
				Pneumovax 23		MSD
90669	100	Pneumococcal	Pneumo-conjugate	Prevnar	Pneumococcal conjugate polyvalent	WAL
90670	133		Pneumo-conjugate 13	Prevnar 13	Pneumococcal conjugate vaccine, 13 valent	PFR
	109		Pneumococcal , unspecified formulation		Pneumococcal ,unspecified formulation	
90675	18	Rabies	Rabies-intramuscular	RabAvert	Rabies intramuscular	NOV

CPT	CVX	Group	Vaccine	Trade Name	Description	MFG
				Imovax Rabies IM		PMC
90676	40		Rabies-intradermal	Imovax Rabies ID	Rabies intradermal	PMC
90726	90		Rabies, unspecified formulation		Rabies, unspecified formulation	
90680	74	Rotavirus	Rotavirus, Tet	RotaShield	Rotavirus tetravalent live oral (removed on 10/16/1999)	WAL
90680	116		Rotavirus, Pent	RotaTeq	Rotavirus pentavalent (after 02/02/2006)	MSD
90681	119		Rotavirus, monovalent	Rotarix	Rotavirus monovalent	SKB
	122		Rotavirus, unspecified formulation		Rotavirus, unspecified formulation (between 10/16/1999 and 02/01/2006)	
90706	06	Rubella	Rubella	Rubella	Rubella live	MSD
				Meruvax II		MSD
90708	04		Measles-Rubella	Measles-Rubella (MERU)	Measles and rubella live	MSD
				M-R-VAX		MSD
90709			Rubella-Mumps, unspecified formulation		Rubella-Mumps, unspecified formulation	
	38		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 (smallpox), diluted	Vaccinia (smallpox), diluted	
90718	09	Td	Td (adult), absorbed	Td	Tetanus and diphtheria adult	PMC
	09					MBL
90714	113		Td (adult) preservative free	DECAVAC	Td preservative free – CPT code is effective for immunizations given on or after 7/1/2005	PMC
				Td P-free		MBL
90715	115		TdaP > 7 Years	Adacel	TdaP > 7 years	PMC
				Boostrix		SKB
90715	115	Tdap	TdaP > 7 Years	Adacel	TdaP > 7 years	PMC
				Boostrix		SKB
90703	35	Tetanus	Tetanus	TT	Tetanus	PMC
	112		Tetanus Toxoid, , unspecified formulation		Recorded as CVX 35	
90690	25	Typhoid	Typhoid-oral	Vivotif Berna/Ty21a	Typhoid oral	
90691	101		Typhoid-ViCPs	Typhim Vi	Typoid 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)	
90714	91		Typhoid, unspecified formulation		Typhoid, unspecified formulation (after 7/1/2005, no CPT code is associated with this vaccine group)	
90710	94	Varicella	MMRV	Proquad	MMRV	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