

# State of California—Health and Human Services Agency California Department of Public Health



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TO: Vaccines for Children (VFC) Providers

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Division of Communicable Disease Control, Immunization Branch

SUBJECT: Pediarix<sup>®</sup> Limited Supplies

## Pediarix<sup>®</sup> Limited Supplies

The California Vaccines for Children (VFC) Program has just been notified that due to the continuing increased demand for Pediarix<sup>®</sup> (DTaP-IPV-HepB) into summer 2013, the VFC Program's monthly Pediarix<sup>®</sup> allocations have been decreased to approximately half our current monthly distribution; limited allocations of Pediarix<sup>®</sup> are anticipated to continue until September 2013.

#### Adequate Supplies of Individual DTaP, Hepatitis B, and IPV Vaccines

The VFC Program continues to have adequate supplies of individual DTaP, hepatitis B, and IPV vaccines to meet provider demand. Although this supply limitation may translate to an increased number of injections per visit, providers should NOT defer or delay immunizing patients at the recommended ages.

For providers currently using Pediarix®, the VFC Program recommends use of:

- Pediarix<sup>®</sup> for only the 2-month dose
- Individual DTaP, hepatitis B, and IPV vaccines for the 4- and 6-month doses.

Please decrease your orders of Pediarix<sup>®</sup> and increase your orders of DTaP, hepatitis B, and IPV vaccines as needed to meet your practice's needs. Providers will receive no more than half of their prior monthly average usage of Pediarix<sup>®</sup> while this limited allocation is in place.

<u>Providers using Pentacel® (DTaP-IPV/Hib)</u> as their combination vaccine should order sufficient supplies of individual vaccines to provide all recommended immunizations for their patients. Due to the current limitations on <u>Pediarix®</u> vaccine supply, VFC will not be able to approve orders from providers wishing to transition from Pentacel® to Pediarix®.

Comvax (Hib-HepB) is also available and is another option for your practice.

## Individual Vaccine Options to Replace Pediarix® 2-Month and 4-Month Doses

Vaccine Type	Brand Name	Indication	Schedule
DTaP	DAPTACEL®	6 weeks through 6 years	2, 4, 6, 15-18 months,
	Infanrix <sup>®</sup>		and 4-6 years
IPV	IPOL <sup>®</sup>	6 weeks and older	2, 4, 6-18 months,
			and 4-6 years
Hepatitis B	Engerix B®	Children and adults	0, 1-2, and 6 months
	Recombivax®		

### Schedule Using Pediarix® and Individual Vaccines

2 months	4 months	6 months	12 months	15 months
Pediarix <sup>®</sup>	DTaP	DTaP	HepA	DTaP
(DTaP, IPV,	IPV	IPV	MMR	
Hepatitis B)	Hepatitis B <sup>1</sup>	Hepatitis B	Varicella	
PCV13	PCV13	PCV13	PCV13	
Rotavirus	Rotavirus	Rotavirus <sup>2</sup>		
Hib	Hib	Hib <sup>3</sup>	Hib	

You may find this job aid useful regarding increased use of single-dose vaccines in babies: Injectable Vaccines by Route

Other vaccine administration resources, such as the comfort measures guide, can be found on the EZIZ.org vaccine administration job aid page.

We appreciate your flexibility, understanding, and your continued efforts to immunize our young children against serious vaccine-preventable diseases. If you have any questions about this communication, please contact your VFC Representative or VFC Customer Service at 1-877-243-8832.

<sup>&</sup>lt;sup>1</sup>Four-month dose not needed if hepatitis B birth dose was administered.
<sup>2</sup> The rotavirus vaccines differ in number of doses; please check package inserts.
<sup>3</sup> Six-month Hib dose is not indicated if PedvaxHIB<sup>®</sup> and/or Comvax<sup>®</sup> are used exclusively for the 2- and 4-month infant doses.