

ADMINISTRATION GUIDE FOR SHINGRIX


STORAGE, RECONSTITUTION, AND ADMINISTRATION

- Refrigerate between 2° and 8°C (36° and 46°F). Discard if frozen and protect from light
- Reconstitute and use immediately
- Reconstituted vaccine is stable for 6 hours refrigerated between 2° and 8°C (36° and 46°F), and should be discarded after 6 hours


DO NOT FREEZE



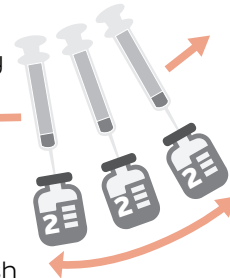
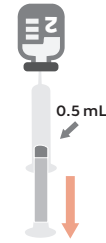


Vial 1 of 2
AS01_B Adjuvant
Suspension Component
(blue-green cap/red ring)



Vial 2 of 2
Lyophilized VZV gE
Antigen Component
(brown cap/green ring)



- 1 Cleanse both vial stoppers. Using a sterile needle and sterile syringe, withdraw the entire contents of vial 1, containing the adjuvant suspension component, by slightly tilting the vial.
 
- 2 Slowly transfer entire contents of syringe into the lyophilized antigen component in vial 2.
 
- 3 Gently shake the vial to thoroughly mix contents until powder is completely dissolved. The reconstituted vaccine should be a pale brownish liquid.
 
- 4 After reconstitution, withdraw 0.5 mL from the vial containing the reconstituted vaccine and administer **intramuscularly (IM)**.
 

Reconstituted Vaccine

VZV=varicella zoster virus; gE=glycoprotein E.

TOPICS TO DISCUSS WITH YOUR PATIENTS

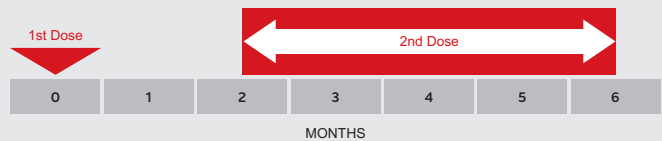
WHAT TO EXPECT

Please provide your patients with the “What to Expect” guide for more information.



2-DOSE SERIES

Encourage your patients to schedule their second dose anytime between 2 and 6 months after their first dose.



Help your patients stay on track with their follow-up dose by utilizing the Reminder Card.

Indication

SHINGRIX is a vaccine indicated for prevention of herpes zoster (shingles) in adults aged 50 years and older.

SHINGRIX is not indicated for prevention of primary varicella infection (chickenpox).

Important Safety Information

- SHINGRIX is contraindicated in anyone with a history of a severe allergic reaction (eg, anaphylaxis) to any component of the vaccine or after a previous dose of SHINGRIX
- Review immunization history for possible vaccine sensitivity and previous vaccination-related adverse reactions. Appropriate medical treatment and supervision must be available to manage possible anaphylactic reactions following administration of SHINGRIX

- Solicited local adverse reactions in subjects aged 50 years and older were pain (78.0%), redness (38.1%), and swelling (25.9%)

- Solicited general adverse reactions in subjects aged 50 years and older were myalgia (44.7%), fatigue (44.5%), headache (37.7%), shivering (26.8%), fever (20.5%), and gastrointestinal symptoms (17.3%)

- SHINGRIX was not studied in pregnant or lactating women, and it is unknown if it is excreted in human milk. Therefore, it cannot be established whether there is vaccine-associated risk with SHINGRIX in pregnant women or if there are effects on breastfed infants or milk production/excretion

- Vaccination with SHINGRIX may not result in protection of all vaccine recipients

Please see full Prescribing Information at SHINGRIXHCP.com



SHINGRIX
(ZOSTER VACCINE
RECOMBINANT, ADJUVANTED)

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