STORAGE, RECONSTITUTION, AND ADMINISTRATION OF SHINGRIX

Please refer to the full Prescribing Information for SHINGRIX for full details.

- 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

<table>
<thead>
<tr>
<th>Vial 1 of 2</th>
<th>Vial 2 of 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjuvant Suspension Component (blue-green cap/red ring)</td>
<td>Lyophilized VZV gE Antigen Component (brown cap/green ring)</td>
</tr>
</tbody>
</table>

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 the 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).

Important Safety Information (cont’d)
- 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%).

Please see Important Safety Information for SHINGRIX throughout and full Prescribing Information at SHINGRIXHCP.com.

HOW SHINGRIX IS SUPPLIED

SHINGRIX is supplied as an outer package of 1 dose (NDC 58160-819-12) containing:
- Adjuvant Suspension Component (Vial 1 of 2)
  - NDC 58160-829-01
- Lyophilized gE Antigen Component (Vial 2 of 2)
  - NDC 58160-828-01

SHINGRIX is supplied as an outer package of 10 doses (NDC 58160-823-11) containing:
- Adjuvant Suspension Component (10 vials)
  - NDC 58160-829-03
- Lyophilized gE Antigen Component (10 vials)
  - NDC 58160-828-03

BILLING, CODING, AND INSURANCE

<table>
<thead>
<tr>
<th>CPT Code (Product):</th>
<th>90750</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPT Code (Administration) 1 vaccine administered:</td>
<td>90471</td>
</tr>
</tbody>
</table>
Each additional vaccine administered during same encounter: | 90472 |
| ICD-10-CM Code (Encounter for Immunization): | Z23 |
| Administration Modifier for Medicare: | GY |
| MVX Code: | SKB |
| CVX Code: | 187 |

If you have any questions regarding SHINGRIX, call 1-800-772-9292 or visit SHINGRIXHCP.com

Important Safety Information (cont’d)
- SHINGRIX was not studied 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 important Safety Information for SHINGRIX throughout and full Prescribing Information at SHINGRIXHCP.com.

SHINGRIX (ZOSTER VACCINE RECOMBINANT, ADJUVANTED)

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ONLY SHINGRIX DELIVERS >90% EFFICACY REGARDLESS OF AGE IN THOSE 50 YEARS AND OLDER

- Age-related decline in immunity is a dominant driver of shingles
- CDC states that SHINGRIX is preferred over ZVL for the prevention of herpes zoster and related complications
- SHINGRIX is a recombinant vaccine for intramuscular (IM) injection only; DO NOT FREEZE
- Majority of solicited local and general adverse reactions to SHINGRIX were transient with a median duration of 2-3 days

*Data from the phase 3 ZOE-50 (≥50 years of age) trial and pooled data in individuals ≥70 years of age from the phase 3 ZOE-70 and ZOE-50 trials from subjects randomized to receive 2 doses of SHINGRIX (N=7698 and 8250, respectively) or placebo (N=7713 and 8346, respectively).†
*Please see CDC recommendations inside.
CDC=Centers for Disease Control and Prevention; ZVL=Zoster Vaccine Live.
**Understanding Shingles & Aging**

- 99% of people ≥50 years old are infected with the varicella zoster virus.
- In 1 out of 3 people, the dormant virus reactivates and causes shingles.
- As immunity against the virus decreases with age, the risk of reactivation increases.

**Patient Engagement**

Identification

SHINGRIX is indicated for prevention of shingles in adults aged 50 years and older.

- Recommended for the prevention of herpes zoster and related complications for immunocompetent adults aged ≥50 years.
- Preferred over ZVL for the prevention of herpes zoster and related complications.

**The CDC States That Shingrix is:**

- Preferred over ZVL for the prevention of herpes zoster and related complications.
- Recommended for the prevention of herpes zoster and related complications for immunocompetent adults who previously received zoster vaccine live (ZVL).

**Important Considerations**

- There are limited data on vaccination with SHINGRIX in patients previously vaccinated with ZVL.
  - In a phase 3 study, humoral immunogenicity was non-inferior among subjects previously vaccinated at least 5 years earlier with ZVL.
- No apparent safety differences were observed between study groups within 30 days post-dose 2 of SHINGRIX.
- Solicited local and systemic symptoms were similar between study groups.
- The levels of antibodies and immune cells that correlate with protection against shingles have not been clearly defined.
- There are no head-to-head clinical trials comparing the efficacy and safety of SHINGRIX to ZVL.

**Topics to Discuss With Your Patients**

Inform patients of the potential benefits and risks of immunization with SHINGRIX.

**Shingles Disease Risk**

- 99% of people ≥50 years of age are at risk for developing shingles, and 1 out of 3 people will get shingles.
- The risk increases with age, especially after age 50 years.

**Indication**

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

**Efficacy**

Only SHINGRIX delivers >90% efficacy against shingles regardless of age in those 50 years and older.

**Safety and Tolerability**

- Majority of solicited local and general adverse reactions to SHINGRIX were transient with a median duration of 2-3 days.

**References:**
1. Prescribing Information for SHINGRIX.

**Important Safety Information (cont’d)**

- 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.

**Patient Engagement (Cont’d)**

**Topics to Discuss With Your Patients (cont’d)**

**What to Expect**

It’s important to inform the patient:

You may experience local adverse reactions after receiving SHINGRIX. In clinical trials, the most common local adverse reactions were pain, redness, and swelling at the injection site. The most common general adverse events were myalgia, fatigue, headache, shivering, fever, and gastrointestinal symptoms.

Because each patient’s clinical situation is unique, GSK has no specific recommendations on adverse reaction management. GSK recommends healthcare professionals (HCPs) use their clinical judgment.

Specific management of adverse reactions was not studied in the clinical trials of SHINGRIX.

The Immunization Action Coalition (IAC) recommends if localized reaction occurs, such as soreness, redness, itching, or swelling at the injection site, to apply a cold compress to the injection site. Consider giving an analgesic (pain reliever) or antipruritic (anti-itch) medication. These are general recommendations from IAC and have not been evaluated with SHINGRIX.

**2-Dose Series**

The efficacy of SHINGRIX was only studied in patients who received 2 doses of the vaccine. In order for your patients to experience similar results, encourage them to schedule their second dose anytime between 2 and 6 months after their first dose.

In order to stay on track, patients can sign up for a reminder at SHINGRIXreminder.com.

**Important Safety Information (cont’d)**

- 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.

Please see Important Safety Information for SHINGRIX throughout and full Prescribing Information at SHINGRIXHCP.com.