

Flat File Specification **Version 15.3.0 (Revised 12/08/2020)**

Appendix

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 to 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.

File Layout:

Client Data

| Column | Data type | Pos # | Required | Default | Notes |
|--------------------------------|-----------|-------|----------|---------|--|
| Record Identifier | Char (24) | 1 | Y | | Supplied by sender, used to link a Client to Immunization records. |
| Client Status | Char (1) | 25 | | A | Use the IR code set for Client Status . |
| First Name | Char (25) | 26 | Y | | If client does not have a first name, “ NO FIRST NAME ” must be entered in this field. |
| Middle Name | Char (25) | 51 | | | |
| Last Name | Char (35) | 76 | Y | | |
| Name Suffix | Char (10) | 111 | | | Defined Values: JR, SR, I, II, III, IV, V, VI, VII, VIII, IX, X |
| Birth Date | Date (8) | 121 | Y | | MMDDYYYY |
| Death Date | Date (8) | 129 | | | MMDDYYYY |
| Mothers First Name | Char (25) | 137 | | | These are mandatory fields in IR. However, if the information is unavailable for historical records, fill these fields with blanks. |
| Mothers Maiden Last Name | Char (35) | 162 | | | |
| Sex (Gender) | Char (1) | 197 | | | Use the IR code set for Sex (Gender) . |
| Race | Char (1) | 198 | | | Use the IR code set for Race . |
| Ethnicity | Char (2) | 199 | | | Use the IR code set for Ethnicity . |
| SSN | Char (9) | 201 | | | |
| Contact Allowed | Char (2) | 210 | | 02 | Controls whether notices are sent. Use the IR code set for Contact . If <null> default to 02 'Yes'. |
| Consent to Share | Char (1) | 212 | | <null> | Controls visibility of records to other provider organizations. Should always be set to 'Y' or null. |
| Chart Number | Char (20) | 213 | | | Identifier within the sending organization's system. Chart number is required for HEDIS Reporting. |
| Responsible Party First Name | Char (25) | 233 | | | |
| Responsible Party Middle Name | Char (25) | 258 | | | |
| Responsible Party Last Name | Char (35) | 283 | | | |
| Responsible Party Relationship | Char (2) | 318 | | | Use the IR code set for Relationship . If Responsible Party name is entered and Relationship = "" or null, relationship defaults to 21 - Unknown. |

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| Column | Data type | Pos # | Required | Default | Notes |
|----------------------------|-----------|-------|---|--|---|
| Street Address | Char (55) | 320 | | | Residential address of responsible person. If the mailing address line is NOT populated, the street address will appear on mailing labels, client reports and online display screens. |
| Mailing Address Line | Char (55) | 375 | | | Mailing address of responsible person. Use if mailing address is different from street address. If the mailing address is populated, it is the address that will appear on mailing labels, client reports and online display screens. |
| Other Address Line | Char (55) | 430 | | | |
| City | Char (52) | 485 | | | |
| State | Char (2) | 537 | | | |
| Zip | Char (9) | 539 | | | If +4 zip is used, the first 5 characters and second 4 characters are concatenated into a single value, without separators. |
| County | Char (5) | 548 | | | Use the IR code set for County . |
| Phone | Char (17) | 553 | | | Format as digits only starting with the area code, ex. 4041234567. |
| Sending Organization | Char (5) | 570 | | | This is ID of the provider organization that owns this client and corresponding immunization records. Contact the 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. |
| Eligibility Code | Char (3) | 575 | *either on client or imm record for new imms. | V00 – on new clients with historical imms. | Indicates the eligibility of the client. If a valid eligibility code is not received on the client or on the immunization record for a new immunization, the immunization will be rejected. Use the IR code set for Eligibility . |
| Eligibility Effective date | Date (8) | 578 | | | MMDDYYYY This is the effective date of the client's eligibility code. For existing clients, the effective date on the incoming client record is compared to the effective date on the database. If the eligibility date on the incoming record is more recent, the client eligibility is updated with the incoming eligibility code and effective date. The client eligibility may be different from the immunization eligibility code. |

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File Layout:

Immunization Data

| Column | Data type | Pos # | Required | Default | Notes |
|---------------------------------|-----------|-------|----------|---------|---|
| Client Record Identifier | Char (24) | 1 | Y | | Supplied by sender, used to link Immunizations to a Clients record. |
| Vaccine Group | Char (16) | 25 | * | | Use the IR code set for Vaccine Codes . |
| CPT Code** | Char (5) | 41 | * | | *Either Vaccine Group or CPT Code or Trade Name is required. |
| Trade Name | Char (24) | 46 | * | | <p>**The data exchange process will assign and store a trade name on the database for the incoming new or historical immunizations when the incoming CPT Code correlates to a single trade name</p> <p>*** A CPT code or Trade Name must be used to manage inventory in GRITS.</p> |
| Vaccination Date | Date (8) | 70 | Y | | MMDDYYYY |
| Administration Route Code | Char (2) | 78 | | | Use the IR code set for Administration Route . |
| Body Site Code | Char (4) | 80 | | | Use the IR code set for Body Site . |
| Reaction Code | Char (8) | 84 | | | Use the IR code set for Reaction . |
| Manufacturer Code | Char (4) | 92 | | | Use the IR code set for Manufacturers . |
| Immunization Information Source | Char (2) | 96 | * | 01 | Indicates whether this immunization was administered by your organization (from inventory entered in GRITS) or the immunization information is historical from client record. Use the IR code set for Immunization Information Source . Note: For organizations set up to decrement new immunizations from GRITS inventory via data exchange, this field is mandatory . See the Immunization Information Source IR code set in the Appendix for a full list of acceptable values and descriptions for this field. |
| Lot Number | Char (30) | 98 | | | Immunizations stored in GRITS as historical records will not correspond to GRITS inventory; however, the Lot Number will be stored as historical information. Note: For organizations set up to decrement new immunizations from GRITS inventory via data exchange, this field is mandatory . |
| Provider Name | Char (50) | 128 | | | The historical provider name. |
| Administered By Name | Char (50) | 178 | | | The name of the person who administered the vaccination. |
| Site Name | Char (30) | 228 | | | The Site Name or Site ID of the clinic site where the vaccination occurred. Note: For organizations set up to decrement new immunizations from GRITS inventory via data exchange, this field is mandatory if the organization has multiple sites to ensure inventory is deducted from the appropriate site. |
| Sending Organization | Char (5) | 258 | | | <p>This is ID of the provider organization that owns this client and corresponding immunization records. Contact the Help Desk for the appropriate organization ID.</p> <p>* 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.</p> |

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| Column | Data type | Pos # | Required | Default | Notes |
|------------------|-----------|-------|--|------------------|---|
| Eligibility Code | Char (3) | 263 | *either on client or imm record for new imm. | V00 on historic. | Indicates the eligibility of the client at the time the vaccine was administered. If a valid eligibility is not received on the client or on the immunization record for a new immunization, the immunization will be rejected. Use the IR code set for Eligibility . |

File Layout:

Comment Code (Optional File – Not Required)

| Column | Data type | Pos # | Required | Default | Notes |
|--------------------------|-----------|-------|----------|---------|--|
| Client Record Identifier | Char (24) | 1 | 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) | 25 | Y | | Use the IR code set for Comments . |
| Applies to Date | Date (8) | 27 | Y | | The date to which the comment applies. MMDDYYYY |
| Observation Method | Char (4) | 35 | | | For Varicella use only – Use IR code set for OBMETHOD |

Example

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

Client Record

```
*****12345ALAUREN*****RAE*****MAERZ*****0814
1985*****GAIL*****CARPENTER*****FWNH*****02Y*****33THOMAS*****
*****RAPHAEL*****MAERZ*****33125*WEST*STREET*****
*****MAILING ADDRESS*****OTHER ADDRESS*****TEST
CITY*****GA535291234GA121*****4049876543*****V0110091985
```

Immunization Record

```
*****12345DTAP*****TETRAMUNE*****10091985*****00*****
*****V01
```

Comment Code Record

```
*****123453310091985SERO
```

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| Table Item | Code | Description | |
|-----------------------------|--|--|----------|
| Administration Route | ID | Intradermal | |
| | IM | Intramuscular | |
| | IN | Intranasal | |
| | IV | Intravenous | |
| | PO | Oral | |
| | SC | Subcutaneous | |
| | TD | Transdermal | |
| Body Site | 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) | |
| | 06 | Allergy to neomycin (anaphylactic) MMR & IPV | |
| | 07 | Allergy to Streptomycin (anaphylactic) | |
| | 08 | Allergy to Thimerosal (anaphylactic) | |
| | 15 | Encephalopathy within 7 days of previous dose of DTP | |
| | 18 | Guillain-Barre Syndrome (GBS) within 6 weeks after DTP/DTaP | |
| | 21 | Current acute illness, moderate to severe (with or without fever)(e.g. diarrhea, otitis media, vomiting) | |
| | 22 | Chronic illness (e.g., chronic gastrointestinal disease) | |
| 23 | Immune globulin(IG) administration, recent or simultaneous | | |
| 26 | Serologic immunity: hepatitis B | | |

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| Table Item | Code | Description |
|----------------|-------|---|
| | 27 | Serologic immunity: measles |
| | 28 | Serologic immunity: mumps |
| | 31 | Serologic immunity: rubella |
| | 33 | Immunity: Varicella (chicken pox) |
| | 34 | Immunodeficiency (family history) |
| | 35 | Immunodeficiency (household contact) |
| | 36 | Immunodeficiency (in recipient) OPV & MMR & VZV |
| | 37 | Neurologic disorders, underlying (seizure disorder) |
| | 39 | Pregnancy (in recipient) |
| | 40 | Thrombocytopenia |
| | 41 | Thrombocytopenia purpura (history) |
| | PB | Allergy to POLYMYXIN B |
| | AB | Receipt of anti-body containing products |
| | RB | Client has been exposed to rabies |
| | HA | Serologic immunity: hepatitis A |
| | | |
| Contact | 01 | No contact allowed – Notices are not to be sent. |
| | 02 | Contact Allowed – Notices will be sent. |
| | | |
| County | GA001 | APPLING |
| | GA003 | ATKINSON |
| | GA005 | BACON |
| | GA007 | BAKER |
| | GA009 | BALDWIN |
| | GA011 | BANKS |
| | GA013 | BARROW |
| | GA015 | BARTOW |
| | GA017 | BEN HILL |
| | GA019 | BERRIEN |
| | GA021 | BIBB |
| | GA023 | BLECKLEY |
| | GA025 | BRANTLEY |
| | GA027 | BROOKS |
| | GA029 | BRYAN |
| | GA031 | BULLOCH |
| | GA033 | BURKE |
| | GA035 | BUTTS |
| | GA037 | CALHOUN |
| | GA039 | CAMDEN |

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| Table Item | Code | Description |
|------------|-------|---------------|
| | GA043 | CANDLER |
| | GA045 | CARROLL |
| | GA047 | CATOOSA |
| | GA049 | CHARLTON |
| | GA051 | CHATHAM |
| | GA053 | CHATTAHOOCHEE |
| | GA055 | CHATTOOGA |
| | GA057 | CHEROKEE |
| | GA059 | CLARKE |
| | GA061 | CLAY |
| | GA063 | CLAYTON |
| | GA065 | CLINCH |
| | GA067 | COBB |
| | GA069 | COFFEE |
| | GA071 | COLQUITT |
| | GA073 | COLUMBIA |
| | GA075 | COOK |
| | GA077 | COWETA |
| | GA079 | CRAWFORD |
| | GA081 | CRISP |
| | GA083 | DADE |
| | GA085 | DAWSON |
| | GA087 | DECATUR |
| | GA089 | DEKALB |
| | GA091 | DODGE |
| | GA093 | DOOLY |
| | GA095 | DOUGHERTY |
| | GA097 | DOUGLAS |
| | GA099 | EARLY |
| | GA101 | ECHOLS |
| | GA103 | EFFINGHAM |
| | GA105 | ELBERT |
| | GA107 | EMANUEL |
| | GA109 | EVANS |
| | GA111 | FANNIN |
| | GA113 | FAYETTE |
| | GA115 | FLOYD |
| | GA117 | FORSYTH |
| | GA119 | FRANKLIN |
| | GA121 | FULTON |

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| Table Item | Code | Description |
|------------|-------|-------------|
| | GA123 | GILMER |
| | GA125 | GLASCOCK |
| | GA127 | GLYNN |
| | GA129 | GORDON |
| | GA131 | GRADY |
| | GA133 | GREENE |
| | GA135 | GWINNETT |
| | GA137 | HABERSHAM |
| | GA139 | HALL |
| | GA141 | HANCOCK |
| | GA143 | HARALSON |
| | GA145 | HARRIS |
| | GA147 | HART |
| | GA149 | HEARD |
| | GA151 | HENRY |
| | GA153 | HOUSTON |
| | GA155 | IRWIN |
| | GA157 | JACKSON |
| | GA159 | JASPER |
| | GA161 | JEFF DAVIS |
| | GA163 | JEFFERSON |
| | GA165 | JENKINS |
| | GA167 | JOHNSON |
| | GA169 | JONES |
| | GA171 | LAMAR |
| | GA173 | LANIER |
| | GA175 | LAURENS |
| | GA177 | LEE |
| | GA179 | LIBERTY |
| | GA181 | LINCOLN |
| | GA183 | LONG |
| | GA185 | LOWNDES |
| | GA187 | LUMPKIN |
| | GA189 | MCDUFFIE |
| | GA191 | MCINTOSH |
| | GA193 | MACON |
| | GA195 | MADISON |
| | GA197 | MARION |
| | GA199 | MERIWETHER |

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| Table Item | Code | Description |
|------------|-------|-------------|
| | GA201 | MILLER |
| | GA205 | MITCHELL |
| | GA207 | MONROE |
| | GA209 | MONTGOMERY |
| | GA211 | MORGAN |
| | GA213 | MURRAY |
| | GA215 | MUSCOGEE |
| | GA217 | NEWTON |
| | GA219 | OCONEE |
| | GA221 | OGLETHORPE |
| | GA223 | PAULDING |
| | GA225 | PEACH |
| | GA227 | PICKENS |
| | GA229 | PIERCE |
| | GA231 | PIKE |
| | GA233 | POLK |
| | GA235 | PULASKI |
| | GA237 | PUTNAM |
| | GA239 | QUITMAN |
| | GA241 | RABUN |
| | GA243 | RANDOLPH |
| | GA245 | RICHMOND |
| | GA247 | ROCKDALE |
| | GA249 | SCHLEY |
| | GA251 | SCREVEN |
| | GA253 | SEMINOLE |
| | GA255 | SPALDING |
| | GA257 | STEPHENS |
| | GA259 | STEWART |
| | GA261 | SUMTER |
| | GA263 | TALBOT |
| | GA265 | TALIAFERRO |
| | GA267 | TATTNALL |
| | GA269 | TAYLOR |
| | GA271 | TELFAIR |
| | GA273 | TERRELL |
| | GA275 | THOMAS |
| | GA277 | TIFT |
| | GA279 | TOOMBS |
| | GA281 | TOWNS |

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| Table Item | Code | Description |
|--|-------|--|
| | GA283 | TREUTLEN |
| | GA285 | TROUP |
| | GA287 | TURNER |
| | GA289 | TWIGGS |
| | GA291 | UNION |
| | GA293 | UPSON |
| | GA295 | WALKER |
| | GA297 | WALTON |
| | GA299 | WARE |
| | GA301 | WARREN |
| | GA303 | WASHINGTON |
| | GA305 | WAYNE |
| | GA307 | WEBSTER |
| | GA309 | WHEELER |
| | GA311 | WHITE |
| | GA313 | WHITFIELD |
| | GA315 | WILCOX |
| | GA317 | WILKES |
| | GA319 | WILKINSON |
| | GA321 | WORTH |
| | | |
| Eligibility | V01 | Insured – Vaccines Covered |
| | V02 | Medicaid |
| | V03 | No Insurance |
| | V04 | American Indian/Alaska Native |
| | V05 | Insured - No Vaccine/Underinsured |
| | V06 | PeachCare |
| | V07 | PeachCare |
| | V00 | Elig Not Determined/Unknown *allowed on historical immunizations only |
| | | |
| Ethnicity | NH | Non-Hispanic |
| | H | Hispanic |
| | | |
| Immunization Information Source | 00 | New shot, vaccine administered by providing organization. Organization becomes owner of the shot, so other organizations cannot edit/delete the shot. For organizations set up to decrement new immunizations from GRITS inventory via data exchange, '00' will cause inventory for the providing organization to be affected. |
| | 01 | Historical information - source unspecified. No affect on inventory. |
| | 02 | Historical information - from other provider |
| | 03 | Historical information - from parent's written record |

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| Table Item | Code | Description |
|----------------------|------------|---|
| | 04 | Historical information - from parent's recall |
| | 05 | Historical information - from other registry |
| | 06 | Historical information - from birth certificate |
| | 07 | Historical information - from school record |
| | 08 | Historical information - from public agency |
| Manufacturers | AB | Abbott Laboratories (<i>includes Ross Products Division</i>) |
| | ACA | Acambis, Inc. |
| | AD | Adams Laboratories, Inc. |
| | ALP | Alpha Therapeutic Corporation |
| | AR | Armour [Inactive- use AVB] |
| | AVB | Aventis Behring L.L.C. (<i>formerly Centeon L.L.C.; includes Armour Pharmaceutical Company</i>) [Inactive – user ZLB] |
| | AVI | Aviron |
| | BA | Baxter Healthcare Corporation [Inactive- use BAH] |
| | BAH | Baxter Healthcare Corporation (<i>includes Hyland Immuno, Immuno International AG, and North American Vaccine, Inc.</i>) |
| | BAY | Bayer (<i>includes Miles, Inc., and Cutter Laboratories</i>) |
| | BP | Berna Products [Inactive- use BPC] |
| | BPC | Berna Products Corporation (<i>includes Swiss Serum And Vaccine Institute Berne</i>) |
| | MIP | Bioport Corporation (<i>formerly Michigan Biologic Products Institute</i>) |
| | CNJ | Cangene Corporation |
| | CMP | Celltech Medeva Pharmaceuticals [Inactive- use NOV] |
| | CEN | Centeon L.L.C. [Inactive- use AVB] |
| | CHI | Chiron Corporation [Inactive – use NOV] (<i>includes PowderJect Pharmaceuticals, Celltech Medeva Vaccines and Evans Medical Limited</i>) |
| | CON | Connaught [Inactive- use PMC] |
| | CSL | CSL Biotherapies, Inc. |
| | DVX | Dynavax, Inc. |
| | DVC | DynPort Vaccine Company, LLC |
| | EVN | Evans Medical Limited [Inactive- use NOV] |
| | GEO | GeoVax Labs, Inc. |
| | SKB | GlaxoSmithKline (<i>formerly SmithKline Beecham; includes SmithKline Beecham and Glaxo Wellcome</i>) |
| | GRE | Greer Laboratories Inc. |
| | GRF | Grifols |
| | IDB | ID Biomedical |
| | IAG | Immuno International AG [Inactive- use BAH] |
| | IUS | Immuno-U.S., Inc. |

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| Table Item | Code | Description |
|------------|------|---|
| | INT | Intercell Biomedical |
| | KGC | Korea Green Cross Corporation |
| | LED | Lederle [Inactive-use WAL] |
| | MBL | Massachusetts Biologic Laboratories (<i>formerly Massachusetts Public Health Biologic Laboratories</i>) |
| | MA | Massachusetts Public Health Biologic Laboratories [Inactive-use MBL] |
| | MED | MedImmune, LLC |
| | MOD | Moderna US, Inc. |
| | MSD | Merck & Co., Inc. |
| | IM | Merieux [Inactive-use PMC] |
| | MIL | Miles [Inactive-use BAY] |
| | NAB | NABI (<i>formerly North American Biologicals, Inc.</i>) |
| | NYB | New York Blood Center |
| | NAV | North American Vaccine, Inc. [Inactive-use BAH] |
| | NOV | Novartis Pharmaceutical Corporation (<i>includes Chiron, Powderject Pharmaceuticals, Celltech Medeva Vaccines and Evans Limited, Ciba-Geigy Limited and Sandoz Limited</i>) |
| | NVX | Novavax, Inc. |
| | OTC | Organon Teknika Corporation |
| | ORT | Ortho-clinical Diagnostics (<i>formerly Ortho Diagnostic Systems, Inc.</i>) |
| | PAX | PaxVax |
| | PD | Parkedale Pharmaceuticals (<i>formerly Parke-Davis</i>) |
| | PWJ | Powerject Pharmaceuticals (<i>includes Celltech Medeva Vaccines and Evans Medical Limited</i>) [Inactive- use NOV] |
| | PRX | Praxis Biologics [Inactive- use WAL] |
| | PSC | Protein Sciences Corporation |
| | JPN | Research Foundation for Microbial Diseases of Osaka University (BIKEN) |
| | PFR | Pfizer, Inc |
| | PMC | sanofi pasteur (<i>formerly Aventis Pasteur, Pasteur Merieux Connaught; includes Connaught Laboratories and Pasteur Merieux</i>) |
| | SEQ | Seqirus |
| | SCL | Sclavo, Inc. |
| | SOL | Solvay Pharmaceuticals |
| | SI | Swiss Serum and Vaccine Inst. [Inactive-use BPC] |
| | TAL | Talecris Biotherapeutics (<i>includes Bayer Biologicals</i>) |
| | USA | United States Army Medical Research and Material Command |
| | WA | Wyeth-Ayerst [Inactive- use WAL] |
| | WAL | Wyeth-Ayerst (<i>includes Wyeth-Lederle Vaccines and Pediatrics, Wyeth Laboratories, Lederle Laboratories, and Praxis Biologics</i>) |
| | ZLB | ZLB Behring (<i>includes Aventis Behring and Armour Pharmaceutical Company</i>) |
| | OTH | Other manufacturer |
| | UNK | Unknown manufacturer |

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| Table Item | Code | Description |
|--|--------------------|--|
| Observation method (For varicella immunity) | SERO | Serologic |
| | DIAG | Diagnosed |
| | HIST | Historical |
| Race | I | American Indian or Alaska Native |
| | A | Asian or Pacific Islander |
| | B | Black or African-American |
| | W | White |
| | H | Hispanic |
| | O | Other |
| | U | Unknown |
| 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 |
| G8 | Other Relationship | |
| G9 | Other Relative | |
| Reaction Codes | 10 | Anaphylaxis within 24 hours |
| | 11 | Hypotonic-hyporesponsive collapse within 48 hours of immunization |
| | 12 | Seizure occurring within 3 days |
| | 13 | Persistent crying lasting \geq 3 hours within 48 hours of immunization |
| | 17 | Temperature \geq 105 (40.5 C) within 48 hours of immunization |
| Sex (Gender) | F | Female |
| | M | Male |
| | U | Unknown |

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| Table Item | Code | Description |
|------------------------|----------|---|
| VAERS reactions | D | Patient Died |
| | L | Life threatening illness |
| | E | Required emergency room/doctor visit |
| | H | Required hospitalization |
| | P | Resulted in prolongation of hospitalization |
| | J | Resulted in permanent disability |

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Appendix

VACCINE CODES

(Note: The CPT End Dates indicate those CPT codes deleted in 1997 or later. 90714 was deleted in 1999 for Typhoid and re-issued in 2005 for Td preservative vaccine. It, therefore, has both a Start and End Date. Newer vaccines with recently added CPT Codes will have a Start Date only. For more information please reference "Current Procedural Terminology (CPT) Codes Mapped to CVX Codes" at <http://www.cdc.gov/vaccines/programs/iis/stds/cpt.htm>.)

| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|--------------------------------|-------------------------------------|---------|-----|--------------------|--|--|
| | | | | | CVX | Vaccine | CPT Description |
| Adeno | 90476 | Adeno T4 | | | 54 | Adeno T4 | Adenovirus type 4, live oral |
| | 90477 | Adeno T7 | | | 55 | Adeno T7 | Adenovirus type 7, live oral |
| | | | | | 82 | Adeno-Unspecified | Adenovirus -Unspecified |
| Anthrax | 90581 | BioThrax | | MIP | 24 | Anthrax | Anthrax |
| BCG | 90585 | BCG-TB | | | 19 | BCG-TB | Bacillus Calmette-Guerin TB |
| | 90586 | BCG-Cancer | | | | BCG-Cancer | Bacillus Calmette-Guerin bladder cancer |
| | 90728 <i>End 12/31/1999</i> | | N | | | | <i>Deleted BCG code</i> |
| Cholera | 90725 | Cholera-I (Inactive) | N | | 26 | cholera, unspecified formulation | Cholera vaccine for injectable use |
| | 90625 | VAXCHORA | | PAX | 174 | cholera, live attenuated | Cholera vaccine, live, adult dosage, 1 dose schedule, for oral use |
| | 90592 <i>End 12/31/2000</i> | Cholera-O (Inactive) | N | | | Cholera-Oral | Cholera Oral |
| COVID-19 | 91300 | Pfizer-BioNTech COVID-19 Vaccine | | | 208 | COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL | Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use |
| | 91301 | Moderna COVID-19 Vaccine | | | 207 | COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL | Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use |
| | | | N | | 213 | COVID-19, unspecified formulation | |

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Appendix

| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|----------------------|-----------------------|---------|---------|--------------------|---|--|
| | | | | | CVX | Vaccine | CPT Description |
| Diphtheria | 90719 | Diphtheria | | | | Diphtheria | Diphtheria |
| DTP/aP | 90702 | DT | | PMC | 28 | DT | Diphtheria tetanus pediatric |
| | | DT-PF | | PMC | | | Diphtheria tetanus pediatric, preservative free |
| | 90700 | Tripedia | | PMC | 20 | DTaP | Diphtheria, tetanus, acellular pertussis |
| | | Infanrix | | SKB | | | |
| | | Acel-Imune | N | WAL | | | |
| | | Certiva | N | BAH | | | |
| | | DAPTACEL | | PMC | 106 | DTaP, 5 pertussis antigens | Diphtheria, tetanus, acellular pertussis, 5 antigens |
| | 90723 | Pediarix | | SKB | 110 | DTaP-Hep B-IPV | DTaP-Hep B-IPV combination |
| | 90721 | TriHIBit | | PMC | 50 | DTaP-Hib | DTaP-Hib combination |
| | 90698 | Pentacel | | PMC | 120 | DTaP-Hib-IPV | DTaP-Hib-IPV combination |
| | 90696 | KINRIX | | SKB | 130 | DTaP-IPV | DTaP-IPV combination |
| | | Quadracel | | PMC | | | |
| | 90701 | DTP | | | 01 | DTP | Diphtheria, tetanus, whole cell pertussis |
| | 90720 | Tetramune | N | WAL | 22 | DTP-Hib | DTP-Hib combination |
| | | | | | 107 | DTaP-Unspecified | DTaP-Unspecified |
| Encephalitis | 90735 | JE-Vax | | PMC/JPN | 39 | Japanese Enceph-SC | Japanese Enceph-SC |
| | | | | | | Japanese Enceph-Unspecified | Japanese Enceph-Unspecified |
| | 90738 | Ixiaro | | NOV/INT | 134 | Japanese Enceph-IM | Japanese Enceph-IM |
| Flu H1N1-09 | 90663 or 90470 | H1N1 FluMist | N | MED | 125 | Novel Influenza-H1N1-09, nasal | Novel Influenza-H1N1-09, nasal |
| | | H1N1 Afluria-PF | N | CSL | 126 | Novel Influenza-H1N1-09, preserve-free | Novel Influenza-H1N1-09, preserve-free |
| | | H1N1 Fluvirin-PF > 4Y | N | NOV | 126 | Novel Influenza-H1N1-09, preserve-free | Novel Influenza-H1N1-09, preserve-free |
| | | H1N1 Fluzone-PF 6-35M | N | PMC | 126 | Novel Influenza-H1N1-09, preserve-free | Novel Influenza-H1N1-09, preserve-free |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|-------------------------|-------------------------|---------|-----|--------------------|--|--|
| | | | | | CVX | Vaccine | CPT Description |
| | | H1N1 Fluzone-PF > 3Y | N | PMC | 126 | Novel Influenza-H1N1-09, preserve-free | Novel Influenza-H1N1-09, preserve-free |
| | | H1N1 Afluria | N | CSL | 127 | Novel Influenza-H1N1-09 | Novel Influenza-H1N1-09 |
| | | H1N1 Fluvirin > 4Y | N | NOV | 127 | Novel Influenza-H1N1-09 | Novel Influenza-H1N1-09 |
| | | H1N1 Fluzone > 6M | N | PMC | 127 | Novel Influenza-H1N1-09 | Novel Influenza-H1N1-09 |
| | | | N | | 128 | Novel Influenza-H1N1-09 all formulations | Novel Influenza-H1N1-09 all formulations |
| H5N1 flu | | | N | SKB | 123 | Influenza, H5N1-1203 | |
| | | Influenza A (H5N1)-2013 | | IBD | 160 | Influenza A (H5N1), ADJUVANTED-2013 | |
| HBIG | 90371 | HepaGam B | | CNJ | 30 | HBIG | HBIG |
| | | HyperHEP B | | GRF | | | |
| | | Nabi-HB | | BTP | | | |
| | | HBIG | N | | | | |
| | | BayHep B | N | TAL | | | |
| | | BayHep B-Peds | N | TAL | | | |
| HepA | 90633 | VAQTA Peds 2 dose | | MSD | 83 | HepA peds 2 dose | Hepatitis A pediatric/adolescent 2 dose |
| | | Havrix Peds 2 dose | | SKB | | | |
| | 90634 | VAQTA Peds 3 dose | | MSD | 84 | HepA peds 3 dose | Hepatitis A pediatric/adolescent 3 dose |
| | | Havrix Peds 3 dose | N | SKB | | | |
| | 90632 | VAQTA Adult | | MSD | 52 | HepA adult | Hepatitis A adult |
| | | Havrix Adult | | SKB | | | |
| | 90636 | Twinrix | | SKB | 104 | HepA-HepB | Hepatitis A & Hepatitis B adult |
| | | | | | 31 | HepA peds-Unspecified | HepA peds-Unspecified |
| | | | | | 85 | HepA-Unspecified | HepA-Unspecified |
| | 90730 End 12/31/1999 | | N | | | | <i>Deleted HepA code</i> |
| HepB | 90744 | Recombivax Peds | | MSD | 08 | HepB pediatric | Hepatitis B pediatric/adolescent .5 ml |
| | | Engerix-B Peds | | SKB | | | |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|-----------------------|---------------------|---------|---------|--------------------|--------------------------------|--|
| | | | | | CVX | Vaccine | CPT Description |
| | 90743 | Recombivax Adult | | MSD | 43 | HepB adult | Hepatitis B adolescent 2 dose (adult form) |
| | 90746 | | | MSD | | | Hepatitis B adult dose 1ml |
| | | Engerix-B Adult | | SKB | | | Hepatitis B adult dose 1ml |
| | 90740 | Recombivax Dialysis | | MSD | 44 | HepB dialysis 3 dose | Hepatitis B Dialysis 3 dose/immunosuppressed |
| | 90747 | Engerix-B Dialysis | | SKB | | HepB dialysis 4 dose | Hepatitis B Dialysis 4 dose |
| | 90748 | Comvax | N | MSD | 51 | HepB-Hib | HepB-Hib Combination |
| | 90636 | Twinrix | | SKB | 104 | HepA-HepB | Hepatitis A & Hepatitis B adult |
| | 90723 | Pediarix | | SKB | 110 | DTaP-Hep B-IPV | DTaP-Hep B-IPV combination |
| | 90739 | HEPLISAV-B | | DVX | 189 | HepB-CpG | Hepatitis B adult 2 dose; 0.5mL |
| | | | | | 45 | HepB-Unspecified | HepB-Unspecified |
| | 90745 | | N | | 42 | | <i>Deleted HepB code</i> |
| | <i>End 12/31/2000</i> | | | | | | |
| | 90731 | | N | | | | |
| | <i>End 12/31/1997</i> | | | | | | |
| HZ | 90736 | ZOSTAVAX | | MSD | 121 | Zoster Shingles, (live) | Zoster Shingles, (live) |
| | 90750 | Shingrix | | SKB | 187 | Zoster Subunit | Zoster Subunit, recombinant |
| | | | N | | 188 | Zoster unspecified formulation | Zoster unspecified formulation |
| Hib | 90645 | HibTITER | | WAL | 47 | Hib-HbOC | Hemophilus influenza b HbOC 4 dose |
| | 90646 | ProHIBit | N | PMC | 46 | Hib-PRP-D | Hemophilus influenza b PRP-D booster |
| | 90647 | PedvaxHIB | | MSD | 49 | Hib-OMP | Hemophilus influenza b OMP 3 dose |
| | 90648 | OmniHib | N | SKB/PMC | 48 | Hib-PRP-T | Hemophilus influenza b PRP-T 4 dose |
| | | Hiberix | | SKB | | | |
| | | ActHib | | PMC | | | |
| | 90720 | Tetramune | N | WAL | 22 | DTP-Hib | DTP-Hib combination |
| | 90721 | TriHIBit | | PMC | 50 | DTaP-Hib | DTaP-Hib combination |
| | 90698 | Pentacel | | PMC | 120 | DTaP-Hib-IPV | DTaP-Hib-IPV combination |
| | 90748 | Comvax | N | MSD | 51 | HepB-Hib | HepB-Hib Combination |
| | 90644 | Menhibrix | | SKB | 148 | Hib-MenCY-TT | Meningococcal C/Y-HIB PRP |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|----------------------------------|--------------------------|---------|-----|--------------------|---|---|
| | | | | | CVX | Vaccine | CPT Description |
| | | | | | 17 | Hib-Unspecified | Hib-Unspecified |
| | 90737 | | N | | | | <i>Deleted Hib Code</i> |
| HPV | 90650 <i>Start 07/30/2009</i> | Cervarix | | SKB | 118 | HPV-bivalent | Human Papillomavirus-bivalent |
| | 90649 | GARDASIL | | MSD | 62 | HPV-quadrivalent | Human Papillomavirus-quadrivalent |
| | 90651 | GARDASIL | | MSD | 165 | HPV9 | HPV9 |
| | | | | | 137 | HPV, uncertain formulation | HPV, uncertain formulation |
| Ig | 90281 | Ig | | | 86 | Ig | Ig human |
| | 90283 | IgIV | | | 87 | IgIV | Ig IV human |
| | 90291 | CMV-IgIV | | | 29 | CMV-IgIV | Cytomegalovirus Ig IV human |
| | | BayGam | | TAL | | HepA-Ig | Hepatitis A Ig human |
| | 90375 | BayRab | | TAL | 34 | RIg | Rabies Ig human |
| | 90376 | Imogam Rabies-HT | | PMC | 34 | RIg-HT | Rabies Ig heat treated human |
| | 90384 | RhoGAM | | ORT | | RhIg full-dose | Rho(D) Ig human, full-dose |
| | 90385 | MICRhoGAM | | ORT | | RhIg mini-dose | Rho(D) Ig human, mini-dose |
| | 90389 | BayTet | | TAL | 13 | TIg | Tetanus Ig human |
| | | Hyper-TET | N | TAL | | | Tetanus Ig human |
| | 90393 | Vaccinia-Ig | | | 79 | Vaccinia-Ig | Vaccinia Ig human (VIg) |
| | | | | | 156 | Rho(D) IG | |
| | 90396 | VZIg | | MBL | 36 | VZIg | Varicella-zoster Ig human |
| | | | | | 14 | Ig-Unspecified | Ig human-Unspecified |
| RSV-Ig | 90378 | Synagis | | MED | 93 | RSV-IgIM | Respiratory syncytial virus IgIM |
| | 90379 | RespiGam | | MED | 71 | RSV-IgIV | Respiratory syncytial virus IgIV |
| Influenza | 90630 | Fluzone Intradermal-IIV4 | | PMC | 144 | FLU, intradermal, quadrivalent, pres free | FLU, intradermal, quadrivalent, pres free |
| | 90653 | Fluad | | SEQ | 168 | FLU, trivalent, adjuvanted | FLU, trivalent, adjuvanted |
| | 90654 | Fluzone Intradermal-IIV3 | | PMC | 144 | FLU, intradermal trivalent, pres free | FLU, intradermal trivalent, pres free |

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|---------------|-----------------------|---|---------|-----|--------------------|---------------------------------------|-------------------------|
| | | | | | CVX | Vaccine | CPT Description |
| | 90655 | Fluzone-PF 6-35M (IIV3) | | PMC | 140 | FLU, injectable, trivalent, pres free | FLU-PF 6-35 Months IIV3 |
| | 90656 | Afluria-PF (IIV3) (Min Age 5 Years; previously 9 Years) | | CSL | 140 | FLU, injectable, trivalent, pres free | FLU-PF IIV3 |
| | | Fluzone-PF > 3Y (IIV3) | | PMC | | | |
| | | Fluarix-PF (previously Fluarix-PF > 17 Years) | | SKB | | | |
| | | FluLaval-PF > 3Y (IIV3) | | SKB | | | |
| | | Fluvirin-PF > 4 Years | | NOV | | | |
| | 90657 | Fluvirin 6-35 Months | N | NOV | 141 | FLU, injectable, trivalent | FLU 6-35 Months IIV3 |
| | | Fluzone > 6M (IIV3) | | PMC | | | |
| | | Fluogen 6-35 Months | N | PD | | | |
| | | Flu-Immune 6-35 Months | N | WAL | | | |
| | | Flu-Shield 6-35 Months | N | WAL | | | |
| | 90658 | Afluria (IIV3) (Min Age 5 Years; previously 9 Years) | | CSL | 141 | FLU, injectable, trivalent | FLU IIV3 |
| | | Fluvirin > 3 Years | | NOV | | | |
| | | Fluzone > 6M (IIV3) | | PMC | | | |
| | | Fluogen > 3 Years | N | PD | | | |
| | | Flu-Immune > 3 Years | N | WAL | | | |
| | | Flu-Shield > 3 Years | N | WAL | | | |
| | | FluLaval > 3Y (IIV3) (previously FluLaval > 17 Years) | | GSK | | | |
| | | Fluvirin > 4 Years | | NOV | | | |
| | 90659 | Fluvirin > 12 Years | N | NOV | 16 | FLU > 12 Years | Influenza whole virus |
| | <i>End 12/31/2002</i> | Fluzone > 12 Years | N | PMC | | | |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|----------------------------------|---|---------|-----|--------------------|--|---|
| | | | | | CVX | Vaccine | CPT Description |
| | | Fluogen > 12 Years | N | PD | | | |
| | | Flu-Immune > 12 Years | N | WAL | | | |
| | | Flu-Shield > 12 Years | N | WAL | | | |
| | 90660 <i>End 06/30/2013</i> | FluMist (LAIV3) | N | MED | 111 | FLU-LAIV3 | Influenza, live, intranasal, trivalent |
| | 90661 | Flucelvax (ccIIV3) | | NOV | 153 | FLU, injectable, MDCK, pres free | FLU-PF MDCK ccIIV3 |
| | 90662 <i>End 06/30/2020</i> | Fluzone High-Dose | | PMC | 135 | FLU-PF, High-Dose | Influenza split virus, preservative free, high-dose |
| | 90662 <i>Start 07/01/2020</i> | Fluzone High-Dose Quad | | PMC | 197 | FLU, high-dose, quadrivalent | Influenza (IIV), split virus, preservative free |
| | 90672 | FluMist (LAIV4) | | MED | 149 | FLU-LAIV4 | Influenza, live, intranasal, quadrivalent |
| | 90673 | Flublok | | PSC | 155 | FLU, recombinant, injectable, pres free | FLU-PF RIV3 |
| | 90682 | Flublok quadrivalent | | PSC | 185 | FLU, recomb, quad, injectable, pres free | FLU-PF RIV4 |
| | 90674 | Flucelvax (ccIIV4) | | NOV | 171 | FLU, injectable, MDCK, pres free, quad | FLU-PF MDCK ccIIV4 |
| | 90685 | Fluzone-PF 6-35M (IIV4) | | PMC | 161 | FLU, injectable, quad, pres free 6-35M | FLU-PF 6-35 Months IIV4 |
| | | Afluria-PF 6-35M (IIV4) | | SEQ | | | |
| | 90686 | Afluria-PF (IIV4) (Min Age 5 Years; previously 18 Years) | | SEQ | 150 | FLU, injectable, quadrivalent, pres free | FLU-PF IIV4 |
| | | Fluzone-PF > 3Y (IIV4) | | | | | Note: FluLaval-PF > 6M (IIV4) |
| | | FluLaval-PF > 6M (IIV4) (previously 3Y) | | SKB | | | |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|--------------------------------|--|---------|-----|--------------------|--|--|
| | | | | | CVX | Vaccine | CPT Description |
| | | Fluarix-PF (IIV4) (Min Age 6 Months; previously 3 Years) | | SKB | | | |
| | | Fluzone-PF > 6M (IIV4) | | PMC | | | |
| | 90687 | Fluzone > 6M (IIV4) | | PMC | 158 | FLU, injectable, quadrivalent | FLU 6-35 Months IIV4 |
| | 90688 | Afluria (IIV4) (Min Age 5 Years; previously 18 Years) | | SEQ | 158 | FLU, injectable, quadrivalent | FLU IIV4 |
| | | Fluzone > 6M (IIV4) | | PMC | | | |
| | | FluLaval > 6M (IIV4) (previously 3Y) | | SKB | | | |
| | 90694 | FLUAD Quadrivalent | | SEQ | 205 | Influenza, quadrivalent, adjuvanted | Influenza, quadrivalent, adjuvanted, pres free |
| | | | N | | 15 | FLU, SPLIT | FLU, SPLIT |
| | | | N | | 88 | Flu-Unspecified | Flu-Unspecified |
| | 90724 <i>End 12/31/1999</i> | | N | | | | <i>Deleted Influenza code</i> |
| | 90756 | Flucelvax Quad With Preservative | Y | SEQ | 186 | FLU, injectable, MDCK, pres, quad | FLU, injectable, MDCK, quadrivalent, preservative |
| Lyme | 90665 | LYMERix | | SKB | 66 | Lyme | Lyme disease |
| Measles | 90705 | Attenuvax | N | MSD | 05 | Measles | Measles live |
| | | Measles | | | | | Measles live 1964-1974 (Eli Lilly-EL) |
| | | Measles | | | | | Measles inactivated 1963-1966 (Eli Lilly - EL) |
| | 90708 | M-R-VAX | N | MSD | 04 | Measles-Rubella | Measles and rubella live |
| | | Measles-Rubella (MERU) | | | | | Measles and rubella |
| | 90707 | MMR II | | MSD | 03 | MMR | Measles, mumps and rubella live (will also accept MMR as tradename) |
| | 90710 | PROQUAD | | MSD | 94 | MMRV | Measles, mumps, rubella, varicella live |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | | |
|-----------------|-----------|------------|---------|-----|--|--|--|-------------------------|
| | | | | | CVX | Vaccine | CPT Description | |
| Meningo | 90733 | MENOMUNE | | PMC | 32 | Meningococcal-Polysaccharide | Meningococcal-Polysaccharide (MPSV4) | |
| | | | | | 108 | Meningococcal-Unspecified | Meningococcal-Unspecified | |
| | 90734 | Menactra | | PMC | 114 | Meningococcal-MCV4P | Meningococcal- MCV4P | |
| | | | | | SKB | 136 | Meningococcal-MCV4O | Meningococcal-MCV4O |
| | | | | | | 147 | Meningococcal MCV4-Unsp | Meningococcal MCV4-Unsp |
| | | | | | 103 | Meningococcal C Conjugate | Meningococcal C Conjugate | |
| | 90644 | Menhibrix | | SKB | 148 | Hib-MenCY-TT | Meningococcal C/Y-HIB PRP | |
| 90619 | MenQuadfi | | PMC | 203 | meningo poly (A,C,Y,W-135) TT conjugate | meningo poly (A,C,Y,W-135) TT conjugate | | |
| Meningococcal B | 90620 | BEXSERO | | SKB | 163 | Meningococcal B, OMV | MeningB, OMV | |
| | 90621 | Trumenba | | PFR | 162 | Meningococcal B, recombinant | MeningB, recombinant | |
| | | | | | 164 | Meningococcal B, unspecified | | |
| Mumps | 90704 | Mumpsvax | | MSD | 07 | Mumps | Mumps live | |
| | | | | | | | | Mumps 1950-1978 |
| | 90709 | Biavax II | N | MSD | 38 | Rubella-Mumps | Rubella and mumps live | |
| | | | | | | | Mumps-Rubella (MURU) | Rubella and mumps |
| | 90707 | MMR II | | MSD | 03 | MMR | Measles, mumps and rubella live (will also accept 'MMR' as tradename) | |
| 90710 | PROQUAD | | MSD | 94 | MMRV | Measles, mumps, rubella, varicella live | | |
| Polio | 90712 | ORIMUNE | N | WAL | 02 | Polio oral | Poliovirus OPV live oral | |
| | 90713 | IPOL | | PMC | 10 | Polio injectable | Poliovirus inactivated IPV | |
| | 90723 | Pediarix | | SKB | 110 | DTaP-Hep B-IPV | DTaP-Hep B-IPV combination | |
| | 90698 | Pentacel | | PMC | 120 | DTaP-Hib-IPV | DTaP-Hib-IPV combination | |
| | 90696 | KINRIX | | SKB | 130 | DTaP-IPV | DTaP- IPV combination | |
| | | Quadracel | | PMC | | | | |
| | | | | | 89 | Polio-Unspecified | Polio-Unspecified | |
| Plague | 90727 | Plague | | | 23 | Plague | Plague | |

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|-----------------------|-------|-----------------------------------|---------|------------|--------------------|----------------------------------|---|
| | | | | | CVX | Vaccine | CPT Description |
| (Pneumococcal) PCV | 90669 | Prevnar 7 (Previously Prevnar) | | PFR | 100 | Pneumo-conjugate 7 | Pneumococcal conjugate polyvalent (will also accept 'pneumococcal' as tradename) |
| | 90670 | Prevnar 13 | | PFR | 133 | Pneumo-conjugate 13 | |
| (Pneumo-poly) PPV | 90732 | PNU-IMUNE 23 Pneumovax 23 | N | WAL MSD | 33 | Pneumococcal 23 | Pneumococcal polysaccharide 23 valent (will also accept 'pneumo-poly' as tradename) |
| Rabies | 90675 | | N | | 18 | Rabies-IM | Rabies intramuscular |
| | | IMOVAX | | PMC | 175 | Rabies - IM Diploid cell culture | Rabies - IM Diploid cell culture |
| | | RABAVERT | | SKB | 176 | Rabies-IM fibroblast culture | Rabies-IM fibroblast culture |
| | 90676 | IMOVAX ID RABAVERT ID | N N | | 40 | Rabies-ID | Rabies intradermal |
| | 90726 | | N | | 90 | Rabies-unspecified | Rabies-unspecified |
| Rotavirus | 90681 | Rotarix | | SKB | 119 | Rotavirus-monovalent | Rotavirus-monovalent live, oral |
| | 90680 | RotaTeq | | MSD | 116 | Rotavirus-pentavalent | Rotavirus-pentavalent live, oral |
| | | RotaShield | N | WAL | 74 | Rotavirus-tetavalent | Rotavirus-tetavalent live |
| | | | | | 122 | Rotavirus-Unspecified | Rotavirus-Unspecified |
| Rubella | 90706 | Meruvax II Rubella | | MSD | 06 | Rubella | Rubella live |
| | 90709 | Biavax II Mumps-Rubella (MURU) | N | MSD | 38 | Rubella-Mumps | Rubella and mumps live Rubella and mumps |
| | 90708 | M-R-VAX Measles-Rubella (MERU) | N | MSD | 04 | Measles-Rubella | Measles and rubella live Measles and rubella |
| | 90707 | MMR II | | MSD | 03 | MMR | Measles, mumps and rubella live (will also accept 'MMR' as trade name) |
| | 90710 | PROQUAD | | MSD | 94 | MMRV | Measles, mumps, rubella, varicella live |
| Smallpox | | ACAM2000 | | ACA | 75 | Vaccinia | Vaccinia (Smallpox), dry |
| | | Dryvax | N | WAL | 75 | Vaccinia | Vaccinia (Smallpox), dry |

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| Vaccine Group | CPT | Trade Name | Active? | MFG | Informational ONLY | | |
|---------------|-------------------------|---------------------|---------|-----|--------------------|---------------------------------------|---|
| | | | | | CVX | Vaccine | CPT Description |
| | | Vaccinia-Diluted | | | 105 | | Vaccinia (Smallpox), diluted |
| Td | 90714 | DECAVAC | | PMC | 113 | Td-PF | Tetanus and diphtheria preservative free |
| | <i>Start 07/01/2005</i> | TENIVAC | | PMC | 113 | | |
| | 90718 | Td | | GRF | 09 | Td | Tetanus and diphtheria adult |
| | 90715 | ADACEL | | PMC | 115 | Tdap | Tetanus, diphtheria, acellular pertussis |
| | | BOOSTRIX | | SKB | | | |
| | | | | | 139 | Td (Adult), Unspecified Formulation | |
| Tdap | 90715 | ADACEL | | PMC | 115 | Tdap | Tetanus, diphtheria, acellular pertussis |
| | | BOOSTRIX | | SKB | | | |
| | | | | | 11 | Pertussis | Pertussis |
| Tetanus | 90703 | TT | | PMC | 35 | Tetanus | Tetanus |
| | | | | | 112 | Tetanus-Unspecified | Tetanus-Unspecified |
| Typhoid | 90690 | Vivotif Berna/Ty21a | | BPC | 25 | Typhoid-oral | Typhoid oral (will also accept tradenames 'Vivotif Berna' or 'Ty21a') |
| | 90691 | Typhim Vi | | PMC | 101 | Typhoid-ViCPs | Typhoid VI capsular polysaccharide |
| | 90692 | Typhoid | | WAL | 41 | Typhoid-H-P | Typhoid heat and phenol inactivated |
| | 90693 | Typhoid-AKD | | | 53 | Typhoid-AKD | Typhoid acetone-killed, dried (military) |
| | 90714 | | | | 91 | Typhoid-Unspecified | Typhoid-Unspecified |
| | <i>End 12/31/1999</i> | | | | | | |
| Varicella | 90716 | Varivax | | MSD | 21 | Varicella | Varicella live |
| | 90710 | PROQUAD | | MSD | 94 | MMRV | Measles, mumps, rubella, varicella live |
| Yellow Fever | 90717 | YF-VAX | | PMC | 37 | Yellow Fever | Yellow Fever vaccine, live, for subcutaneous use |
| | 90717 | Stamaril | | PMC | 183 | Yellow Fever vaccine- alt | Yellow Fever vaccine, live, for subcutaneous use |
| | 90717 | | | PMC | 184 | Yellow Fever, unspecified formulation | Yellow Fever vaccine, live, for subcutaneous use |