

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.  
Commissioner



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

### Immunization Program

**PLEASE COPY THIS FOR ALL HEALTH CARE PROVIDERS IN YOUR PRACTICE**

**TO: Health Care Providers**

**FROM: Mick Bolduc, Vaccine Coordinator-Connecticut Vaccine Program**

A handwritten signature in black ink, appearing to read "Mick Bolduc".

**DATE: February 26, 2016**

**SUBJECT: Influenza Formulations for 2016-17 Flu Season**

The primary purpose of this communication is to inform you of the influenza formulations the Connecticut Vaccine Program (CVP) will be providing during the 2016-17 flu season.

#### **Influenza Formulations**

Once again for the 2016-17 flu season the CVP will be providing influenza vaccine for all children 6 through 59 months of age regardless of insurance status as well as vaccine for all VFC-eligible 5-18 year old patients. All vaccines offered will be quadrivalent preservative-free formulations.

As soon as influenza vaccine becomes available (probably sometime in August) you will be notified that you can begin placing your flu orders. We will do our best to fill the orders as completely as possible but the majority of influenza vaccine is not expected to be available until September and October.



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Below is a list of the flu formulations we will be supplying this upcoming influenza season:

<b>Vaccine</b>	<b>Package</b>	<b>Dose</b>	<b>Age</b>	<b>Preservative Free</b>	<b>NDC #</b>	<b>CPT Code</b>
<b>Fluzone (Sanofi)</b>	<b>Single dose Syringe (Quadrivalent)</b>	<b>0.25 mL</b>	<b>6–35 months</b>	<b>YES</b>	<b>49281-0516-25</b>	<b>90685</b>
<b>Fluzone (Sanofi)</b>	<b>Single dose Syringe (Quadrivalent)</b>	<b>0.5 mL</b>	<b>3 years and older</b>	<b>YES</b>	<b>49281-0416-50</b>	<b>90686</b>
<b>Fluzone (Sanofi)</b>	<b>Single dose Vial (Quadrivalent)</b>	<b>0.5 mL</b>	<b>3 years and older</b>	<b>YES</b>	<b>49281-0416-10</b>	<b>90686</b>
<b>Fluarix (GSK)</b>	<b>Single dose Syringe (Quadrivalent)</b>	<b>0.5 mL</b>	<b>3 years and older</b>	<b>YES</b>	<b>58160-0905-52</b>	<b>90686</b>
<b>FluMist (MedImmune)</b>	<b>Single dose Sprayer (Quadrivalent)</b>	<b>0.2 mL</b>	<b>2–49 years</b>	<b>YES</b>	<b>66019-0303-10</b>	<b>90672</b>

As always, if you have any questions, please feel free to contact me at (860) 509-7940.