



WITH A PRESENTATION THAT'S DESIGNED FOR YOUR CONVENIENCE

- Fully liquid¹
- No reconstitution required¹

| |  PREFILLED SYRINGE |  VIAL AND VIAL PRESENTATION |
|--|--|--|
| Reconstitution needed | No | Yes |
| Volume of single dose ¹ | 0.5 mL | 0.5 mL (after reconstitution) |
| Number of units per pack | 10 prefilled syringes (10 doses) | 20 vials (10 doses) |
| Pack dimensions | 9.9 x 17.7 x 2.0 cm (350 cm ³) | 9.0 x 7.5 x 4.2 cm (284 cm ³) |
| CPT code ^{2,+} | 90750 | Same |
| NDC (10-dose carton) ^{1,‡} | 58160-849-52 | 58160-823-11 |
| NDC (0.5-mL single-dose, prefilled syringe) ^{1,‡} | 58160-849-43 | |

Store the SHINGRIX prefilled syringe refrigerated between 2°C and 8°C (36°F and 46°F). Protect from light. Do not freeze. Discard if frozen.¹

Important: Activate new NDCs on February 2 when the prefilled syringe presentation becomes available. Keep all current NDCs activated until vial and vial presentation is depleted.

^{*}SHINGRIX is available as 0.5-mL single-dose, disposable, prefilled TIP-LOK syringes (Luer Lock syringes) packaged without needles. TIP-LOK syringes are to be used with Luer Lock compatible needles.

[†]This information is not intended to serve as comprehensive training on medical billing and coding. Users should independently verify accuracy. Healthcare providers are responsible for making the ultimate decision on when to use a specific product based on clinical recommendations and how to bill for products and related services rendered. Consult third-party insurers' guidelines for specific information regarding the billing and reporting of services rendered.

[‡]Where a payer requires an 11-digit NDC, the codes are 58160-0849-52 (prefilled syringe) and 58160-0823-11 (vial and vial presentation).

Indication

SHINGRIX is a vaccine indicated for prevention of herpes zoster (HZ) (shingles):

- in adults aged 50 years and older.
- in adults aged 18 years and older who are or will be at increased risk of HZ due to immunodeficiency or immunosuppression caused by known disease or therapy.

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

Please see additional Important Safety Information on next page and full [Prescribing Information](#) at SHINGRIXHCP.com.

SHINGRIX PREFILLED SYRINGE

A PRESENTATION DESIGNED WITH YOUR CONVENIENCE IN MIND

No reconstitution required.¹



SHINGRIX is administered intramuscularly as a 2-dose series. One prefilled syringe is used for each dose according to the following schedule¹:

- A first dose at Month 0 followed by a second dose administered 2 to 6 months later
- For individuals who are or will be immunodeficient or immunosuppressed and who would benefit from a shorter vaccination schedule: A first dose at Month 0 followed by a second dose administered 1 to 2 months later

For help with the transition to prefilled syringes, visit contactus.gsk.com or call the GSK Response Center at **1-800-772-9292**.

Important Safety Information (cont'd)

- In a postmarketing observational study, an increased risk of Guillain-Barré syndrome was observed during the 42 days following vaccination with SHINGRIX
- Syncope (fainting) can be associated with the administration of injectable vaccines, including SHINGRIX. Procedures should be in place to avoid falling injury and to restore cerebral perfusion following syncope
- Solicited local adverse reactions reported in individuals aged 50 years and older were pain (78%), redness (38%), and swelling (26%)
- Solicited general adverse reactions reported in individuals aged 50 years and older were myalgia (45%), fatigue (45%), headache (38%), shivering (27%), fever (21%), and gastrointestinal symptoms (17%)
- Solicited local adverse reactions reported in autologous hematopoietic stem cell transplant recipients (aged 18 to 49 and ≥50 years of age) were pain (88% and 83%), redness (30% and 35%), and swelling (21% and 18%)
- Solicited general adverse reactions reported in autologous hematopoietic stem cell transplant recipients (aged 18 to 49 and ≥50 years of age) were fatigue (64% and 54%), myalgia (58% and 52%), headache (44% and 30%), gastrointestinal symptoms (21% and 28%), shivering (31% and 25%), and fever (28% and 18%)
- The data are insufficient to establish if there is vaccine-associated risk with SHINGRIX in pregnant women
- It is not known whether SHINGRIX is excreted in human milk. Data are not available to assess the effects of SHINGRIX on the breastfed infant or on milk production/excretion
- Vaccination with SHINGRIX may not result in protection of all vaccine recipients

Please see additional Important Safety Information on previous page and full [Prescribing Information](#) at SHINGRIXHCP.com.

References: 1. Prescribing Information for SHINGRIX. 2. Immunization Information Systems: CPT codes mapped to CVX codes. Centers for Disease Control and Prevention. Reviewed September 18, 2025. Accessed September 29, 2025. <https://www2.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=cpt>

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SHINGRIX
(ZOSTER VACCINE
RECOMBINANT, ADJUVANTED)

