

VAXELIS requires 2-3 fewer injections compared to pentavalent vaccines (+ Hep B or Hib vaccine)¹⁻³

With VAXELIS, give as few as 2 injections at each primary visit at 2, 4, and 6 months³

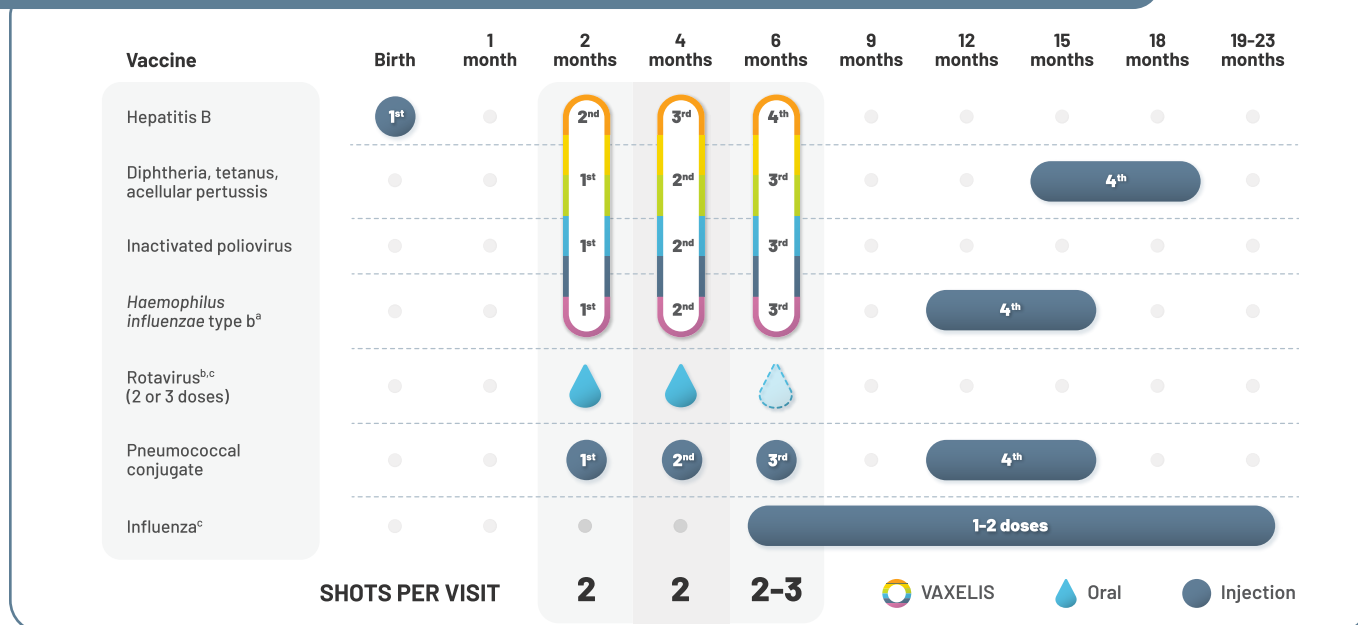


Table does not include all CDC-recommended infant immunizations.³

Hib, *Haemophilus influenzae* type b.

^aHib vaccine may be administered as a 2-dose primary series (at 2 and 4 months) or a 3-dose primary series (at 2, 4, and 6 months), depending on brand.^{3,4}

^bOral rotavirus vaccine may be administered as a 2-dose series (at 2 and 4 months) or a 3-dose series (at 2, 4, and 6 months), depending on brand.³

^cSee Prescribing Information for recommended dosing.

VAXELIS is a vaccine indicated for active immunization to prevent diphtheria, tetanus, pertussis, poliomyelitis, hepatitis B, and invasive disease due to *Haemophilus influenzae* type b (Hib). VAXELIS is approved for use as a 3-dose series in children 6 weeks through 4 years of age (prior to the 5th birthday).

Important Safety Information

- Do not administer VAXELIS to anyone with a history of severe allergic reaction to a previous dose of VAXELIS, any ingredient of VAXELIS, or any other diphtheria toxoid, tetanus toxoid, pertussis-containing vaccine, inactivated poliovirus vaccine, hepatitis B vaccine, or Hib vaccine.
- Do not administer VAXELIS to anyone with a history of encephalopathy within 7 days of a pertussis-containing vaccine with no other identifiable cause.
- Do not administer VAXELIS to anyone with a history of progressive neurologic disorder until a treatment regimen has been established and the condition has stabilized.
- Carefully consider benefits and risks before administering VAXELIS to persons with a history of: fever $\geq 40.5^{\circ}\text{C}$ ($\geq 105^{\circ}\text{F}$), hypotonic-hyporesponsive episode (HHE), or persistent, inconsolable crying lasting ≥ 3 hours within 48 hours after a previous pertussis-containing vaccine; and/or seizures within 3 days after a previous pertussis-containing vaccine.
- If Guillain-Barré syndrome occurred within 6 weeks of receipt of a prior vaccine containing tetanus toxoid, the risk for Guillain-Barré syndrome may be increased following VAXELIS.
- Apnea following intramuscular vaccination has been observed in some infants born prematurely. Consider the individual infant's medical status and potential benefits and possible risks of intramuscular vaccination in deciding when to administer VAXELIS to an infant born prematurely.
- Vaccination with VAXELIS may not protect all individuals.
- The solicited adverse reactions 0-5 days following any dose were irritability ($\geq 55\%$), crying ($\geq 45\%$), injection site pain ($\geq 44\%$), somnolence ($\geq 40\%$), injection site erythema ($\geq 25\%$), decreased appetite ($\geq 23\%$), fever $\geq 38.0^{\circ}\text{C}$ ($\geq 101^{\circ}\text{F}$), injection site swelling ($\geq 18\%$), and vomiting ($\geq 9\%$).
- The 3-dose immunization series consists of a 0.5 mL intramuscular injection, administered at 2, 4, and 6 months of age.
- A 3-dose series of VAXELIS does not constitute a primary immunization series against pertussis; an additional dose of pertussis-containing vaccine is needed to complete the primary series.

Before administering VAXELIS, please read the accompanying Prescribing Information. The Patient Information also is available

For additional copies of the Prescribing Information, please call 800-672-6372, visit VAXELIS.com, or contact your Merck or Sanofi representative.

References: 1. Pentacel. Prescribing Information. Sanofi Pasteur; 2023. 2. PEDIARIX. Prescribing Information. GlaxoSmithKline; 2024. 3. Centers for Disease Control and Prevention. Recommended child and adolescent immunization schedule for ages 18 years or younger, United States, 2025. Accessed January 21, 2025. <https://www.cdc.gov/vaccines/hcp/imz-schedules/downloads/child/0-18yrs-child-combined-schedule.pdf> 4. Oliver SE, Moore KL. Licensure of a diphtheria and tetanus toxoids and acellular pertussis, inactivated poliovirus, *Haemophilus influenzae* type b conjugate, and hepatitis B vaccine, and guidance for use in infants. *MMWR Morb Mortal Wkly Rep*. 2020;69(5):136-139. doi.org/10.15585/mmwr.mm6905a5