

## Electronic Health Record (EHR) Considerations

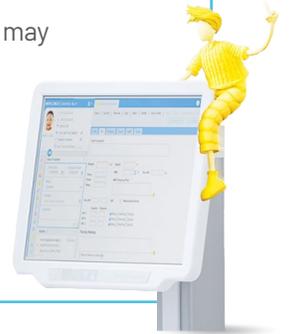
### To begin administering VAXELIS, ensure that the product is available in the electronic health record (EHR) system.

It can take time for new vaccines to appear in EHR product lists. If VAXELIS is not yet available in the EHR, you or your staff can add it manually. This will allow for a timelier transition to VAXELIS while maintaining accuracy in patient records.

### To learn how to manually add VAXELIS to your EHR system, refer to your internal or external EHR support resources.

Keep in mind that EHR security privileges tend to vary depending on practice size. The below list may help you determine who, among your staff, is most likely able to manually add VAXELIS:

- Small practice – the physician or practice administrator
- Mid-sized practice – system administrator, nurse, or any EHR super user
- Large practice – an IT staff member, clinical manager, or system administrator



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 5<sup>th</sup> 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  $\geq 3$  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  $\geq 38.0^{\circ}\text{C}$  ( $\geq 19\%$ ), injection site swelling ( $\geq 18\%$ ), and vomiting ( $\geq 9\%$ ).

**Before administering VAXELIS, please read the accompanying [Prescribing Information](#). The [Patient Information](#) also is available.**