BELMONT COUNTY HEALTH DEPARTMENT

IMMUNIZATION PRICE LIST

Immunization	Manufacturer	Cash Price
90700 DtaP - Infanrix PEDIATRIC	GSK	52
90696 DtaP / IPV (Polio) - Kinrix	GSK	83
90700 DtaP - Daptacel	Sanofi	50
90723 DtaP/ Hep B/ Polio - Pediarix	GSK	97
90632 Hepatitis A - Havrix ADULT	GSK	97
90633 Hepatitis A - Havrix PEDIATRIC	GSK	58
90636 Hepatitis A/ Hepatitis B - Twinrix	GSK	133
90746 Hepatitis B - Energix B ADULT	GSK	77
90744 Hepatitis B - Energix B PEDIATRIC	GSK	46
90648 HIB - Hiberix	GSK	40
90651 HPV - Gardasil 9	Merck	289
90713 IPV (Polio)	GSK	55
90738 Japanese Encephalitis (Ordered after payment)	Sanofi	393
90734 Meningococcal ACWY - Menveo	GSK	152
90620 Meningitis B - Bexsero	GSK	215
90707 Measles, Mumps, Rubella (MMR) - Priorix	GSK	115
90710 Measles, Mumps, Rubella (MMR)/ Varicella - Proquad	Merck	272
90732 Pneumovax 23 - 19 yr +	Merck	142
90670 Prevnar 13	Sanofi	298
90671 PCV 15 Vaxneuvance	Merck	233
90677 Prevnar 20	Sanofi	330
90675 Rabies (Ordered after payment)	Sanofi	392
90681 Rotavirus - Rotarix	GSK	155
90622 Seasonal Influenza - High Dose (Sept-June)	Sanofi	*
90686 Seasonal Influenza - IM (Sept-June)	GSK	*
90750 Shingrix (Shingles)	Sanofi	211
90714 TD - Tetanus	Sanofi	63
90715 TdaP - Boostrix ADULT	GSK	69
90715 TdaP - Boostrix PEDIATRIC	GSK	69
90691 Typhoid (Ordered after payment)	Sanofi	148
90716 Varicella (Chicken Pox)	Merck	180
90698 DtaP / Hib / Polio - Pentacel	Sanofi	97
90697 DtaP / Hep B / Hib / Polio - Vaxelis	Sanofi	125

** TB Tests are $25 for each step. If read appointments are missed, you must pay for a new test. **

** Physicals are $50 each. Must be scheduled in advance. No walk-ins. Not covered by insurance. **

PAYMENT IS DUE AT THE TIME OF APPOINTMENT

CASH ONLY

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