RECOMBIVAX HB®

non-live (recombinant) hepatitis B vaccine





SUPPLIED: prefilled syringe; needle not supplied





ADMINISTRATION: IM injection (SUBQ only in special circumstances, see monograph)

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APPROPRIATE USE:

• May be publicly funded in SK

See OR code for recommendations for use.



Ģ	BEYOND-USE EXPIRY DATE/TIME:^	 Check date on label (expiry date) 2°C to 8°C: use vaccine until expiry date. ^ PM includes excursion data. 			
Ū	HANDLING:	SHAKE WELL before withdrawal and administration to re-suspend.			
	APPEARANCE:	Slightly opaque, white suspensionNO particulate matter/discolouration			
milt	DOSE:	 1 mL (10 mcg)* * Individuals with chronic renal failure and some immunocompromising conditions require a higher dosage of HB antigen. See QR code for details. 			
ĪjŪ	SERIES/SCHEDULE:	PRIMARY SERIES: ≥20 years 11 to 15 years	3-dose: 0, 1, 6 months 2-dose: 0, 4 to 6 months		
		BOOSTER: May be	e required in some situations.	See QR code for details.	
	214	REFERENCES: • <u>Recombivax H</u>	B [*] product monograph	Financial contribution:	



• Saskatchewan Immunization Manual: Chapter 10

- medSask Hepatitis A and Hepatitis B vaccines
- Canadian Immunization Guide: Hepatitis B vaccines
- <u>CATMAT: Summary of recommendations for the prevention</u> of viral hepatitis during travel



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