RECOMMEND WITH CERTAINTY—SHINGRIX IS NOW $0 FOR NEARLY ALL PATIENTS 50 YEARS AND OLDER¹⁻³

For your patients with commercial insurance plans

More than 9 out of 10 are covered*:
• Average copays are just $4 or less¹
• 95% of commercial patients pay $0 for SHINGRIX¹,³

For your Medicare Part D patients

Great coverage is now even better*:
Starting January 2023, due to the Inflation Reduction Act, all Medicare Part D patients can now get SHINGRIX for $0 through their pharmacy.¹⁻³

*SOURCE: Managed Markets Insight & Technology, LLC, Database as of October 2022. Coverage represents access to reimbursement from a health plan with restrictions appropriate to the Advisory Committee on Immunization Practices (ACIP) recommendation(s) and/or prescribing information. Veterans Affairs (VA) and Indian Health Service (IHS) lives have been omitted when calculating the percentage of lives.¹,³

INDICATION
SHINGRIX is a vaccine indicated for prevention of herpes zoster (shingles) in adults aged 50 years and older.
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

Please see additional Important Safety Information on the back and accompanying full Prescribing Information, also available at SHINGRIXHCP.com
SHINGRIX IS NOW $0 FOR NEARLY ALL PATIENTS 50 YEARS AND OLDER1-3

IMPORTANT SAFETY INFORMATION (CONT’D)

• 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.

• 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%).

• 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.

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Learn more at SHINGRIXHCP.COM


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