Imm/ARI Data Standard Code Tables

July 22, 2022

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Permissible Values

Table 1 – Submitter Prefix Codes

CODE	DESCRIPTION	END DATE			
20	First Nations and Inuit Health Branch				
21	Chinook Regional Health Authority	Chinook Regional Health Authority			
22	Palliser Health Region				
23	Calgary Health Region	Calgary Health Region			
24	David Thompson Regional Health Authority				
25	East Central Health				
26	Capital Health				
27	Aspen Regional Health Authority				
28	Peace Country Health				
29	Northern Lights Health Region				
30	Pharmacies				
31	University of Alberta				
32	Atlas Immunization Services				
33	Workplace Health and Safety – AHS				
34	Workplace Health and Safety – Covenant Health				
35	University of Calgary				
36	Southern Alberta Institute of Technology				
37	International Paper Grande Prairie Health Department				
38	MaKami College Inc.				
45	Fort McKay First Nation				
46	Alexis First Nation				
47	Beaver First Nation				
48	Lubicon Lake Nation				
49	Swan River First Nation				
50	Nunee Health Board Society				
51	Paul First Nation				
52	Dene Tha'- Chateh				
53	Driftpile First Nation				
54	Athabasca Chipewyan First Nation				
55	AH				
56	Saddle Lake Cree Nation				
57	Sunchild First Nation				
58	Alexander First Nation				
59	Enoch Cree Nation				
60	Beaver Lake Cree Nation				
61	Little Red River Cree Nation - John D'or Prairie				
62	Little Red River Cree Nation - Fox Lake				
63	Little Red River Cree Nation - Garden River				
64	Duncan's First Nation				
65	Wesley First Nation-Bighorn				

CODE	DESCRIPTION	END DATE		
66	Maskwacis Health Services			
67	Whitefish Lake First Nation - Atikameg			
68	Woodland Cree First Nation			
69	Loon River First Nation			
70	Tallcree First Nation			
71	Heart Lake First Nation			
72	Blood Tribe Department of Health			
73	Sturgeon Lake Cree Nation			
74	Sucker Creek First Nation			
75	Kapawe'no First Nation			
76	Dene Tha'- Bushe River			
77	Dene Tha'- Meander River			
78	O'Chiese First Nation			
79	Tsuu Tina Nation			
80	Whitefish Lake First Nation - Goodfish			
81	Aakom Kiyii Health Services - Piikani			
82	Bigstone Health Commission - Calling Lake			
83	Bigstone Health Commission - Bigstone			
84	Cold Lake First Nations			
85	Stoney Trail Wellness Centre - Eden Valley			
86	Morning Sky Health & Wellness Society - Frog Lake			
87	Kehewin Cree Nation			
88	Stoney Health Services - Morley			
89	Siksika Health Services			
90	OKAKI Community Clinic			
91	OKAKI Virtual Care Clinic			
99	Unknown			
100	Direct Form Submitter			
101	AH ACB			
102	Physician Clinic			
103	Community Pharmacy			
104	Corrections			
105	Post-Secondary			
106	Long Term Care (Supportive Living)			
107	Private/Travel Clinic			
108	Occupational Health			
109	First Nations			
413	Calgary Zone			
416	Connect Care			
417	North Zone			
418	South Zone			
419	Central Zone			
00	Out of Province 2004/01/01			
01	Chinook Regional Health Authority 2004/01/01			

CODE	DESCRIPTION	END DATE
02	Palliser Health Region	2004/01/01
03	Headwaters Health Authority	2004/01/01
04	Calgary Health Region	2004/01/01
05	Health Authority 5	2004/01/01
06	David Thompson Regional Health Authority	2004/01/01
07	East Central Regional Health Authority	2004/01/01
08	Westview Regional Health Authority	2004/01/01
09	Crossroads Regional Health Authority	2004/01/01
10	Capital Health Authority	2004/01/01
11	Aspen Regional Health Authority	2004/01/01
12	Lakeland Regional Health Authority	2004/01/01
13	Mistahia Regional Health Authority	2004/01/01
14	Peace Health Region	2004/01/01
15	Keeweetinok Lakes Regional Health Authority	2004/01/01
16	Northern Lights Regional Health Authority	2004/01/01
17	Northwestern Health Services Region	2004/01/01

Table 2 – Provincial Health Number Type Codes

CODE	DESCRIPTION
AB	Alberta
ВС	British Columbia
МВ	Manitoba
NB	New Brunswick
NL	Newfoundland and Labrador
NS	Nova Scotia
NT	Northwest Territories
NU	Nunavut
ON	Ontario
PE	Prince Edward Island
QC	Quebec
SK	Saskatchewan
YT	Yukon Territory

Table 3 – Alternate Person Identifier Type Codes

CODE	DESCRIPTION
ABC	Alberta Blue Cross
CF	Canadian Armed Forces
FP	Federal Penitentiary
RCMP	RCMP Collator Regional Number
TRTY	Treaty Number
VAC	Veteran Affairs Canada
WCB	Workers Compensation Board

Table 4 – Address Type Codes

CODE	DESCRIPTION
MAIL	Mailing Address
PHYS	Physical Address

Table 5 – Province Codes

CODE	DESCRIPTION
AB	Alberta
ВС	British Columbia
MB	Manitoba
NB	New Brunswick
NL	Newfoundland and Labrador
NS	Nova Scotia
NT	Northwest Territories
NU	Nunavut
ON	Ontario
PE	Prince Edward Island
QC	Quebec
SK	Saskatchewan
YT	Yukon

Table 6 – Country Codes

CODE	DESCRIPTION (A to L)	CODE	DESCRIPTION (M to Z)
AF	Afghanistan	МО	Macau
AL	Albania	MK	Macedonia, The Former Yugoslav Republic of
DZ	Algeria	MG	Madagascar
AS	American Samoa	MW	Malawi
AD	Andorra	MY	Malaysia
AO	Angola	MV	Maldives
Al	Anguilla	ML	Mali
AQ	Antarctica	MT	Malta
AG	Antigua and Barbuda	МН	Marshall Islands
AR	Argentina	MQ	Martinique
AM	Armenia	MR	Mauritania
AW	Aruba	MU	Mauritius
AU	Australia	YT	Mayotte
AT	Austria	MX	Mexico
AZ	Azerbaijan	FM	Micronesia, Federated States of
BS	Bahamas	MD	Moldova, Republic of
ВН	Bahrain	МС	Monaco
BD	Bangladesh	MN	Mongolia
ВВ	Barbados	MS	Montserrat

CODE	DESCRIPTION (A to L)	CODE	DESCRIPTION (M to Z)
BY	Belarus	MA	Morocco
BE	Belgium	MZ	Mozambique
BZ	Belize	MM	Myanmar
BJ	Benin	NA	Namibia
BM	Bermuda	NR	Nauru
BT	Bhutan	NP	Nepal
ВО	Bolivia	NL	Netherlands
BA	Bosnia and Herzegowina	AN	Netherlands Antilles
BW	Botswana	NC	New Caledonia
BV	Bouvet Island	NZ	New Zealand
BR	Brazil	NI	Nicaragua
Ю	British Indian Ocean Territory	NE	Niger
BN	Brunei Darussalam	NG	Nigeria
BG	Bulgaria	NU	Niue
BF	Burkina Faso	NF	Norfolk Island
BI	Burundi	MP	Northern Mariana Islands
KH	Cambodia	NO	Norway
СМ	Cameroon	ОМ	Oman
CA	Canada	PK	Pakistan
CV	Cape Verde	PW	Palau
KY	Cayman Islands	PA	Panama
CF	Central African Republic	PG	Papua New Guinea
TD	Chad	PY	Paraguay
CL	Chile	PE	Peru
CN	China	PH	Philippines
CX	Christmas Island	PN	Pitcairn
CC	Cocos (Keeling) Islands	PL	Poland
СО	Colombia	PT	Portugal
KM	Comoros	PR	Puerto Rico
CG	Congo	QA	Qatar
CD	Congo, the Democratic Republic of the	RE	Reunion
CK	Cook Islands	RO	Romania
CR	Costa Rica	RU	Russian Federation
CI	Cote D'Ivoire	RW	Rwanda
HR	Croatia (local name: Hrvatska)	KN	Saint Kitts and Nevis
CU	Cuba	LC	Saint Lucia
CY	Cyprus	VC	Saint Vincent and the Grenadines
CZ	Czech Republic	WS	Samoa
DK	Denmark	SM	San Marino
DJ	Djibouti	ST	Sao Tome and Principe
DM	Dominica	SA	Saudi Arabia

CODE	DESCRIPTION (A to L)	CODE	DESCRIPTION (M to Z)
DO	Dominican Republic	SN	Senegal
TP	East Timor	RS	Serbia
EC	Ecuador	SC	Seychelles
EG	Egypt	SL	Sierra Leone
SV	El Salvador	SG	Singapore
GQ	Equatorial Guinea	SK	Slovakia (Slovak Republic)
ER	Eritrea	SI	Slovenia
EE	Estonia	SB	Solomon Islands
ET	Ethiopia	SO	Somalia
FK	Falkland Islands (Malvinas)	ZA	South Africa
FO	Faroe Islands	GS	South Georgia and the South Sandwich Islands
FJ	Fiji	ES	Spain
FI	Finland	LK	Sri Lanka
FR	France	SH	St. Helena
FX	France, Metropolitan	PM	St. Pierre and Miquelon
GF	French Guiana	SD	Sudan
PF	French Polynesia	SR	Suriname
TF	French Southern Territories	SJ	Svalbard and Jan Mayen Islands
GA	Gabon	SZ	Swaziland
GM	Gambia	SE	Sweden
GE	Georgia	СН	Switzerland
DE	Germany	SY	Syrian Arab Republic
GH	Ghana	TW	Taiwan, Province of China
GI	Gibraltar	TJ	Tajikistan
GR	Greece	TZ	Tanzania, United Republic of
GL	Greenland	TH	Thailand
GD	Grenada	TG	Togo
GP	Guadeloupe	TK	Tokelau
GU	Guam	то	Tonga
GT	Guatemala	TT	Trinidad and Tobago
GN	Guinea	TN	Tunisia
GW	Guinea-Bissau	TR	Turkey
GY	Guyana	TM	Turkmenistan
НТ	Haiti	TC	Turks and Caicos Islands
НМ	Heard and Mc Donald Islands	TV	Tuvalu
VA	Holy See (Vatican City State)	UG	Uganda
HN	Honduras	UA	Ukraine
HK	Hong Kong	AE	United Arab Emirates
HU	Hungary	GB	United Kingdom
IS	Iceland	US	United States
IN	India	UM	United States Minor Outlying Islands

CODE	DESCRIPTION (A to L)	CODE	DESCRIPTION (M to Z)
ID	Indonesia	UY	Uruguay
IR	Iran (Islamic Republic of)	UZ	Uzbekistan
IQ	Iraq	VU	Vanuatu
IE	Ireland	VE	Venezuela
IL	Israel	VN	Viet Nam
IT	Italy	VG	Virgin Islands (British)
JM	Jamaica	VI	Virgin Islands (U.S.)
JP	Japan	WF	Wallis and Futuna Islands
JO	Jordan	EH	Western Sahara
KZ	Kazakhstan	YE	Yemen
KE	Kenya	YU	Yugoslavia
KI	Kiribati	ZR	Zaire
KP	Korea, Democratic People's Republic of	ZM	Zambia
KR	Korea, Republic of	ZW	Zimbabwe
KW	Kuwait		
KG	Kyrgyzstan		
LA	Lao People's Democratic Republic		
LV	Latvia		
LB	Lebanon		
LS	Lesotho		
LR	Liberia		
LY	Libyan Arab Jamahiriya		
LI	Liechtenstein		
LT	Lithuania		
LU	Luxembourg		

Table 7 - Quarter Section Codes

CODE	DESCRIPTION
SE	South East
SW	South West
NE	North East
NW	North West

Table 8 - Gender Codes

CODE	DESCRIPTION
F	Female
М	Male
0	Other
U	Unknown

Table 9 – Homeless/Indigent Flag Codes

CODE	DESCRIPTION
N	No
Υ	Yes

Table 10 – Submission Type Codes

VALUE	DESCRIPTION
A	Add Record/Transaction
С	Change Record/Transaction
D	Delete Record/Transaction

Table 11 – Historical Indicator Code

VALUE	DESCRIPTION
Н	Historical Immunization

Table 12 – Partial/Estimated Date Codes

VALUE	DESCRIPTION
E	Partial/Estimated Date

Table 13 - Vaccine Codes

Note:

- 1. The Vaccine Code column identifies the vaccine or other immunobiological agent.
- 2. The Type column identifies the type of immunobiological agent (A = active immunization; P = passive immunization; CP = chemoprophylaxis or test)
- 3. The Active column identifies the status of the immunobiological agent:
 - Y = Active, immunobiological agent in current use
 - N = Inactive, historic immunobiological agent not in current use
 - H = Historical, generic code created to document historical events where the vaccine type is unknown
 - U = Unavailable, code may exist in legacy data but is no longer available for use when documenting historical events

All reported vaccine codes must conform to the capitalization convention (e.g., report Hib, not HIB).

VACCINE CODE ¹	TYPE ²	VACCINE NAME/DESCRIPTION	ACTIVE ³	START	END DATE	NOTES
Anth	Α	Anthrax	Υ	1996/01/01		
BA	Р	Botulism Antitoxin	Υ	1962/06/12		
BA-7	Р	Botulism Antitoxin Heptavalent	Y	2016/12/15		
BCG	Α	Bacillus Calmette Guerin (TB)	Y	1956/01/01		
BAIg	Р	Botulism Antitoxin Immune Globulin	Y	2013/05/27		
СН	А	Cholera (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is unknown
Chol-Ecol-O	Α	Cholera - E.coli (oral)	Y	2003/02/21		
COVAUVec	А	AZ-COVID-19 ChAdOx1 - NR viral Vector (Vaxzevria)	Y	2020/12/01		
COVAXIN	Α	COVID-19 Covaxin	Н	2021/11/12		
COVBIBPVer	Α	SinoPharm BIBP Vero Cell	Н	2020/02/01		
COVCanSinoRe	А	CanSinoBIO (Convidecia) COVID-19 Recombinant	Н	2022/05/19		
COVCVASub	А	Covovax NVX-CoV2373 Recomb Nanoparticle	Y	2022/01/01		
COVJANVec	Α	COVID-19 Ad26 SARS - NR viral Vector	Y	2020/12/01		
COVMGOVLP	А	COVID-19 Virus Like Partical, Unspecified (Covifenz)	Y	2020/12/01		
COVMOD6m- 5ymRNA	А	PEDS 6mos-5yrs COVID-19 mRNA 1273 – mRNA (Moderna/SpikeVax)	Y	2022/01/01		
COVMODmRNA	Α	COVID-19 mRNA 1273 - mRNA (SpikeVax)	Y	2020/12/01		
COVNVASub	А	Recombinant spike protein, unspecified (Nuvaxovid)	Y	2022/01/01		
COVPB5y-11ymRNA	А	PEDIATRIC COVID19 BNT162b2-mRNA 5 yrs to 11 yrs (Cominarty)	Y	2021/11/12		
COVPB6m-4ymRNA	А	PEDS 6mos-4 yrs COVID19 BNT162b2 - mRNA (Pfizer/Cominarty)	Y	2022/01/01		
COVPBmRNA	Α	COVID-19 BNT162b2 - mRNA (Cominarty)	Y	2020/12/01		
COVSIIVec	Α	SII - COVID-19 ChAdOx1 - NR viral Vector	Υ	2020/12/01		
COVSVACVer	Α	SinoVac Vero Cell	Н	2020/12/01		
DA	Р	Diphtheria Antitoxin	Y	1895/01/01		

VACCINE CODE ¹	TYPE ²	VACCINE NAME/DESCRIPTION	ACTIVE ³	START	END DATE	NOTES
dTap (also known as Tdap)	A	Diphtheria/Tetanus/Acellular Pertussis	Y	2004/02/01		When documenting trivalent acellular pertussis events and the vaccine type is UNKNOWN use this code if the age of the client at immunization is ≥ 12 yrs
dTap-IPV	Α	Diphtheria/Tetanus/Acellular Pertussis/IPV	Y	2008/06/12		
DTaP-HB-IPV	А	Diphtheria/Tetanus/Acellular Pertussis/Hepatitis B/IPV	Y	2008/08/13		
DTaP-IPV	Α	Diphtheria/Tetanus/Acellular Pertussis/IPV	Υ	1997/07/01		
DTaP-IPV-Hib	А	Diphtheria/Tetanus/Acellular Pertussis/IPV/Hib	Υ	1997/07/01		
DTaP-IPV-Hib-HB	А	Diphtheria/Tetanus/Acellular Pertussis/IPV/Hib/Hepatitis B	Y	2004/05/28		
DTwP-Hib-HB	А	Diphtheria/Tetanus/Whole Cell Pertussis/ Hib/Hepatitis B	Н	1900/01/01		
DTwP-IPV-Hib	А	Diphtheria/Tetanus/Whole Cell Pertussis/IPV/Hib	Н	1900/01/01		
FLU	Α	Influenza Standard Dose	Υ	1939/01/01		
FLU-HD	Α	Influenza High Dose	Υ	2021/08/01		
HABV	Α	Hepatitis A and B	Υ	1997/01/01		
HA-Typh-I	Α	Hepatitis A and Typhoid	Υ	2003/10/29		
HAV	Α	Hepatitis A	Υ	1994/01/01		
HBIG	Р	Hepatitis B Immune Globulin	Υ	1971/01/01		
HBV	Α	Hepatitis B	Y	1983/01/01		
HBVD	Α	Hepatitis B for Dialysis	Υ	1983/01/01		
Hib	Α	Haemophilus Influenza b	Υ	1993/02/01		
HPV-9	Α	Human Papillomavirus (Nonavalent)	Υ	2015/02/05		
HPV-U	A	Human Papillomavirus (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is unknown
IG	Р	Immune Globulin (human intramuscular)	Υ	1987/02/18		
IPV	Α	Inactivated Polio	Y	1956/01/01		
JEV	Α	Japanese Encephalitis	Y	1990/01/01		
MenC-ACYW	Α	Meningococcal Conjugate (A, C, Y, W-135)	Υ	2006/05/03		
MenconC	Α	Meningococcal Conjugate Monovalent (C)	Υ	2001/06/15		
Men-B	А	Meningococcal B (4C, OMV recombinant absorbed)	Υ	2013/12/09		
MenB-FHbp	Α	Meningococcal B FHbp (recombinant)	Υ	2017/10/05		
MenB-U	Α	Meningococcal B (unspecified)	Н	1900/01/01		
MENING-C	A	Meningococcal Conjugate (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is conjugate but unknown serotype
MENING-P	А	Meningococcal Polysaccharide (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is polysaccharide but unknown serotype
MMR	Α	Measles/Mumps/Rubella	Υ	1982/01/01		
MMR-Var	Α	MMR and Varicella	Υ	2007/07/30		

VACCINE CODE ¹	TYPE ²	VACCINE NAME/DESCRIPTION	ACTIVE ³	START	END DATE	NOTES
PPD	СР	Purified Protein Derivative 5TU (Mantoux - TB Test)	Y	1960/01/05		
PNEU-C13	Α	Pneumococcal (13 conjugate)	Y	2009/12/21		
PNEU-C15	Α	Pneumococcal (15 conjugate)	Υ	2022/07/19		
PNEU-C20	Α	Pneumococcal (20 conjugate)	Y	2022/07/08		
PNEU-CON	A	Pneumococcal Conjugate (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type is conjugate but the serotype is unknown
PNEUMO-P	Α	Pneumococcal (23 polysaccharide)	Υ	1983/01/01		
RAB	Α	Rabies	Υ	1980/01/01		
RIG	Р	Rabies Immune Globulin	Υ	1983/09/16		
Rot	Α	Rotavirus	Υ	2006/08/16		
Rot-5	Α	Rotavirus (pentavalent)	Y	2006/08/01		
Rot-U	Α	Rotavirus (unspecified)	Н	1900/01/01		
RSVIg	Р	Respiratory Syncytial Virus	Y	2002/06/01		
SMAMONV	А	Smallpox-Monkeypox Orthopoxvirus – Imvamune Vaccine	Y	2022/06/06		
Td	Α	Tetanus/Diphtheria Toxoids (adult)	Y	1980/07/09		
Td-IPV	Α	Tetanus/Diphtheria/IPV	Y	1984/01/10		
TIG	Р	Tetanus Immune Globulin	Υ	1963/12/09		
TY	A	Typhoid (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is unknown
TYO	Α	Typhoid Ty21a (oral)	Y	1992/01/01		
TYVI	Α	Typhoid (injectable)	Y	1993/11/01		
Var-S	Α	Shingles Live	Y	2008/08/22		
Var-SI	Α	Shingles Inactivated	Y	2016/09/01		
Var-SU	Α	Shingles (unspecified)	Н	1900/01/01		
VZ	Α	Varicella Zoster	Υ	1998/12/01		
VZIG	Р	Varicella Zoster Immune Globulin	Υ	1985/01/01		
VZU	A	Varicella Zoster (unspecified)	Н	1900/01/01		ONLY used when documenting historical records where the type of vaccine is unknown
YF	Α	Yellow Fever	Υ	1935/01/01		
aP	Α	Acellular Pertussis	N	1997/07/01	2001/10/31	
CHI	Α	Cholera (injectable)	N	1970/01/01	1999/01/01	
СНО	Α	Cholera (oral)	N	1997/01/01	2010/09/23	
D	Α	Diphtheria Toxoid (fluid)	N	1954/04/01	1994/08/01	
DD	A	Diphtheria Toxoid (fluid-diluted)	U	1954/04/01	1994/08/01	No longer available for historical documentation as of 2011/05/01
DPT	Α	Diphtheria/whole cell Pertussis/ Tetanus	N	1948/01/01	1997/06/30	
DPTP	Α	Diphtheria/whole cell Pertussis/ Tetanus/ IPV	N	1994/08/02	1997/06/30	
DPTPHib	A	Diphtheria/whole cell Pertussis/ Tetanus/ IPV/Hib	N	1994/08/02	1997/06/30	
DRT	СР	Diphtheria Reaction Test	N	1923/01/01	1996/01/01	
DT	Α	Diphtheria/Tetanus toxoids (pediatric)	N	1948/01/01	1998/12/31	

VACCINE CODE ¹	TYPE ²	VACCINE NAME/DESCRIPTION	ACTIVE ³	START	END DATE	NOTES
DTaP	A	Diphtheria/Tetanus/Acellular Pertussis	U	1997/07/01	1999/01/01	When documenting trivalent acellular pertussis events and the vaccine type is UNKNOWN use this code if the age of the client at immunization is < 12 yrs
DT-IPV	Α	Diphtheria/Tetanus/IPV (pediatric)	N	1996/07/01	2005/10/31	
EZM	А	E/Z Measles	U	1969/01/01	1971/01/01	No longer available for historical documentation as of 2011/05/01
H1N1-09-AD	Α	Adjuvanted Pandemic 2009 Influenza	N	2009/10/19	2010/10/01	
H1N1-09	Α	Non-Adjuvanted Pandemic 2009 Influenza	N	2009/10/19	2010/10/01	
HbOC	A	Haemophilus Influenza b	U	1992/05/19	1993/02/01	No longer available for historical documentation as of 2011/05/01
HBTmf	А	Hepatitis B Thimerosal Free	U	2003/04/16	2011/05/01	No longer available for historical documentation as of 2011/05/01
Hib-MenC	А	Haemophilus Influenza b/ Meningococcal Conjugate	Н	2010/08/01	2015/02/05	
HPV	Α	Human Papillomavirus (Quadravalent)	Y	2006/07/11	2019/06/30	
HPV-2	Α	Human Papillomavirus (Bivalent)	Υ	2010/02/09	2019/06/30	
KMEA	Α	Killed Red Measles	N	1963/01/01	1970/12/31	
Lym	Α	Lymerix	N	1998/12/02	2002/07/30	
MEA	Α	Measles (red)	N	1970/07/01	1998/12/31	
MenACs	A	Meningococcal Polysaccharide Bivalent (A, C)	U	2001/01/01	2002/03/01	No longer available for historical documentation as of 2011/05/01
MeninAC	А	Meningococcal Polysaccharide Bivalent (A, C)	N	2001/01/01	2002/03/01	
MENING	А	Meningococcal Polysaccharide Quadravalent (A, C, Y, W-135)	Y	1983/05/04	2012/01/18	
MENOTET	А	Meningococcal Polysaccharide Quadravalent (A, C, Y, W-135)	U	1983/05/04	2000/11/01	No longer available for historical documentation as of 2011/05/01
MONM	А	Measles (Red)	U	1997/04/01	1998/06/30	No longer available for historical documentation as of 2011/05/01
MR	Α	Measles/Rubella	N	1997/01/01	1999/12/31	
MU	Α	Mumps	N	1982/01/01	2004/02/08	
OMP	А	Haemophilus Influenza b	U	1990/01/01	1994/08/02	No longer available for historical documentation as of 2011/05/01
OPV	Α	Oral Polio	N	1962/01/01	1994/07/31	
Р	Α	Whole Cell Pertussis	N	1939/01/01	1997/06/30	
PNEU-C	Α	Pneumococcal (7 conjugate)	N	2001/01/16	2010/07/01	
PNEU-C10	Α	Pneumococcal (10 conjugate)	Y	2008/12/11	2008/12/11	
POL	Α	Polio (unspecified)	Y	1994/08/02	1998/12/31	
PRPD	А	Haemophilus Influenza b	U	1988/03/16	1992/05/18	No longer available for historical documentation as of 2011/05/01
RUB	Α	Rubella	N	1971/01/01	1998/10/01	
Sma	Α	Smallpox	N	1870/01/01	2015/06/01	
SNAKE	Р	Snakebite Antivenom	N	1980/01/01	2002/02/03	
TBEV	Α	Tick-Borne Encephalitis Virus	N	1995/06/01	2014/03/03	
TdP	Α	Tetanus/Diphtheria/IPV (adult)	N	1984/01/10	2015/03/01	
TP	Α	Tetanus Polio	N	1959/01/01	1994/08/01	
TT	А	Tetanus Toxoid	N	1947/01/01	2000/12/31	

Table 14 - Vaccine Site Codes

CODE	DESCRIPTION
LA	Left Arm
LAF	Left Arm - Forearm
LAL	Left Arm – Lower (The lower site of two injections given in the left deltoid)
LAU	Left Arm – Upper (The upper site of two injections given in the left deltoid)
LDG	Left Dorsogluteal
LG	Left Gluteal
LL	Left Leg (Left vastus lateralus)
LLL	Left Leg – Lower (The lower site of two injections given in the left vastus lateralus)
LLU	Left Leg – Upper (The upper site of two injections given in the left vastus lateralus)
LVG	Left Ventrogluteal
MO	Mouth
MS	Multiple Sites (For IG products)
NO	Nose
OTH	Other
RA	Right Arm
RAF	Right Arm - Forearm
RAL	Right Arm – Lower (The lower site of two injections given in the right deltoid)
RAU	Right Arm – Upper (The upper site of two injections given in the right deltoid)
RDG	Right Dorsogluteal
RG	Right Gluteal
RL	Right Leg (Right vastus lateralus)
RLL	Right Leg – Lower (The lower site of two injections given in the right vastus lateralus)
RLU	Right Leg – Upper (The upper site of two injections given in the right vastus lateralus)
RVG	Right Ventrogluteal
VE	Vein
WO	Wound
UNK	Unknown

Table 15 – Administering Method Codes

CODE	DESCRIPTION
G	Gastric
ID	Intradermal
IM	Intramuscular
IN	Intranasal
INF	Infiltrate
IV	Intravenous Infusion
PO	Oral
SC	Subcutaneous
ОТН	Other
UNK	Unknown

Table 16 - Reason for Immunization Codes

Note: Codes that are end-dated can be used if a previously "not-reported" immunization occurred before the end date.

CODE	DESCRIPTION	END DATE
02	Advanced Age (65+)	
03	Health Care Workers not including LTC/DSL	
22	LTC/DSL Resident	
39	Household or Close Contacts of individuals in the 46, 02, 67, and 68 reason codes categories	
44	LTC/DSL Staff	
46	Pregnant Women	
50	Routine Recommended Immunization	
51	Post Exposure	
52	Outbreak	
54	Occupational	
58	Treatment	
65	Endemic HBV	
66	Other Risk	
67	Children 6 months to 59 months of age	
68	5 years to 64 years of age with an eligible chronic condition	
69	5 years to 64 years (routine) with no individual risk/not a household contact of an individual in a high-risk population	
70	Other Congregate Living Settings (e.g., senior lodges, corrections, group homes)	
72	12 years to 64 years of age	
73	COVID-19 In-school Immunization Program	
74	COVID-19 Additional Dose for Travel	
75	5 years to 11 years of age	
76	6 months to 4 years of age	
97	Unknown	
98	Research	
99	Non Provincially Funded	
01	Less Than 65 Years With an Eligible Chronic Condition	2015/09/01
04	Hemophilia	1923/01/01
05	Outbreak Control	1923/01/01
06	Infant Born to HBsAg Positive Mother	1923/01/01
07	Infant With a HBsAg Positive Caregiver	1923/01/01
08	Post Exposure Management – Non-responder to Vaccine	1923/01/01
09	Post Exposure Management – Community Needlestick/Sexual Assault	1923/01/01
10	Post Exposure Management – Unimmunized/Partially Immunized	1923/01/01
11	From Endemic Area	1923/01/01
13	Household &/or Sexual Contacts of Cases/Carriers	1923/01/01
14	Eligible Adults	2012/03/31
15	Dialysis Patients	1923/01/01
16	Universal School Program	1923/01/01
17	Laboratory Workers	1923/01/01
18	Health Care Students	2012/03/31
19	Other Eligible Children/Adolescents	2012/03/31
20	Asplenia	1923/01/01

CODE	DESCRIPTION	END DATE
21	Medically at Risk	1923/01/01
23	Pre-exposure Primary Series – Animal Health	1923/01/01
24	Pre-exposure Primary Series – Animal Control	1923/01/01
25	Pre-exposure Primary Series – Wildlife Worker	1923/01/01
26	Pre-exposure Primary Series – Animal Research	1923/01/01
27	Pre-exposure Primary Series – Spelunker	1923/01/01
28	Pre-exposure Booster – Animal Health	1923/01/01
29	Pre-exposure Booster – Animal Control	1923/01/01
30	Pre-exposure Booster – Wildlife Worker	1923/01/01
31	Pre-exposure Booster – Animal Research	1923/01/01
32	Post Exposure – Series	1923/01/01
33	Post Exposure – Booster (previously immunized)	1923/01/01
34	Pre-exposure Booster – Spelunker	1923/01/01
35	Post Exposure	1923/01/01
36	Universal Immunization Program (including persons born in 1981 or later)	1923/01/01
37	Post-natal	1923/01/01
38	Other Unique Cases	1923/01/01
40	Pre-schoolers	1923/01/01
41	Alternate Vaccine Preparation Contraindicated	1923/01/01
42	Risk Behaviour	1923/01/01
43	Student in Dormitory/Residence Accommodation	1923/01/01
45	Children 6-23 months	2020/04/30
47	Workers Directly Involved in Culling Operations	2012/03/31
48	Transplant Candidate/Recipient – HSCT (Hematopoietic Stem Cell Transplant)	1923/0101
49	Transplant Candidate/Recipient – SOT (Solid Organ Transplant)	1923/01/01
53	Post-natal	2019/06/30
55	Medically at Risk	2019/06/30
56	High Risk Behaviour	2015/09/30
57	High Risk	2019/06/30
59	Healthy Less than 65 Years Old	2015/09/01
60	Children 24-59 months	2020/04/30
61	Refugees Less than 50 Years Old	2019/06/30
62	Recently Immigrated 6 months to 20 Year Olds	2019/06/30
63	5 years to 8 years	2020/04/30
64	9 years to 64 years	2020/04/30
71	Essential Services Workers (not including health care workers)	2022/06/22

Table 17 – Vaccine-Reason for Immunization Associations

Note: Vaccine codes that are end-dated can be used if a previously "not-reported" immunization occurred before the end date.

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	
Anth	99	Non Provincially Funded		Client does not meet provincial eligibility criteria
	97	Unknown		
BA	58	Treatment		Treatment of a case under the direction of the CMOH
	51	Post-Exposure		
	97	Unknown		
BA-7	58	Treatment		Treatment of a case under the direction of the CMOH
	97	Unknown		
BAIg	51	Post-exposure		
	58	Treatment		Treatment of a case under the direction of the CMOH
	97	Unknown		
BCG	57	High Risk	2019/06/30	
	66	Other Risk		Communities that have been identified as having high TB infection rates
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
СН	97	Unknown		
Chol-Ecol-O	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
COVAXIN				Historical vaccine; no reason required
COVBIBPVer				Historical vaccine; no reason required
COVCanSinoRe				Historical vaccine; no reason required
COVSVACVer				Historical vaccine; no reason required
COVAUVec	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	98	Research		Approved research projects
	71	Essential Services Workers (not including HCWs)	2022/06/21	
	97	Unknown		
	74	COVID-19 Additional Dose for Travel		Individuals who received a vaccine series not recognized by the travel destination and require an mRNA series
COVCVASub	2	Advanced Age (65 plus)		

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	3	Health Care Workers not including LTC/DSL		
	22	LTC/DSL Resident		
	44	LTC/DSL Staff		
	66	Other Risk		Individuals with underlying health conditions
	70	Other Congregate Living Settings		
	72	12 years to 64 years		
COVJANVec	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other Risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	97	Unknown		
	71	Essential Services Workers (not including HCWs)	2022/06/22	
COVMGOVLP	03	Health Care Workers not including LTC/DSL		
	44	LTC/DSL Staff		
	66	Other Risk		Individuals with underlying health conditions
	70	Other Congregate Living Settings		
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	02	Advanced Age (65 plus)	2020/12/01	
	22	LTC/DSL Resident	2020/12/01	
	71	Essential Services Workers (not including HCWs)	2022/06/22	
COVMOD6m- 5ymRNA	76	6 months to 4 years of age		
	75	5 to 11 years of age		
COVMODmRNA	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other Risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
	74	COVID-19 Additional Dose for Travel		Individuals who received a vaccine series not recognized by the travel destination and require an mRNA series
	98	Research		Approved research projects
	75	5 to 11 years		
	97	Unknown		
	71	Essential Services Workers (not including HCWs)	2022/06/21	
COVNVASub	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other Risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	74	COVID-19 Additional Dose for Travel		Individuals who received a vaccine series not recognized by the travel destination and require an mRNA series
	71	Essential Services Workers (not including HCWs)	2022/06/22	
COVPB5y-	66	Other Risk		Individuals with underlying health conditions
11ymRNA	75	5 years to 11 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
COVPB6m- 4ymRNA	76	6 months to 4 years of age		
COVPBmRNA	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other Risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	73	COVID-19 In-school Immunization Program		Individuals who received COVID-19 immunization in a school setting
	74	COVID-19 Additional Dose for Travel		Individuals who received a vaccine series not recognized by the travel destination and require an mRNA series
	98	Research		Approved research projects
	97	Unknown		
	71	Essential Services Workers (not including HCWs)	2022/06/22	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
COVSIIVec	03	Health Care Workers not including LTC/DSL		Health Care Workers not including LTC/DSL
	44	LTC/DSL Staff		Staff providing seniors care in Long Term Care and Designated Supportive Living Facilities
	22	LTC/DSL Resident		Residents living in Long Term Care and Designated Supportive Living Facilities (all residents not just those residents who have a provincially funded bed)
	70	Other Congregate Living Settings		Residents living in congregate living sites (e.g., senior lodges, non senior lodges, group homes, corrections)
	02	Advanced Age (65+)		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	66	Other Risk		Individuals with underlying health conditions
	72	12 years to 64 years		Age based reason codes – Note that the clients date of birth will be used to further break down age based reason codes
	97	Unknown		
DA	58	Treatment		Treatment of a case under the direction of the CMOH
	97	Unknown		
DTaP-HB-IPV	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	65	Endemic HBV	1923/01/01	
	97	Unknown		
DTaP-IPV-Hib	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	51	Post-exposure		
	55	Medically at Risk	2019/06/30	
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	97	Unknown		
DTaP-IPV	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	55	Medically at risk	2019/06/30	
	57	High Risk	2019/06/30	
	51	Post-exposure		
	97	Unknown		
dTap	46	Pregnant Women		Pregnant women
	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	51	Post-exposure		Individuals seven years of age and older who sustain a tetanus prone injury
	52	Outbreak		Includes outbreak control: An identified regional and/or provincial public health response
	54	Occupational		
	55	Medically at Risk	2019/06/30	
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	05	Outbreak Control	1923/01/01	
	16	Universal School Program	1923/01/01	
	19	Other Eligible Children/Adolescents	1923/01/01	
	48	Transplant Candidate/Recipient – HSCT	1923/01/01	
	49	Transplant Candidate/Recipient – SOT	1923/01/01	
dTap-IPV	46	Pregnant Women	2019/06/30	
	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine. Refer to the AHS standards
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
DTaP-IPV-Hib-HB	51	Post-exposure	2019/06/30	
	57	High Risk	2019/06/30	
	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards Eligible infants that started with Infanrix-hexa® in another jurisdiction as part of a universal program
	65	Endemic HBV		Infants 0 to 23 months of age whose parents are from an endemic area
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	55	Medically at Risk	1923/01/01	
DTwP-Hib-HB				Historical vaccine; no reason required
DTwP-IPV-Hib				Historical vaccine; no reason required
FLU	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	98	Research		Approved research projects
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	44	Long Term Care Staff	2014/10/01	
	03	Heath Care Workers	2021/08/01	
	02	Greater Than or Equal to 65	2021/08/01	
	64	9 years to 64 years	2020/04/30	
	63	5 years to 8 years	2020/04/30	
	60	Children 24-59 months	2020/04/30	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
	45	Children 6-23 months	2020/04/30	
	22	Resident in Long Term Care Facility	2014/10/01	
	01	Less Than 65 years With an Eligible Chronic Condition	2015/09/01	
	14	Eligible Adults	2012/03/31	
	18	Health Care Students	2012/03/31	
	19	Other Eligible Children Adolescent (24-59 months)	2012/03/31	
	67	Children 6 months to 59 months of age	2021/08/01	
	68	5 years to 64 years of age with an eligible chronic condition	2021/08/01	
	39	Household or Close Contact of individuals in the 46, 02, 67, and 68 reason codes categories	2021/08/01	
	69	5 years to 64 years (routine) with no individual risk or not a household contact of an individual in a high-risk population	2021/08/01	
	47	Workers Directly Involved in Culling Operations	2012/03/31	
	59	Healthy Less than 65 Years Old	2015/09/01	
FLU-HD	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
HABV	55	Medically at Risk	2019/06/30	
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards Individuals who are at risk of exposure because of their contact with individuals or materials from individuals with infections both diagnosed and undiagnosed Lifestyle risks of infection (e.g., engaging in oral sex, using illicit drugs (injectable and non-injectable), and males having sex with other males)
	56	High Risk Behaviour	2015/09/30	
	57	High Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	4	Hemophilia	1923/01/01	
	11	From Endemic Area	1923/01/01	
	21	Medically At Risk	1923/01/01	
	42	Risk Behavior	1923/01/01	
	65	Endemic HBV	1923/01/01	
HA-Typh-I	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
HAV	51	Post-exposure		Given under the direction of the CD Unit Contacts of persons with specific disease Includes outbreak control: an identified regional and/or provincial public health response

	REAS	ON FOR IMMUNIZATION	END DATE	
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines Residents of communities with high rates of hepatitis A infection, including inmates of provincial correctional facilities Household or close contacts of children adopted from hepatitis A endemic countries Lifestyle risks of infection (e.g., engaging in oral sex; using illicit drugs (injectable and non-injectable) in unsanitary conditions; and males having sex with other males, particularly when there is a likelihood of oral-anal contact)
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	4	Hemophilia	1923/01/01	
	5	Outbreak Control	1923/01/01	
	14	Eligible Adults	1923/01/01	
	19	Other Eligible Children/Adolescents	1923/01/01	
	21	Medically At Risk	1923/01/01	
	35	Post Exposure	1923/01/01	
	42	Risk Behavior	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
	52	Outbreak	1923/01/01	
	56	High Risk Behaviour	2015/09/30	
HBIG	51	Post Exposure		Given under the direction of the CD Unit Includes infants whose mothers are HBsAg positive or mother's status is unknown at time of delivery Post exposure – community Individuals with a significant blood/body fluid exposure (community needlestick or sexual assault) Post exposure – non-responder Individuals who have had a previous vaccine series who are non-responders Post exposure – unimmunized Individuals who only have had none or a partial vaccine series
	97	Unknown		
	6	Infant Born to HBsAg Positive Mother	1923/01/01	
	7	Infant With a HBsAg Positive Caregiver	1923/01/01	
	8	Post Exposure Management – Non	1923/01/01	
	9	Post Exposure Management– Community Needlestick/Sexual AssIt	1923/01/01	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	10	Post Exposure Management – Unimmunized/Partially Immunized	1923/01/01	
	13	Household &/or Sexual Contacts of Cases/Carriers	1923/01/01	
	35	Post Exposure	1923/01/01	
HBV	51	Post Exposure		 Given under the direction of the CD Unit Contacts of persons with specific disease Contacts of a case/carrier Individuals with a significant blood/body fluid exposure (community needle stick or sexual assault) Individuals with a significant blood/body fluid exposure at work and the employer does not offer occupational health and safety services Individuals who have had a previous vaccine series who are non-responders Post exposure including individuals who only have had none or a partial vaccine series Infants whose mothers are HBsAg positive or mother's status is unknown Infants whose caregiver is HBsAg positive
	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	55	Medically at Risk	2019/06/30	
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines Children and staff in child care settings in which there are exceptional circumstances (as per MOH/designate) Non-immune individuals with lifestyle risks for infection Inmates in provincial correctional facilities who will be incarcerated for a sufficient length of time to complete series
	57	High Risk	2019/06/30	
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	65	Endemic HBV		Children younger than seven years of age whose families are from endemic areas Non-immune adults who are from endemic areas
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine for any reason
	97	Unknown		
	3	Health Care Workers not including LTC/DSL	1923/01/01	
	4	Hemophilia	1923/01/01	
	6	Infant Born to HBsAg Positive Mother	1923/01/01	
	7	Infant With a HBsAg Positive Caregiver	1923/01/01	
	8	Post Exposure Management – Non-responder to Vaccine	1923/01/01	
	9	Post Exposure Management– Community Needlestick/Sexual AssIt	1923/01/01	
	10	Post Exposure Management – Unimmunized/Partially Immunized	1923/01/01	
	11	From Endemic Area	1923/01/01	
	13	Household &/or Sexual Contacts of Cases/Carriers	1923/01/01	
		Eligible Adults	1923/01/01	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	15	Dialysis Patients	1923/01/01	
	16	Universal School Program	1923/01/01	
	18	Health Care Students	1923/01/01	
	19	Other Eligible Children/Adolescents	1923/01/01	
	35	Post Exposure	1923/01/01	
	42	Risk Behavior	1923/01/01	
	48	Transplant Candidate/Recipient - HSCT	1923/01/01	
	49	Transplant Candidate/Recipient - SOT	1923/01/01	
	56	High Risk Behaviour	2015/09/30	
HBVD	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	97	Unknown		
	55	Medically at Risk	2019/06/30	
	15	Dialysis Patients	1923/01/01	
	21	Medically At Risk	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
Hib	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	55	Medically at Risk	2019/06/30	
	97	Unknown		
	20	Asplenia	1923/01/01	
	21	Medically At Risk	1923/01/01	
	36	Universal Immunization Program	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
HPV-9	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	66	Other Risk		Individuals 9 to 17 years of age who are recipients of an HSCT Individuals 9 to 26 years of age who are candidates/recipients of a SOT Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards Individuals with lifestyle risks for infection
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
HPV-U	97	Unknown		
IG	51	Post Exposure		

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
	97	Unknown		
	5	Outbreak Control	1923/01/01	
	35	Post Exposure	1923/01/01	
	52	Outbreak	1923/01/01	
IPV	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards and the SOT guidelines. Eligible travelers as per Alberta Health guidelines Reinforcing dose for eligible individuals as per provincial eligibility: Members of communities or specific population groups as directed by MOH/designate Close contacts to those who may be excreting polio virus Family members or close contacts of internationally adopted infants who may have been immunized with OPV Individuals receiving travelers from areas where
	54	Occupational		polio is circulating Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	55	Medically at Risk	2019/06/30	vaccine, refer to the Arra Standards
	57	High Risk	2019/06/30	
	99	Non Provincially Funded	2010/00/00	Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		,
JEV	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
MenconC	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	54	Occupational		
	55	Medically at Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	5	Outbreak Control	1923/01/01	
	17	Laboratory Workers	1923/01/01	
	21	Medically At Risk	1923/01/01	
	35	Post Exposure	1923/01/01	
	36	Universal Immunization Program	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	

	REAS	ON FOR IMMUNIZATION	END DATE	
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
MenC- ACYW	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
				Specified laboratory workers
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	55	Medically at Risk	2019/06/30	
	5	Outbreak Control	1923/01/01	
	17	Laboratory Workers	1923/01/01	
	20	Asplenia	1923/01/01	
	21	Medically At Risk	1923/01/01	
	35	Post Exposure	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
Men-B	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
				Research, industrial and clinical laboratory personnel routinely exposed
	55	Medically at Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
MenB-FHbp	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards Research, industrial and clinical laboratory personnel routinely exposed
	55	Medically at Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
MenB-U				Historical vaccine; no reason required

			END DATE	
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
MENING-C	97	Unknown		
MENING-P	97	Unknown		
MMR	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response Susceptible individuals 6 months up to and including 11 months of age who are living in areas where measles is circulating
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines • Travellers
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	98	Research		MMR Studies
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	53	Post-natal	2019/06/30	
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	3	Health Care Workers not including LTC/DSL	1923/01/01	
	5	Outbreak Control	1923/01/01	
	11	From Endemic Area	1923/01/01	
	14	Eligible Adults	1923/01/01	
	36	Universal Immunization Program	1923/01/01	
	37	Post-natal	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
	53	Post-natal	2019/06/30	
MMR-Var	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	51	Post Exposure		
	52	Outbreak		Includes outbreak control: an identified regional and/or provincial public health response
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines • Travellers
	54	Occupational		
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
PNEU-C13	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards, eligible individuals are defined by provincial criteria for each vaccine Refer to the AHS standards, the hematopoietic stem cell transplant and the solid organ transplant guidelines
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines Resident long term care facility where 24 hour nursing care is provided Homeless/chronically disadvantaged Illicit drug use
	55	Medically at Risk	2019/06/30	
	98	Research		Pneumococcal vaccine studies
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
PNEU-C15	99	Non Provincially Funded		
PNEU-C20	99	Non Provincially Funded		
PNEU-CON	97	Unknown		
PNEUMO-P	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines Resident long term care facility where 24 hour nursing care is provided Horneless/chronically disadvantaged
	99	Non Provincially Funded		Illicit drug use Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	1	Less Than 65 Years With an Eligible Chronic Condition	1923/01/01	
	2	Advanced Age (65 plus)	1923/01/01	
	5	Outbreak Control	1923/01/01	
	21	Medically At Risk	1923/01/01	
	22	LTC/DSL Resident	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
	56	High Risk Behaviour	2015/09/30	Observe deaths disperied (d. TD O
PPD	51	Post Exposure		Given under the direction of the TB Services Contacts of persons with specific disease
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	55	Medically at Risk	2019/06/30	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
	57	High Risk	2019/06/30	
	61	Refugees Less than 50 Years Old	2019/06/30	
	62	Recently Immigrated 6 months to 20 Years Olds	2019/06/30	
RAB	51	Post Exposure		Given under the direction of the CD Unit Post exposure series Post exposure booster
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	23	Pre-exposure Primary Series – Animal Health	1923/01/01	
	24	Pre-exposure Primary Series – Animal Control	1923/01/01	
	25	Pre-exposure Primary Series – Wildlife Worker	1923/01/01	
	26	Pre-exposure Primary Series – Animal Research	1923/01/01	
	27	Pre-exposure Primary Series – Spelunker	1923/01/01	
	28	Pre-exposure Booster – Animal Health	1923/01/01	
	29	Pre-exposure Booster – Animal Control	1923/01/01	
	30	Pre-exposure Booster – Wildlife Worker	1923/01/01	
	31	Pre-exposure Booster – Animal Research	1923/01/01	
	32	Post Exposure – Series	1923/01/01	
	33	Post Exposure – Booster (previously immunized)	1923/01/01	
	34	Pre-exposure Booster/ Spelunker	1923/01/01	
	35	Post Exposure	1923/01/01	
	56	High Risk Behaviour	2015/09/30	
RIG	51	Post Exposure		Given under the direction of the CD Unit
	97	Unknown		
	35	Post Exposure	1923/01/01	
Rot	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to AHS standards
	97	Unknown		
	99	Non Provincially Funded	2019/06/30	
Rot-U	97	Unknown		
Rot-5	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to AHS standards
	97	Unknown		
	99	Non Provincially Funded	2019/06/30	
RSVIg	66	Other Risk		Targeted program for a specific group based on the Alberta RSV prevention program eligibility criteria

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	INOTES
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
SMAMONV	51	Post Exposure		
	52	Outbreak		
	66	Other Risk		
Td	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	51	Post Exposure		Individuals 18 years of age or older who sustain a wound
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards and the SOT guidelines
	55	Medically at Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
Td-IPV	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility; refer to the AHS standards
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards • Travellers
	54	Occupational		Travellore
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
TIG	51	Post Exposure		Given under the direction of the CD Unit
	97	Unknown		
ΤΥ	97	Unknown		
TYO	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
TYVI	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease Contacts of a chronic carrier
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
				Specified lab workers
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
√ar-S	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
Var-SI	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
				Household/close contact of immunocompromised/high risk
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	110120
Var-SU				Historical vaccine; no reason required
VZ	50	Routine Recommended Immunization		Routine program for a specific group based on provincial eligibility, refer to the AHS standards
	51	Post Exposure		Given under the direction of the CD Unit
				Contacts of persons with specific disease
	66	Other Risk		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards, the HSCT, and the SOT guidelines
				Household/close contact of immunocompromised/high risk
	54	Occupational		Eligible individuals are defined by provincial criteria for each vaccine; refer to the AHS standards
				Health care worker, student, volunteer Daycare worker
	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
	55	Medically at Risk	2019/06/30	
	57	High Risk	2019/06/30	
	3	Health Care Workers not including LTC/DSL	1923/01/01	
	14	Eligible Adults	1923/01/01	
	16	Universal School Program	1923/01/01	
	19	Other Eligible Children/Adolescents	1923/01/01	
	35	Post Exposure	1923/01/01	
	36	Universal Immunization Program	1923/01/01	
	37	Post-natal	1923/01/01	
	38	Other Unique Cases	1923/01/01	
	39	Household/Close Contacts of individuals in 46, 02, 67, 68	1923/01/01	
	40	Pre-schoolers	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
	53	Post-natal	2019/06/30	
VZIG	51	Post Exposure		Given under the direction of the CD Unit Contacts of persons with specific disease
	97	Unknown		·
VZU	97	Unknown		
YF	99	Non Provincially Funded		Client does not meet provincial eligibility criteria but wishes to purchase vaccine
	97	Unknown		
aP	97	Unknown	2001/10/31	
CHI	97	Unknown	1999/01/01	
СНО	97 99	Unknown Non Provincially Funded	2010/09/23	
D	99	Non Provincially Funded Unknown	2010/09/23 1994/08/01	
DD	97	Unknown	1994/08/01	
DPT	97	Unknown	1997/06/30	
DPTP	97	Unknown	1997/06/30	
DPTPHib	97	Unknown	1997/06/3	

	REAS	ON FOR IMMUNIZATION	END DATE	
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
DRT	97	Unknown	1996/01/01	
DT	97	Unknown	1998/12/31	
DTaP	97	Unknown	1999/01/01	
DT-IPV	97	Unknown	2005/10/31	
EZM	97	Unknown	1971/01/01	
HbOC	97	Unknown	1993/02/01	
HBTmf	3	Health Care Workers not including LTC/DSL	1923-01-01	
	4	Hemophilia	1923-01-01	
	6	Infant Born to HBsAg Positive Mother	1923-01-01	
	7	Infant With a HBsAg Positive Caregiver	1923-01-01	
	8	Post Exposure Management – Non	1923-01-01	
	9	Post Exposure Management– Community Needlestick/Sexual Asslt	1923-01-01	
	10	Post Exposure Management – Unimmunized/Partially Immunized	1923-01-01	
	11	From Endemic Area	1923-01-01	
	13	Household &/or Sexual Contacts of Cases/Carriers	1923-01-01	
	14	Eligible Adults	1923-01-01	
	16	Universal School Program	1923-01-01	
	18	Health Care Students	1923-01-01	
	19	Other Eligible Children/Adolescents	1923-01-01	
	35	Post Exposure	1923-01-01	
	42	Risk Behavior	1923-01-01	
	48		1923-01-01	
	49	Transplant Candidate/Recipient	1923-01-01	
	50	Transplant Candidate/Recipient Routine Recommended	2011-05-01	
	51	Immunization	2011-05-01	
		Post Exposure	2011-05-01	
	54	Occupational		
	55	Medically at Risk	2011-05-01	
	56	High Risk Behavior	2011-05-01	
	57	High Risk	2011-05-01	
	97	Unknown	2011-05-01	
	99	Non Provincially Funded	2011-05-01	
Hib-MenC	97	Unknown	2015/02/05	
HPV (Quadravalent)	50	Routine Recommended Immunization	2019/06/06	
	55	Medically at Risk	2019/06/30	
	99	Non Provincially Funded	2019/06/30	
HDV/ 2	97	Unknown Routine Recommended	2019/06/30	
HPV-2	50	Immunization	1923/01/01	
	55 97	Medically at Risk Unknown	1923/01/01 2019/06/30	
	99	Non Provincially Funded	2019/06/30	
H1N1-09-AD	01	Less Than 65 Years With an Eligible Chronic Condition	2010/10/01	
	02	Greater than or Equal to 65	2010/10/01	
	03	Health Care Workers	2010/10/01	
	39	Household /Close Contacts of Immunocompromised/High Risk	2010/10/01	
	46	Eligible Pregnant Women	2010/10/01	

VACCINE CODE	REAS	ON FOR IMMUNIZATION	END DATE for use of Reason	NOTES
VACCINE CODE	CODE	DESCRIPTION	with Vaccine Code	NOTES
	59	All Other (Healthy Less Than 65 Years Old)	2010/10/01	
	97	Unknown	2010/10/01	
H1N1-09	01	Less Than 65 Years With an Eligible	2010/10/01	
111141 05		Chronic Condition	2010/10/01	
	02	Greater than or Equal to 65	2010/10/01	
	03	Health Care Workers	2010/10/01	
	39	Household /Close Contacts of Immunocompromised/High Risk	2010/10/01	
	46	Eligible Pregnant Women	2010/10/01	
	59	All Other (Healthy Less Than 65 Years Old)	2010/10/01	
	97	Unknown	2010/10/01	
KMEA	97	Unknown	1970/12/31	
Lym	99	Non Provincially Funded	2007/07/30	
	97	Unknown	2002/07/30	
MEA	97	Unknown	1998/12/31	
MenACs	5	Outbreak Control	1923/01/01	
	97	Unknown	2002/03/01	
MeninAC	5	Outbreak Control	1923/01/01	
	97	Unknown	2002/03/01	
MENING	51	Post Exposure	2002/03/01	
	52	Outbreak	2012/01/08	
	54	Occupational	2002/03/01	
	55	Medically at Risk	2012/01/08	
	99	Non Provincially Funded	2012/01/18	
	5	Outbreak Control	1923/01/01	
	17	Laboratory Workers	1923/01/01	
	20	Asplenia	1923/01/01	
	21	Medically At Risk	1923/01/01	
	35	Post Exposure	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
	97	Unknown	2002/03/01	
MENOTET	5	Outbreak Control	1923/01/01	
1401114	97	Unknown	2000/11/01	
MONM	97	Unknown	1998/06/30	
MR	97	Unknown	1999/12/31	
MU OMP	97	Unknown	2004/02/08	
	97	Unknown	2002/03/01	
OPV P	97 97	Unknown Unknown	1994/07/31 1997/06/30	
PNEU-C	50	Routine Recommended	2010/07/01	
PNEU-C		Immunization		
	55	Medically at Risk	2010/07/01	
	98	Research	2010/07/01	
	99	Non Provincially Funded	2010/07/01	
	21	Medically At Risk	1923/01/01	
	36	Universal Immunization Program	1923/01/01	
	48	Transplant Candidate/Recipient	1923/01/01	
	49	Transplant Candidate/Recipient	1923/01/01	
DNELL C40	97	Unknown	2010/07/01	
PNEU-C10	50	Routine Recommended Immunization	2008/12/11	
	55	Medically at Risk	2008/12/11	
	98	Research	2008/12/11	
	99	Non Provincially Funded	2008/12/11	
	97	Unknown	2008/12/11	

VACCINE CODE			END DATE	NOTES
VACCINE CODE	CODE	DESCRIPTION	for use of Reason with Vaccine Code	NOTES
POL	97	Unknown	1998/12/31	
PRPD	97	Unknown	1992/05/18	
RUB	97	Unknown	1998/10/01	
Sma	99	Non Provincially Funded	2015/01/01	
	97	Unknown	2015/06/01	
SNAKE	97	Unknown	2002/02/03	
TBEV	99	Non Provincially Funded	2014/03/03	
	97	Unknown	2014/03/03	
TdP	54	Occupational	2015/03/01	
	55	Medically at Risk	2015/03/01	
	57	High Risk	2015/03/01	
	97	Unknown	2015/03/01	
	99	Non Provincially Funded	2015/03/01	
TP	97	Unknown	1994/08/01	
TT	97	Unknown	2000/12/31	

Table 18 – Dosage Type Codes

CODE	DESCRIPTION	END DATE
CAP	Capsules	
ML	Milliliters	
PKG	Package	
UNIT	Units	
UNK	Unknown	
DROP	Drops	2015/12/01
GTTS	Drops	2015/12/01
IU	International Units	2015/12/01
MCG	Micrograms	2015/12/01
MG	Milligrams	2015/12/01

Table 19 - Manufacturer Codes

CODE	DESCRIPTION	END DATE
ABV	AbbVie Corporation	
AL	Abbott Laboratories	
AU	AstraZeneca/University of Oxford	
BAV	Bavarian Nordic	
BAX	Baxter	
ВВ	Bharat Biotech	
BGP	BGP Pharma ULC	
BIB	Beijing Bio-Institute of Biological Products	
BP	Berna Biotech	
CBS	Canadian Blood Services	
CGC	Cangene Corporation	
CHI	Chiron	
CRU	Crucell	
CS	CanSino Biologics Inc.	

CODE	DESCRIPTION	END DATE
CSL	CSL Limited	
EME	Emergent Biosolutions	
GRF	Grifols	
GSK	Glaxo-SmithKline	
IDB	ID Biomedical	
IIC	Institute of Immunology Inc. Croatia	
INB	Instituto Butantan	
JAN	Janssen/Johnson and Johnson	
KAM	Kamada Limited	
MGO	Medicago	
MF	Merck Frosst	
MOD	Moderna	
MYL	Mylan	
NB	Nuron Biotech	
NOV	Novartis	
NVA	Novavax	
PFZ	Pfizer	
РВ	Pfizer/BioNTech	
SG	Sanofi/GSK	
SAO	SAOL Therapeutics Research Limited	
SEQ	Seqirus	
SF	Sanofi Pasteur	
SII	Serum Institute of India	
SP	Solvay Pharma	
SVA	SinoVac	
TAL	Talecris	
VAL	Valneva	
VIN	ViNS Bioproducts Limited	
WA	Wyeth-Ayerst	
UNK	Unknown	
AP	Aventis Pasteur	2008/01/01
AZC	AstraZeneca	2021/05/01
ВА	Bayer	2008/01/01
ВС	Biochem Pharma Inc	2008/01/01
BIBP	Beijing Bio-Institute of Biological Products	1923/01/01
CON	Connaught	2008/01/01
NVX	Novavax	1923/01/01
SH	Shire Biologies	2008/01/01
SKB	SmithKline Beecham	2008/01/01

Table 20 – Delivery Organization of Service Codes

CODE	DESCRIPTION	END DATE
20	First Nations and Inuit Health Branch	
21	Chinook Regional Health Authority	

CODE	DESCRIPTION	END DATE
22	Palliser Health Region	
23	Calgary Health Region	
24	David Thompson Regional Health Authority	
25	East Central Health	
26	Capital Health	
27	Aspen Regional Health Authority	
28	Peace Country Health	
29	Northern Lights Health Region	
30	Pharmacies	
31	University of Alberta	
32	Atlas Immunization Services	
33	Workplace Health and Safety – AHS	
34	Workplace Health and Safety – Covenant Health	
35	University of Calgary	
36	Southern Alberta Institute of Technology	
37	International Paper Grande Prairie Health Department	
45	Fort McKay First Nation	
46	Alexis First Nation	
47	Beaver First Nation	
48	Lubicon Lake Nation	
49	Swan River First Nation	
50	Nunee Health Board Society	
51	Paul First Nation	
52	Dene Tha'- Chateh	
53	Driftpile First Nation	
56	Saddle Lake Cree Nation	
57	Sunchild First Nation	
58	Alexander First Nation	
59	Enoch Cree Nation	
60	Beaver Lake Cree Nation	
61	Little Red River Cree Nation - John D'or Prairie	
62	Little Red River Cree Nation - Fox Lake	
63	Little Red River Cree Nation - Garden River	
64	Duncan's First Nation	
65	Wesley First Nation-Bighorn	
66	Maskwacis Health Services	
67	Whitefish Lake First Nation - Atikameg	
68	Woodland Cree First Nation	
69	Loon River First Nation	
70	Tallcree First Nation	
71	Heart Lake First Nation	
72	Blood Tribe Department of Health	
73	Sturgeon Lake Cree Nation	
74	Sucker Creek First Nation	

CODE	DESCRIPTION	END DATE
75	Kapawe'no First Nation	
76	Dene Tha'- Bushe River	
77	Dene Tha'- Meander River	
78	O'Chiese First Nation	
79	Tsuu Tina Nation	
80	Whitefish Lake First Nation - Goodfish	
81	Aakom Kiyii Health Services - Piikani	
82	Bigstone Health Commission - Calling Lake	
83	Bigstone Health Commission - Bigstone	
84	Cold Lake First Nations	
85	Stoney Trail Wellness Centre - Eden Valley	
86	Morning Sky Health & Wellness Society - Frog Lake	
87	Kehewin Cree Nation	
88	Stoney Health Services - Morley	
89	Siksika Health Services	
90	OKAKI Community Clinic	
91	OKAKI Virtual Care Clinic	
99	Unknown	
100	Direct Form Submitter	
416	Connect Care	
01	Chinook Regional Health Authority	2004/01/01
02	Palliser Health Region	2004/01/01
03	Headwaters Health Authority	2004/01/01
04	Calgary Health Region	2004/01/01
05	Health Authority 5	2004/01/01
06	David Thompson Regional Health Authority	2004/01/01
07	East Central Regional Health Authority	2004/01/01
08	Westview Regional Health Authority	2004/01/01
09	Crossroads Regional Health Authority	2004/01/01
10	Capital Health Authority	2004/01/01
11	Aspen Regional Health Authority	2004/01/01
12	Lakeland Regional Health Authority	2004/01/01
13	Mistahia Regional Health Authority	2004/01/01
14	Peace Health Region	2004/01/01
15	Keeweetinok Lakes Regional Health Authority	2004/01/01
16	Northern Lights Regional Health Authority	2004/01/01
17	Northwestern Health Services Region	2004/01/01
54	Athabasca Chipewyan First Nation	1923/01/01
54 413	Calgary Zone	2019/01/01
54 413 417	Calgary Zone North Zone	2019/01/01 2019/01/01
54 413	Calgary Zone	2019/01/01

Table 21 – Delivery Management Site Codes

CODE	DESCRIPTION	END DATE
001	Fort McLeod	
002	Pincher Creek	
003	Crowsnest Pass	
004	Cardston	
005	Magrath	
006	Coaldale	
007	Taber	
008	Vauxhall	
009	Picture Butte	
010	Milk River	
011	Raymond	
012	Lethbridge	
013	Brooks	
014	Bow Island	
015	Medicine Hat	
016	Oyen/Empress	
017	High River	
018	Black Diamond	
019	Okotoks	
020	Vulcan	
021	Nanton	
022	Claresholm	
023	Canmore	
024	Banff	
025	North Hill CHC	
026	Thornhill CHC	
027	Northwest CHC	
028	8th & 8th Health Centre	
029	Communicable Disease	
030	East Edmonton CHC	
032	Acadia CHC	
033	South CHC	
034	Scarboro CHC	
035	Shaganappi CHC	
036	Village Square CHC	
037	Airdrie Regional CHC	
038	Cochrane CHC	
040	Drumheller	
041	Three Hills	
042	Strathmore	
043	Hanna	
044	Didsbury	
045	Red Deer Bremner CHC	

CODE	DESCRIPTION	END DATE
046	Innisfail	
047	Rocky Mountain House	
048	Lacombe	
049	Olds	
050	Eckville	
051	Ponoka	
052	Sylvan Lake	
053	Rimbey	
054	Elnora/Delburne	
055	Sundre	
056	Camrose HLTH	
057	Sedgewick HLTH	
058	Tofield HLTH	
059	Holden/Viking HLTH	
060	Vermilion HLTH	
061	Wainwright HLTH	
062	Kitscoty HLTH	
063	Provost HLTH	
064	Stettler HLTH	
065	Castor HLTH	
066	Coronation HLTH	
067	Consort HLTH	
068	Stony Plain (Westview HC)	
069	Hinton	
070	Edson	
071	Jasper Public Health	
072	Evansburg	
073	Devon	
074	Spruce Grove	
075	Wetaskiwin	
076	Winfield	
077	Drayton Valley	
078	Travellers	
079	Woodcroft	
081	Bonnie Doon	
082	West Jasper Place	
083	Twinbrooks	
084	Millwoods	
086	Northeast Community	
087	St. Albert	
089	Strathcona County	
090	Beaumont	
091	Thorsby	
092	Leduc	

CODE	DESCRIPTION	END DATE
093	Athabasca	
094	Calling Lake	
095	Whitecourt	
096	Fox Creek	
097	Swan Hills	
098	Morinville	
099	Smith	
100	Boyle	
101	Flatbush	
102	Barrhead	
103	Westlock	
104	Mayerthorpe	
105	Onoway	
106	Redwater	
107	Fort Saskatchewan	
108	Lac La Biche	
109	St. Paul	
110	Smoky Lake	
111	Bonnyville	
112	Elk Point	
113	Cold Lake	
114	Lamont	
115	Two Hills	
116	Vegreville	
117	Grande Prairie	
118	Beaverlodge	
119	Spirit River	
120	Valleyview	
121	Fairview	
122	Worsley	
123	Grande Cache	
124	Grimshaw	
125	Peace River	
126	McLennan	
127	Manning	
128	Cadotte Lake	
129	High Prairie	
130	Kinuso	
131	Slave Lake	
132	Wabasca	
133	Gift Lake	
134	Northern Communities	
135	Fort McMurray	
136	Anzac	

CODE	DESCRIPTION	END DATE
137	Conklin	
138	Ft. McKay	
139	High Level Public Health	
140	LaCrete	
141	Fort Vermilion	
142	Rainbow Lake	
143	Paddle Prairie	
144	Gibbons	
145	Thorhild	
146	Mannville	
147	Elizabeth	
148	Fishing Lake	
149	Kikino	
150	Buffalo Lake	
151	Red Deer 49 Street Community Health Centre	
152	Occupational Health and Safety	
153	Lloydminster	
154	Boyle McCauley	
155	STD Clinic Edmonton	
156	Birth Control Clinic Edmonton	
157	IBU (Immunization Business Unit) Edmonton	
158	TB Clinic Edmonton	
159	McLennan Public Health (Sacred Heart CHC)	
160	Travellers - St Albert	
161	Travellers - Strathcona	
162	New Canadian Clinic	
163	Red Deer Johnstone Crossing CHC	
164	South Urgent Care Health Centre	
165	Sheldon M Chumir Urgent Care Health Centre	
166	Community Outreach	
167	Clinical Trial	
168	Northgate Health Centre	
169	Rutherford Health Centre	
170	East Calgary CHC	
171	Westend Seniors Activity Centre	
172	Jewish Community Centre	
173	CDI College South Campus	
174	Grandin Park Plaza - St Albert	
175	Westmount Shopping Centre	
176	Millborne Market Mall	
177	Avenida Village	
178	Brentwood Village Mall	
179	EMS Whitehorn, North Side Entrance	
180	Richmond Road Diagnostic Treatment Centre	

CODE	DESCRIPTION	END DATE
181	Stampede Park	
182	Bonnie Doon Shopping Centre	
183	Airdrie Urgent Care	
184	Cochrane Urgent Care	
185	Okotoks Urgent Care	
186	Calgary International Travel Clinic	
187	Vaccine Depot Edmonton	
188	Chinook Regional Hospital	
189	University of Alberta Clinic	
190	Chestermere CHC	
191	SMCHC	
192	Red Earth Creek	
193	Peerless/Trout Lake	
194	Atlas Travel Clinic	
195	Workplace Health and Safety – AHS	
196	Workplace Health and Safety – Covenant Health	
197	Calgary Southport	
198	Telus Convention Centre	
199	Expo Centre	
200	Acute Care Calgary Zone	
201	Acute Care Edmonton Zone	
202	Acute Care Central Zone East	
203	Acute Care Central Zone West	
204	Acute Care North Zone Aspen	
205	Acute Care North Zone Northern Lights	
206	Acute Care North Zone Peace	
207	Deerfoot North	
301	Winters Pharmacy (Drayton Valley)	
302	Safeway 8844 Dalhousie Station (Calgary)	
303	Safeway 8906 Windermere (Edmonton)	
304	Safeway 2243 Thorncliffe (Calgary)	
306	Winters Pharmacy North (Drayton Valley)	
307	University of Alberta Pharmacy	
308	Safeway 8898 Bonnie Doon (Edmonton)	
309	Pharmasave 367 Heritage Pointe (De Winton)	
310	Sobeys 1129 Royal Oak (Calgary)	
311	Sobeys 5191 Nolan Hill (Calgary)	
312	Safeway 8903 Aspen (Calgary)	
313	Sobeys 3194 Lewis Estates (Edmonton)	
314	Sobeys 3143 Millwoods (Edmonton)	
315	Sobeys 1110 Tuscany (Calgary)	
316	Rita's Apothecary and Home Healthcare (Barrhead)	
317	Polaris Travel Clinic and Pharmacy (Airdrie)	
318	Safeway 8857 (Leduc)	

CODE	DESCRIPTION	END DATE
319	Sobeys 5190 (Walker)	
320	Safeway 8863 (St. Albert)	
321	Safeway 8830 (Airdrie)	
322	Safeway 8897 (Spruce Grove)	
323	Safeway 8886 Callingwood (Edmonton)	
324	Safeway 8912 Garrison Woods (Calgary)	
325	Safeway 8877 (Red Deer)	
326	Safeway 8894 (Fort Saskatchewan)	
327	Safeway 8885 (Stoney Plain)	
328	Safeway 8842 (Glenmore Landing)	
329	Discovery Ridge Compounding Pharmacy Travel Clinic	
330	Safeway 8833 Crowfoot (Calgary)	
331	Two Pharmacy (Cochrane)	
332	University of Calgary Staff Wellness	
333	Medicine Shoppe 365 Sherwood Park	
350	Safeway 8841 South Centre	
351	University of Calgary Staff Wellness Health Sciences	
352	Safeway 8924 Sherwood Park Mall	
353	SAIT Health Services	
354	International Paper Grande Prairie	
355	AHS Calgary Zone	
356	AHS Edmonton Zone	
357	AHS North Zone	
358	AHS South Zone	
359	AHS Central Zone	
360	South Calgary Health Centre	
361	South Park Center (Leased)	
362	Brooks Health Centre Hospital	
363	Cardston Health Centre Hospital	
364	Fort McMurray Wolverine Community Health Centre	
365	Medicine Hat Regional Hospital	
366	North Gate Village Mall	
367	Oyen Big Country Hospital	
368	Pincher Creek Health Centre Hospital	
369	Skyview Power Center	
370	Taber Health Centre Hospital	
371	Wainwright COVID Testing Site	
372	Medicine Place	
373	Bow trail	
374	Macleod South	
375	Safeway 8803 Northgate	
376	Safeway 8816 Market Mall	
377	Safeway 8879 Manning Crossing	
378	Safeway 8891 Westmount Centre	

CODE	DESCRIPTION	END DATE
379	Safeway 8892 Northgate Centre	
380	Safeway 8904 Southgate	
381	Safeway 8905 Jasper Gates	
382	Safeway 8913 North Hill Centre	
383	Safeway 8916 Montgomery	
384	Safeway 8928 Abbotsfield Mall	
385	Edmonton West Centre	
386	Genesis Centre	
387	Guardian Drugs Medicine Chest	
388	Safeway 8989 South Trail	
389	Carebridge RemedyRx	
390	Wabamun Pharmacy	
391	Health Net Pharmacy	
392	Medicine Shoppe 170	
393	Medicine Shoppe 225	
394	Londondale Guardian Pharmacy	
395	Medicine Shoppe 398	
396	Elixir Pharmacy	
397	Excel Health Pharmacy	
398	Wembley RemedyRx	
399	Nolan Drugs	
400	Medicine Place 1	
401	Medicine Place 3	
402	Glenbrook Pharmacy (Edmonton)	
403	Tofield Pharmacy	
404	Guardian Pharmacy Tofield	
405	ARx Pharmacy and Homecare	
406	Co-op Pharmacy Trader Ridge (Grande Prairie)	
407	Co-op Pharmacy Downtown (Grande Prairie)	
408	MaKami College Inc. (Calgary)	
409	(APL) Alberta Precision Lab	
410	FreshCo Pharmacy 4303	
856	Fort McKay Health Centre	
857	Alexis Health Services	
858	Beaver First Nation Health Centre	
859	Lubicon Lake Health Centre	
860	Swan River Health Centre	
862	Chateh Health Centre	
863	Maggie Willier Wellness - Driftpile	
864	Fort Chipewyan Health & Wellness Centre	
865	Paul Band Health Centre	
866	Saddle Lake Health Care Centre	
867	Sunchild Health Centre	
868	Alexander Health Services	

CODE	DESCRIPTION	END DATE
869	Enoch Health Services	
870	Beaver Lake Health Services	
871	John D'or Prairie Health Centre	
872	Fox Lake Nursing Station	
873	Garden River Health Centre	
874	Duncan's FN Health Centre	
875	Kiska Waptin Health Centre - Bighorn	
876	Maskwacis Health Services	
877	Atikameg Health Centre	
878	Woodland Cree Health Centre	
879	Loon River Health Centre	
880	Tallcree Health Services	
881	Heart Lake Health Centre	
882	Blood Tribe Department of Health	
883	Sturgeon Lake Heath Centre	
884	Sucker Creek Health Centre	
885	Kapawe'no First Nation Health Centre	
886	Four Chiefs Complex - Bushe River	
887	Meander River Health Centre	
888	O'Chiese Health Centre	
889	Tsuu Tina Health and Wellness Centre	
890	Goodfish Lake Health Centre	
891	Aakom Kiyii Health Services - Piikani	
892	Calling Lake Health Centre	
893	Bigstone Health Centre	
894	Cold Lake First Nations Health Centre	
895	Stoney Trail Wellness Centre - Eden Valley	
896	Morning Sky Health and Wellness Centre - Frog Lake	
897	Kehewin Health Services	
898	Stoney Health Services - Morley	
899	Siksika Health & Wellness Centre	
900	Not Administered at Submitting Facility	
901	OKAKI Community Clinic	
902	AFCC	
903	Siksika Rural	
904	Siksika Drive Thru	
905	OKAKI Virtual Care Clinic	
906	OKAKI Walk-In	
907	Montana Integrated Human and Health Services	
995	Administered outside of AHS Public Health	
996	Rapid Response	
997	Non AHS Immunizers	
998	Unknown	
999	Flu Campaign - Calgary	

CODE	DESCRIPTION	END DATE
9997	First Nations and Inuit Health Branch	
99009	Direct Form Immunizers	
031	Forest Lawn CHC	2010/05/22
039	Millican Ogden Sub Office	2007/12/01
080	Eastwood	2010/01/28
085	Castledowns	2009/04/23
088	North Central	2009/04/23
300	Shoppers 2413 Evergreen Village (Calgary)	1923/01/01
305	Shoppers 2335 Sunpark (Calgary)	1923/01/01
334	EDM Royal Alexandra Hospital - Pharmacy	2020/11/30
335	EDM WMC Kaye Edmonton Clinic – 3A Medical Clinic	2020/11/30
336	EDM Edmonton General Continuing Care Centre – NARP	2020/11/30
337	EDM RAH Community Services Centre – HIV	2020/11/30
338	EDM WMC Stollery Children's Hospital	1923/01/01
339	EDM RAH Community Services Centre – NARP	2020/11/30
340	EDM WMC Health Sciences Centre – NARP Unit 5C2	2020/11/30
341	EDM WMC Health Sciences Centre - NARP Unit 5B1	2020/11/30
342	STO Westview Health Centre - Pharmacy	2020/11/30
343	EDM Alberta Hospital Edmonton - Pharmacy	2020/11/30
344	STA Sturgeon Community Hospital - Pharmacy	2020/11/30
345	EDM WMC Health Sciences Centre - Pharmacy	2020/11/30
346	EDM Lynnwood Family Medicine Clinic	2020/11/30
347	EDM RAH Anderson Hall- Indigenous Wellness Clinic	2020/11/30
348	EDM WMC Stollery Children's Hospital-Pediatric Clinical Investigation Unit-Pharmacy	2020/11/30
349	EDM WMC Kaye Edmonton Clinic - Research Pharmacy	2020/11/30
861	Nunee Health and Wellness Centre	1923/01/01

Table 22 - Delivery Continent Codes

CODE	DESCRIPTION
AFR	Africa
AS	Asia
EUR	Europe
NA	North America (including Central America and Caribbean)
ОС	Oceania (including Australia)
SA	South America

Table 23 - Grade Codes

CODE	DESCRIPTION
01	Grade 1
02	Grade 2
03	Grade 3
04	Grade 4
05	Grade 5

CODE	DESCRIPTION
06	Grade 6
07	Grade 7
08	Grade 8
09	Grade 9
10	Grade 10
11	Grade 11
12	Grade 12
13	Grade 13
EC	Early Childhood
HS	Home School
NG	Not Graded
PK	Pre-Kindergarten Pre-Kindergarten

Table 24 – Flag Removal Codes (Comment)

Yes = this flag can be removed or overridden if the flag removal code is used No = this flag cannot be removed or overridden if the flag removal code is used

CODE	COMMENT	VALID DEMOGRAPHIC	VALID DOSE	EFFECTIVE FLAG	END DATE
13	Invalid Dose – MOH determined that the dose is an invalid dose and should be repeated	No	Yes	No	
14	Invalid Error/System Fix	Yes	Yes	No	
17	Vaccine Shortage	Yes	Yes	No	
18	RHA Data Fix	Yes	Yes	No	
20	Valid Dose – MOH determined that the dose is a valid dose and does not need to be repeated	No	Yes	Yes	
21	Valid Demographic	Yes	No	No	
22	Invalid Dose, Valid Demographic	Yes	Yes	No	
23	Valid Dose, Valid Demographic	Yes	Yes	Yes	
1	MOH or Designate Override – Vaccine schedule/type has been approved or recommended by the MOH or his/her designate, considering extenuating factors such as: history of adverse reaction, or unusual exposure situations	No	No	No	2009/09/17
2	Contact with Disease/Outbreak Situation – Vaccine given early due to high number of disease reports in area where client is living, usually declared necessary by MOH	No	No	No	2009/09/17
3	Parent Request of Specific Vaccine – Vaccine type is not the appropriate choice but is the one accepted and requested by the parents (e.g., DTP given as parents refuse Pertussis vaccine)	No	No	No	2009/09/17
4	Repeat Series Due to Immunosuppression – Received documentation of medical protocol (eg., stem cell, splenectomy, cancer)	No	No	No	2009/09/17
5	Travel Purposes – When vaccine is given out of schedule due to travel, either to High Risk area for actual disease or, when extensive travel will occur at time of next regularly scheduled dose	No	No	No	2009/09/17
6	Previous Dose(s) Insufficient Amount or Ineffective – When partial dose has already been given, previous schedule (possibly from another country), inadequate for Canadian standards; dose repeat due to ineffectiveness of previous dose	No	No	No	2009/09/17
7	Catch Up Immunization(s) ⁽¹⁾ – When infants and children have missed scheduled vaccine doses, or started late, a catch-up schedule should be commenced	No	No	No	2009/09/17
8	Required for Educational/Mission Program – Given to satisfy requirements of an outside agency who will not accept client into program or country without documented proof of vaccine administration	No	No	No	2009/09/17
9	Dose Believed to be Final in Series or a Reinforcing One – Verbal history from client/parent indicates all previous immunizations up to date, no written record available	No	No	No	2009/09/17
10	Cold Chain Break or Vaccine Recall – Vaccine affected by a known Cold Chain Break or Vaccine Recall; reimmunization necessary	No	No	No	2009/09/17
11	Accelerated Schedule – When a vaccine is given on an accepted accelerated schedule	No	No	No	2009/09/17
12	PHO Override	No	No	No	2009/09/17
15	Client Refusal	No	No	No	2009/09/17
16	FLU	No	No	No	2009/09/17
19	Out of Region	No	No	No	2009/09/07

¹ Australian Immunisation Handbook, 8th Ed. 2003

Table 25 – Antigen Codes

ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE	NOTES
ANTH	Anthrax		
BA	Botulism Antitoxin		
BAIG	Botulism Antitoxin Immune Globulin		
BCG	Bacillus Calmette Guerin (TB)		
СН	Cholera		
COVID-19-1	Novel Coronavirus 2019		
COVID-19-2	Novel Coronavirus 2019		
COVID-19-3	Novel Coronavirus 2019		
COVID-19-4	Novel Coronavirus 2019		
COVID-19-5	Novel Coronavirus 2019		
COVID-19-6	Novel Coronavirus 2019		
COVID-19-7	Novel Coronavirus 2019		
COVID-19-8	Novel Coronavirus 2019		
COVID-19-9	Novel Coronavirus 2019		
COVID19-10	Novel Coronavirus 2019		
COVID-19-11	Novel Coronavirus 2019		
COVID19-12	Novel Coronavirus 2019		
COVID-19-13	Novel Coronavirus 2019		
COVID-19-14	Novel Coronavirus 2019		
COVID-19-15	Novel Coronavirus 2019		
COVID-19-16	Novel Coronavirus 2019		
D	Diphtheria Toxoid		
DA	Diphtheria Antitoxin		
ECOLI	Ecoli		
FLU	Influenza		
HAV	Hepatitis A		
HBIG	Hepatitis B Immune Globulin		
HBV	Hepatitis B		
Hib	Haemophilus Influenza type b		
HPV	Human Pappilomavirus		
HZ	Herpes Zoster		
IG	Immune Globulin (human intramuscular)		
JEV	Japanese Encephalitis Virus		
MEA	Measles		
MENING	Meningococcal		
MENING-C	Meningococcal Conjugate		
MENING-B	Meningococcal Recombinant		
MU	Mumps		
Р	Pertussis		
PNEUMO-C	Pneumococcal (conjugate)		
PNEUMO-P	Pneumococcal (polysaccharide – 23)		
POL	Polio		Combination antigen code used only for mixed OPV/IPV records to assess dose count

ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE	NOTES
PPD	Purified Protein Derivative 5TU-TB Test		
RAB	Rabies		
RIG	Rabies Immune Globulin		
ROT	Rotavirus		
RSV	Respiratory Syncytial Virus		
RUB	Rubella		
SMA-1	Monkeypox and Smallpox		
Т	Tetanus Toxoid		
TIG	Tetanus Immune Globulin		
TY	Typhoid		
VZ	Varicella Zoster		
VZIG	Varicella Zoster Immune Globulin		
YF	Yellow Fever		
аР	Acellular Pertussis	2008/09/30	
COVID-19-10	Novel Coronavirus 2019	1923/01/01	
COVID-19-12	Novel Coronavirus 2019	1923/01/01	
DD	Diphtheria Toxoid (fluid-diluted)	2008/09/30	
DRT	Diphtheria Reaction Test	1996/01/01	
HBVD	Hepatitis B for Dialysis	2008/03/05	
IPV	Polio (inactivated)	2008/09/30	
KMEA	Killed red measles	1970/12/31	
LYM	Lymerix	2002/07/30	
MENING-ACYW	Meningococcal Conjugate Quadravalent	1923/01/01	
OPV	Polio (oral)	2008/09/30	
PFLU	Pandemic Influenza	2010/10/01	
SMA	Smallpox	2015/06/01	
SNAKE	Snakebite antivenin	2002/02/03	
TBEV	Tick-Borne Encephalitis Virus	2014/03/03	

Table 26 – Vaccine-Antigen Associations

Note: All reported vaccine and antigen codes must conform to the capitalization convention.

VACCINE CODE	ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE for use of antigen with Vaccine Code	NOTES
Anth	ANTH	Anthrax		
aP	Р	Acellular Pertussis	2008/09/30	
BA	BA	Botulism Antitoxin		
BA-7	BA	Botulism Antitoxin		
BAIg	BAIG	Botulism Antitoxin Immune Globulin		
BCG	BCG	Bacillus Calmette Guerin (TB)		
CH	СН	Cholera		
CHI	СН	Cholera		
CHO	СН	Cholera		
Chol-Ecol-O	СН	Cholera		
	ECOLI	Ecoli		
COVPBmRNA	COVID-19-1	Novel Coronavirus 2019		
COVMODmRNA	COVID-19-2	Novel Coronavirus 2019		
COVNVASub	COVID-19-3	Novel Coronavirus 2019		
COVAUVec - AZ	COVID-19-5	Novel Coronavirus 2019		
COVJANVec	COVID-19-6	Novel Coronavirus 2019		
COVMGOVLP	COVID-19-7	Novel Coronavirus 2019		
COVSIIVec	COVID-19-8	Novel Coronavirus 2019		
COVBIBPVer	COVID-19-9	Novel Coronavirus 2019		
COVSVACVer	COVID19-10	Novel Coronavirus 2019		
COVPB5y-11ymRNA	COVID-19-11	Novel Coronavirus 2019		
COVAXIN	COVID19-12	Novel Coronavirus 2019		
COVCVASub	COVID-19-13	Novel Coronavirus 2019		
COVPB6m-4ymRNA	COVID-19-14	Novel Coronavirus 2019		
COVMOD6m-5ymRNA	COVID-19-15	Novel Coronavirus 2019		
D	D	Diphtheria Toxoid		
DA	DA	Diphtheria Antitoxin		
DD	D	Diphtheria Toxoid (fluid-diluted)		No longer available for historical documentation as of 2011/05/01
DPT	D	Diphtheria Toxoid		
	Р	Pertussis		
	Т	Tetanus Toxoid		
DPTP	D	Diphtheria Toxoid		
	Р	Pertussis		
	Т	Tetanus Toxoid		
	POL	Polio (inactivated)		
DPTPHib	D	Diphtheria Toxoid		
	Р	Pertussis		
	Т	Tetanus Toxoid		
	POL	Polio (inactivated)		
	Hib	Haemophilus Influenza type b		

VACCINE CODE	ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE for use of antigen with Vaccine Code	NOTES
DRT	DRT	Diphtheria Reaction Test		
DT	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
DTaP	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
dTap	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
dTap-IPV	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
	POL	Polio (inactivated)		
DTaP-HB-IPV	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
	HBV	Hepatitis B		
	POL	Polio (inactivated)		
DTaP-IPV	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
	POL	Polio (inactivated)		
DTaP-IPV-Hib	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
	POL	Polio (inactivated)		
	Hib	Haemophilus Influenza type b		
DTaP-IPV-Hib-HB	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Acellular Pertussis		
	POL	Polio (inactivated)		
	Hib	Haemophilus Influenza type b		
	HBV	Hepatitis B		
DT-IPV	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	POL	Polio (inactivated)		
DTwP-Hib-HB	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Pertussis		
	Hib	Haemophilus Influenza type b		
	HBV	Hepatitis B		
DTwP-IPV-Hib	D	Diphtheria Toxoid		
	Т	Tetanus Toxoid		
	Р	Pertussis		
	POL	Polio (inactivated)		
	Hib	Haemophilus Influenza type b		

VACCINE CODE	ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE for use of antigen with Vaccine Code	NOTES
EZM	MEA	Measles		No longer available for historical documentation as of 2011/05/01
FLU	FLU	Influenza		
FLU-HD	FLU	Influenza		
HABV	HAV	Hepatitis A		
	HBV	Hepatitis B		
HA-Typh-I	HAV	Hepatitis A		
	TY	Typhoid		
HAV	HAV	Hepatitis A		
HBIG	HBIG	Hepatitis B Immune Globulin		
HBTmf	HBV	Hepatitis B		No longer available for historical documentation as of 2011/05/01
HBV	HBV	Hepatitis B		
HBVD	HBV	Hepatitis B		
HbOC	Hib	Haemophilus Influenza type b		No longer available for historical documentation as of 2011/05/01
Hib	Hib	Haemophilus Influenza type b		
Hib-MenC	Hib	Haemophilus Influenza type b		
	MENING-C	Meningococcal Conjugate		
HPV	HPV	Human Papillomavirus		
HPV-2	HPV	Human Papillomavirus		
HPV-9	HPV	Human Papillomavirus		
HPV-U	HPV	Human Papillomavirus		
H1N1-09-AD	PFLU	Pandemic Influenza		
H1N1-09	PFLU	Pandemic Influenza		
IG	IG	Immune Globulin (human intramuscular)		
IPV	POL	Polio (inactivated)		
JEV	JEV	Japanese Encephalitis Virus		
KMEA	KMEA	Killed red measles		
Lym	LYM	Lymerix		
MEA	MEA	Measles		
MenACs	MENING	Meningococcal		No longer available for historical documentation as of 2011/05/01
MenC-ACYW	MENING-C	Meningococcal Conjugate		
	MENING_ACW	Meningococcal Conjugate Quadravalent	1923/01/01	
Men-B	MENING-B	Meningococcal Recombinant		
MenB-FHbp	MENING-B	Meningococcal Recombinant		
MenB-U	MENING-B	Meningococcal Recombinant		
MenconC	MENING-C	Meningococcal Conjugate		
MeninAC	MENING	Meningococcal		
MENING	MENING	Meningococcal		
MENING-C	MENING-C	Meningococcal Conjugate		
MENING-P	MENING	Meningococcal		
MENOTET	MENING	Meningococcal		No longer available for historical documentation as of 2011/05/01

VACCINE CODE	ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE for use of antigen with Vaccine Code	NOTES
MMR	MEA	Measles		
	MU	Mumps		
	RUB	Rubella		
MMR-Var	MEA	Measles		
	MU	Mumps		
	RUB	Rubella		
	VZ	Varicella Zoster		
MONM	MEA	Measles		No longer available for historical documentation as of 2011/05/01
MR	MEA	Measles		
	RUB	Rubella		
MU	MU	Mumps		
OMP	Hib	Haemophilus Influenza type b		No longer available for historical documentation as of 2011/05/01
OPV	POL	Polio (oral)		
Р	Р	Pertussis (whole cell)		
POL	POL	Polio		Combination antigen code used only for mixed OPV/IPV records to assess dose count
PPD	PPD	Purified Protein Derivative 5TU–TB Test		
PNEU-C	PNEUMO-C	Pneumococcal (conjugate)		
PNEU-CON	PNEUMO-C	Pneumococcal (conjugate)		
PNEU-C10	PNEUMO-C	Pneumococcal (conjugate)		
PNEU-C13	PNEUMO-C	Pneumococcal (conjugate)		
PNEU-C15	PNEUMO-C	Pneumococcal (conjugate)		
PNEU-C20	PNEUMO-C	Pneumococcal (conjugate)		
PNEUMO-P	PNEUMO-P	Pneumococcal (polysaccharide 23)		
PRPD	Hib	Haemophilus Influenza type b		No longer available for historical documentation as of 2011/05/01
RAB	RAB	Rabies		
RIG	RIG	Rabies Immune Globulin		
Rot	ROT	Rotavirus		
Rot-5	ROT	Rotavirus		
Rot-U	ROT	Rotavirus		
RSVIg	RSV	Respiratory Syncytial Virus		
RUB	RUB	Rubella		
SMAMONV	SMA-1	Monkeypox and Smallpox		
Sma	SMA	Smallpox		
SNAKE	SNAKE	Snakebite antivenin	2002/02/03	
TBEV	TBEV	Tick-Borne Encephalitis Virus		
Td	Т	Tetanus Toxoid		
	D	Diphtheria Toxoid		
TdP	Т	Tetanus Toxoid		
	D	Diphtheria Toxoid		
	POL	Polio (inactivated)		

VACCINE CODE	ANTIGEN CODE	ANTIGEN DESCRIPTION	END DATE for use of antigen with Vaccine Code	NOTES
Td-IPV	Т	Tetanus Toxoid		
	D	Diphtheria Toxoid		
	POL	Polio (inactivated)		
TIG	TIG	Tetanus Immune Globulin		
TP	Т	Tetanus Toxoid		
	POL	Polio (inactivated)		
TT	Т	Tetanus Toxoid		
TYO	TY	Typhoid		
TY	TY	Typhoid		
TYVI	TY	Typhoid		
Var-S	VZ	Varicella Zoster		
	HZ	Herpes Zoster	1923/01/01	
Var-SU	HZ	Herpes Zoster		
Var-SI	HZ	Herpes Zoster		
VZ	VZ	Varicella Zoster		
VZU	VZ	Varicella Zoster		
VZIG	VZIG	Varicella Zoster Immune Globulin		
YF	YF	Yellow Fever		

Table 27 – Reason Not Immunized Codes

CODE	DESCRIPTION	END DATE	
AR	Adverse Reaction – Previous		
CF	Consent Form Not Returned		
DEF	Deferred		
HD	History of Disease		
NR	Not Recommended		
REF	Refusal		
SC	Series Complete (Alternate Schedule)		
UNK	Unknown		
VNA	Vaccine Not Available		
MC	Medical Contraindication	2009/09/17	
NS	No Show/Cancellation (reason other than illness)	2009/09/17	
OTH	Other	2009/09/17	
PE	Philosophical Exemption (against immunization for reasons other than religious)	2009/09/17	
PS	Positive Serology	2009/09/17	
PVR	Previous Vaccine Recipient	2009/09/17	
REL	Religious Objection	2009/09/17	
RSP	Receiving Services Out of Province 2009/09,		
RSR	Receiving Services Out of Region	2009/09/17	
TI	Temporary Illness Deferring Immunization 2009/09/17		
UC	Unable to Contact (preschool)	2009/09/17	

Table 28 - Program Validation Rules by Vaccine Code

Definitions for Age and Month Calculations

- Age: Age is calculated using date of birth. For example if the rule states "less than or equal to six years", the child's age is six years until the day of their seventh birthday.
- Month: Month in program validation rules is defined as 28 days for immunization administration purposes.

VACCINE CODE	NAME/DESCRIPTION	PROGRAM VALIDATION RULE(S)	
COVMODmRNA	COVID-19 mRNA 1273 - mRNA	Date of Immunization (DOI) for dose 2 minus DOI for dose 1 must be greater than or equal to 21 days	
COVPBmRNA	COVID-19 BNT162b2 - mRNA	DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 19 days	
DTaP-IPV-Hib	Diphtheria/Tetanus/Acellular Pertussis/IPV/Hib	Age must be greater than or equal to 42 days and less than 7 years	
DTaP-IPV-Hib-HB	Diphtheria/Tetanus/ Acellular Pertussis/ IPV/Hib-Hepatitis B	Age must be greater than or equal to 42 days and less than 2 years	
FLU	Influenza	If Age is greater than or equal to 6 months and less 9 years, DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days	
нв∨	Hepatitis B	 If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 3 minus DOI for dose 2 must be greater than or equal to 56 days If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 3 minus DOI for dose 1 must be greater than or equal to 4 months (112 days) If Age is greater than or equal to 10 years of age and Age is less than or equal to 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 6 months (168 days) 	
HPV-9	Human Papillomavirus- Nonavalent	 If Age is greater than or equal to 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days If Age is greater than or equal to 15 years of age DOI for dose 3 minus DOI for dose 2 must be greater than or equal to 3 months (84 days) If Age is greater than or equal to 15 years of age DOI for dose 3 minus DOI for dose 1 must be greater than or equal to 6 months (168 days) If Age is less than or equal to 14 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 6 months (168 days) 	
IPV	Inactivated Polio	Age must be greater than or equal to 42 days	
MenconC	Meningococcal, conjugate, monovalent (C)	 DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days DOI for dose 3 minus DOI for dose 2 must be greater than or equal to 28 days Age at immunization for dose 3 must be greater than or equal to 1 year 	
MenC-ACYW	Meningococcal, polysaccharide, (A, C, Y, W-135	 Age must be greater than or equal to 42 days If Reason Code is equal to 66 (Other risk) age must be greater than or equal to 8 weeks 56 days) 	
MMR	Measles/Mumps/Rubella	 DOI for MMR minus DOI for the most recent IG immunization must be greater than or equal to 11 months (308 days) DOI for MMR minus DOI for the most recent MMR-Var immunization must be greater than or equal to 28 days 	
MMR-Var	MMR and Varicella	DOI for MMR-Var minus DOI for the most recent IG immunization must be greater than or equal to 11 months (308 days) DOI for MMR-Var minus DOI for the most recent MMR immunization must be greater than or equal to 28 days	
PPD	Purified Protein Derivative 5TU (Mantoux – TB Test)	PPD must be administered same day or greater than or equal to 28 days as most recent MMR, MMR-Var, YF or VZ	
VZ	Varicella Zoster	 DOI for VZ minus DOI for the most recent IG immunization must be greater than or equal 11 months (308 days) If Age is greater than or equal to 13 years, DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days 	

Table 29 – Program Validation Rules by Antigen Code

ANTIGEN CODE	NAME/DESCRIPTION	PROGRAM VALIDATION RULE(S)
FLU	Influenza	 Age must be greater than or equal to 6 months If Age is greater than or equal to 6 months and less than 9 years, DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days
HBV	Hepatitis B	 If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 3 minus DOI for dose 2 must be greater than or equal to 56 days If Age is less than 10 years OR Age is greater than 15 years of age DOI for dose 3 minus DOI for dose 1 must be greater than or equal to 4 months (112 days) DOI for dose 3 minus DOB must be greater than or equal to 6 months (168 days) If Age is greater than or equal to 10 years and Age is less or equal to 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 6 months (168 days)
HPV	Human Papillomavirus	 Age must be greater than or equal to 9 years If Age is greater than or equal to 15 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days If Age is greater than or equal to 15 years of age DOI for dose 3 minus DOI for dose 2 must be greater than or equal to 3 months (84 days) If Age is greater than or equal to 15 years of age DOI for dose 3 minus DOI for dose 1 must be greater than or equal to 6 months (168 days) If Age is less than or equal to 14 years of age DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 6 months (168 days)
MU	Mumps	DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days
RUB	Rubella	DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days
VZ	Varicella Zoster	DOI for dose 2 minus DOI for dose 1 must be greater than or equal to 28 days

Document Revisions

VERSION	DATE	SECTION	SUMMARY OF CHANGES
7.1.1	July 20, 2022		Standard Code Tables separated from DSG and placed into this document