**DELAWARE COUNTY HEALTH DEPARTMENT**

**ADULT TRAVEL IMMUNIZATIONS**

**PRICE LIST EFFECTIVE JANUARY 24, 2025**

**FLU $ 41.00**

**HEPATITIS A $ 93.00**

**HEPATITIS B $ 69.00**

**HPV9 $ 308.00**

**IPV $ 61.00**

**JAPANESE ENCEPHALITIS – SERIES OF 2, COST x 2 $ 393.00**

**MMR $ 114.00**

**MCV4 $ 134.00**

**MEN B (BEXSERO) $ 196.00**

**MEN B (TRUMENBA) $ 178.00**

**PCV 20**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**$ 274.00**

**RABIES - SERIES OF 3, COST X 3 $ 422.00**

**RSV (ABRYSVO) ADULT** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**$ 304.00**

**RSV** **(BEYFORTUS) CHILD 50mg or 100mg** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**$ 650.00**

**SHINGRIX** \_\_\_\_\_\_\_\_\_\_\_\_  **$ 215.00**

**TDAP ­ $ 58.00**

**TWINRIX (HEP A & HEP B) $ 125.00**

**TYPHOID $ 162.00**

**VARICELLA $ 203.00**

**YELLOW FEVER (RX REQUIRED- STATING PT IS NOT IMMUNOCOMPROMISED) $ 220.00**

**IMMUNIZATIONS DONE BY APPOINTMENT ONLY**

**CALL (765) 587-0670 TO SCHEDULE AN APPOINTMENT**

**CURRENTLY OUT OF STOCK**