

Date: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Ext: \_\_\_\_\_ Facility Fax #: \_\_\_\_\_

Facility Contact: \_\_\_\_\_ # of Fridges: \_\_\_\_\_ Type:  Bar  Domestic  Purpose Built

- Place order by **Wednesday 3 pm** for pick up the following **Wednesday morning**.
- Orders must include the **previous 4 weeks of temperature log**.
- Coolers must be between 2 - 8 °C for vaccine to be released.
- Vaccine order inquiries: 705-721-7520 ext. 8808.

**STUDENTS CURRENTLY IN GRADE 7 AND GRADE 8 WILL BE OFFERED SCHOOL VACCINES IN SCHOOL DURING THE 2023/2024 SCHOOL YEAR, THEREFORE VACCINES WILL NOT BE RELEASED FOR ANY STUDENT BORN IN 2010 OR 2011 EXCEPT FOR A SPECIAL CIRCUMSTANCE (SUCH AS HOME-SCHOOLED OR NEEDLE PHOBIA/ANXIETY)**

Refer to the Publicly Funded Immunization Schedules for Ontario (June 2022) for number of eligible doses and intervals between doses (product specific tables noted below).

**Student Name:** \_\_\_\_\_ **DOB (yyyy-mm-dd):** \_\_\_\_\_

Vaccine Name	Product / Description	Dose # in Series Requested	Ordering Criteria
<b>Recombivax HB® / Engerix-B®</b>	Hepatitis B	Dose: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3  <i>See Table 6 for 2 dose HB schedule (11-15 years):</i> 1.0 mL x 2 doses  <i>See Table 7 for 3 dose HB schedule (16-19 years):</i> 0.5 mL x 3 doses	Previous dose(s) given: _____ _____  <input type="checkbox"/> 2009 <input type="checkbox"/> 2008 <input type="checkbox"/> 2007 <input type="checkbox"/> 2006* <input type="checkbox"/> 2005*  <i>* must complete series by August 31, 2024</i>
	<input type="checkbox"/> Latex allergy		
<b>Gardasil®9</b>	HPV	Dose: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3  <i>See Table 10 for 2 dose schedule: starting series between 11-14 years – before 15<sup>th</sup> birthday</i>  <i>See Table 11 for 3 dose schedule. starting series at 15 years or older; or immunocompromised</i>	Previous dose(s) given: _____ _____  <input type="checkbox"/> 2009 <input type="checkbox"/> 2008 <input type="checkbox"/> 2007 <input type="checkbox"/> 2006* <input type="checkbox"/> 2004/2005 (all students) * <input type="checkbox"/> 2002/2003 (females only) *  <i>* must complete series by August 31, 2024</i>

**Location to be picked up (please check):**

- Barrie   
  Collingwood   
  Cookstown   
  Midland

**VIM Order #** (for office use only): \_\_\_\_\_

**Confidentiality Notice:**

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