

Huron Perth Public Health RSV Publicly Funded Vaccine Order Form Hospitals and LTCH's

ORDERS can be PLACED through your health unit location following the normal ordering process. If the order is placed during the regular ordering time frame then your order will be delivered as usual for those whose orders are normally delivered.

****If your order is placed outside of the normal ordering time frame – please contact your health unit vaccine contact to arrange pick up**

Name of facility:

Date:

Ordered by:

Phone Number:

Temperature Logs dating back to last order included?
Yes

Date of Last Temp Logs Sent:

➤ **To reduce vaccine wastage, we ask that consent for eligible individuals, where possible, is obtained in advance prior to placing your vaccine order**

➤ **Please indicate the eligibility below for the dose(s) being requested**

| RSV Vaccine (Arexvy / Abrysvo) | | Product ID <i>(for office use)</i> | Current Fridge Inventory by <u>DOSES</u> | Number of <u>DOSES</u> Requested |
|---|---|--|---|---|
| Publicly Funded Eligibility Anyone 60 years and older in the following groups: | Who can order the vaccine for these groups | | | |
| <input type="radio"/> Residents of Long-Term Care Homes <input type="radio"/> Residents of Elder Care Lodges <input type="radio"/> Residents of Retirement Homes | LTCHs, Elder Care Lodges and Retirement Homes | 657 123 000 (x1) 657 123 240 (x1) 657 123 001 (x10) | | |
| <input type="radio"/> Patients in hospital receiving alternate level of care (ALC) <input type="radio"/> Patients receiving hemodialysis or peritoneal dialysis <input type="radio"/> Recipients of solid organ or hematopoietic stem cell transplants <input type="radio"/> Individuals experiencing homelessness <input type="radio"/> Individuals who identify as First Nations, Inuit or Métis. | Hospitals | 657 123 000 (x1) 657 123 240 (x1) 657 123 001 (x10) | | |

This vaccine requires reconstitution prior to administration. Each dose comes as two vials, one vial is an adjuvant/diluent (liquid) to be added to the other vial which contains a lyophilized powder.

HEALTH UNIT USE ONLY: Panorama Req. #:

Date Order Rec'd:

Order Reviewed By:

Order Filled By: