

Name of pharmacy/clinic/facility/other: \_\_\_\_\_  
 Contact person: \_\_\_\_\_ Date of order: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Vaccine	Doses requested	Doses remaining in fridge	Health Unit use only		
			Doses supplied	Date	Panorama req #
<b>Pneumococcal polysaccharide</b>					
See back of page for indications by age group	TIV Agriflu®				
	TIV Fluad®				
	QIV Flulaval®				
	QLAV FluMist®				
	TIV Fluviral®				
	QIV Fluzone®				
	TIV Fluzone® HD				

**Community provider/designate:** \_\_\_\_\_ **Pick-up date:** \_\_\_\_\_ **Health Unit staff signature:** \_\_\_\_\_  
 Sign upon receiving biologicals

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 Sign upon receiving biologicals

**All vaccines supplied must be accounted for. Community vaccine providers are required to keep track of all influenza vaccines and doses given and the age groups they are provided to.**

Health Unit will keep a copy of the order form.

Northwest	Northern Interior	Northeast
<b>Atlin Health Centre</b> T: 250-651-7677 F: 250-651-7687 <b>Dease Lake</b> T: 250-771-4444 F: 250-771-3911 <b>Hazelton</b> T: 250-842-4640 F: 250-842-4642 <b>Houston</b> T: 250-845-2294 F: 250-845-7884 <b>Kitimat</b> T: 250-632-3181 F: 250-632-7081 <b>Masset</b> T: 250-626-4725 F: 250-626-4708 <b>Prince Rupert</b> T: 250-622-6380 F: 250-622-6391 <b>Queen Charlotte City</b> T: 250-559-4933 F: 250-559-8037 <b>Sandspit</b> T: 250-637-5403 F: 250-637-2496 <b>Smithers</b> T: 250-847-6400 F: 250-847-5908 <b>Stewart</b> T: 250-636-2221 F: 250-636-2715 <b>Terrace</b> T: 250-631-4200 F: 250-638-2264	<b>Burns Lake</b> T: 250-692-2412 F: 250-692-2469 <b>Fort St. James</b> T: 250-996-7178 F: 250-996-2216 <b>Fraser Lake</b> T: 250-699-7742 F: 250-699-6987 <b>Mackenzie</b> T: 250-997-8517 F: 250-997-3253 <b>McBride</b> T: 250-569-2251 ext 2026 F: 250-569-2232 <b>Prince George</b> T: 250-565-7367 F: 250-565-7377 <b>Quesnel</b> T: 250-985-5657 F: 250-983-6843 <b>Valemount</b> T: 250-566-9138 ext. 2000 F: 250-566-4319 <b>Vanderhoof</b> T: 250-567-6900 F: 250-567-6170	<b>Chetwynd</b> T: 250-788-7300 F: 250-788-9877 <b>Dawson Creek</b> T: 250-719-6500 F: 250-719-6513 <b>Fort Nelson</b> T: 250-774-7092 F: 250-774-7096 <b>Fort St John</b> T: 250-263-6000 F: 250-263-6086 <b>Hudson's Hope</b> T: 250-783-9991 F: 250-783-9125 <b>Tumbler Ridge</b> T: 250-242-5271 F: 250-242-3889



**Orders will be filled based upon:**

- Vaccine shipments from BCCDC over a period of 3 to 4 weeks
- Historic dosage reporting
- Availability

**Note: Depending on the local health unit's inventory, specific brands may not be available and an interchangeable product may be supplied.**

**Instructions for Community Vaccine Provider (CVP)**

- Using this form, submit your order by fax to your community Health Unit.
- Please keep a copy for your records
- The CVP or designate is required to sign for receipt of the influenza vaccine upon pick-up at the Health Unit.
- The CVP will need to submit a new order for subsequent orders.

**Instructions for the Health Unit Biological Product Monitor/Designate**

To fill the CVP's complete/partial order:

- Record the number of doses in the "doses supplied" column
- Record the date the vaccine is packaged and available for pick-up in the date column
- Record the Panorama Requisition Number
- Contact CVP for pick-up
- The health unit staff is required to sign when order is picked up

**Influenza vaccine accountability**

- Publicly funded influenza vaccine must be accounted for. Vaccine utilization must be reported in order to ensure vaccine supply for the following year.
- Return expired/unused vaccine back to the local Health Unit when requested.
- The Publicly Funded Influenza Vaccine Tally form is available on the Northern Health website to assist with vaccine tracking.

**Cold chain**

Always maintain the cold chain (2° to 8°C) and contact the health unit immediately if you experience cold chain problems.

<b>Age group</b>	<b>Vaccine</b>	<b>Comments</b>
6 months to 17 years of age	<ul style="list-style-type: none"> <li>• Flulaval® tetra</li> <li>• FluMist® quadrivalent</li> <li>• Fluzone® quadrivalent</li> </ul>	<ul style="list-style-type: none"> <li>• For children 6 to 23 months of age, Flulaval® tetra and Fluzone® quadrivalent are the recommended products. If these products are unavailable, Fluviral® or Agriflu® should be used.</li> <li>• If a quadrivalent product is unavailable, Fluviral® or Agriflu® should be used.</li> </ul>
18 to 64 years of age	<ul style="list-style-type: none"> <li>• Fluviral®</li> <li>• Agriflu®</li> </ul>	<ul style="list-style-type: none"> <li>• In the event of a surplus of Flulaval® tetra or Fluzone® quadrivalent in the provider's inventory beyond that required for those under 18 years old, these vaccines may be provided to those 18 years of age and older.</li> </ul>
65 years of age and older	<ul style="list-style-type: none"> <li>• Fluviral®</li> <li>• Fluad®</li> <li>• Agriflu®</li> </ul>	<ul style="list-style-type: none"> <li>• In the event of a surplus of Flulaval® tetra or Fluzone® quadrivalent in the provider's inventory beyond that required for those under 18 years old, these vaccines may be provided to those 65 years of age and older.</li> </ul>
65 years of age and older living in long term care and assisted living facilities	<ul style="list-style-type: none"> <li>• Fluzone® High-Dose</li> </ul>	<ul style="list-style-type: none"> <li>• If Fluzone® High-Dose is unavailable, Fluviral®, Fluad® or Agriflu® should be used.</li> </ul>