



# RSV VACCINE ORDER FORM 2023-2024

**Greenstone**

[Greenstone@tbdhu.com](mailto:Greenstone@tbdhu.com) Fax: (807) 854-1871

**Marathon**

[Marathon@tbdhu.com](mailto:Marathon@tbdhu.com) Fax: (807) 229-3356

**Red Rock**

[Redrock@tbdhu.com](mailto:Redrock@tbdhu.com) Fax: (807) 886-1096

**Terrace Bay**

[Terracebay@tbdhu.com](mailto:Terracebay@tbdhu.com) Fax: (807) 229-3356

**Health Care Provider/Organization Name:**

**Date:**

**Phone Number:**

VACCINE	DOSES REQUIRED (# OF CONSENTS)	DOSES ON HAND
AREXVY (GSK)		

## ***Please note:***

- *Order only the vaccines you plan to administer in the next 2 weeks (e.g., number of appointments or patients who have consented)*
- *A 14-day interval is recommended between RSV and other vaccines*
- *Include a copy (at least two weeks) of your fridge temp log when placing order*
- *Vaccine must be picked up with a hard-sided cooler and thermometer*
- *Please ensure the cooler is preconditioned between 2°- 8°*