

Vaccine Order Form

Place orders by 4:30 pm on a Tuesday for same week pick-up on Thursdays and Fridays between 9:00 am and 4:00 pm.

Email orders preferred: vaccineorders@tbdhu.com	Fax: 807-625-4828
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Health Care Provider: _____ Phone: _____

Email Address: _____ Fax: _____

NOTE:

- **Vaccine brands distributed will depend on provincial supply availability.** Brands are interchangeable, however interval recommendations may vary – see *Principles of vaccine interchangeability: Canadian Immunization Guide*.
- **Patient/client must meet eligibility** as per the *Publicly Funded Immunization Schedules for Ontario (June 2022)*
- **Please report all vaccines** administered to children 0-18; all HIGH RISK and GRADE 7 vaccine administration **must be reported** before additional vaccine is released; find the report form at TBDHU.com/vaxorder (see “Reporting Vaccine Doses Administered”).

Acronym	Details	Doses on Hand	Doses Ordered
ROUTINE (report vaccines for ages 0-18; find form at TBDHU.com/vaxorder under “Reporting Vaccine Doses Administered”)			
DTap-IPV-Hib	Diphtheria, tetanus, pertussis; polio; haemophilus influenzae type b (Hib)		
Hib	Haemophilus influenzae type b (Hib)		
IPV	Polio		
Men-C-C	Meningococcal C-C		
MMR	Measles, mumps, rubella		
MMRV	Measles, mumps, rubella, varicella		
Pneu-C-15	Pneumococcal 15		
Pneu-C-20	Pneumococcal 20		
Rota	Rotavirus		
Td	Tetanus, diphtheria		
Tdap	Tetanus, diphtheria, pertussis		
Tdap-IPV	Tetanus, diphtheria, pertussis; polio		
Tuberculin	TB testing solution		
Varicella	Varicella		
Zoster	Herpes Zoster (Shingles)		
GRADE 7 VACCINES (reporting required; find form at TBDHU.com/vaxorder under “Reporting Vaccine Doses Administered”)			
HB	Adult 1ml – Hepatitis B		
HB	Pediatric 0.5ml – Hepatitis B		
HPV 9	Human Papillomavirus 9		
Men-C-ACWY-135	Meningococcal C-ACWY		
HIGH RISK VACCINES (reporting required; find form at TBDHU.com/vaxorder under “Reporting Vaccine Doses Administered”)			
HA	Adult 1ml – Hepatitis A		
HA	Pediatric 0.5ml – Hepatitis A		
HB	Adult 1ml – Hepatitis B		
HB	Pediatric 0.5ml – Hepatitis B		
HB	Renal Dialysis 1ml – Hepatitis B		
HPV 9	Human Papillomavirus 9		
Mpox	Imvamune®		
Men B	Meningococcal B		
Men-C-ACWY-135	Meningococcal C-ACWY		
OTHER RESOURCES			
Temperature Log Books - Number of copies requested:			
Immunization Cards - Number of copies requested:			