



Thunder Bay District
Health Unit

RSV VACCINE ORDER FORM 2024-2025

999 Balmoral St.

Thunder Bay ON P7B 6E7

(807) 625-5900

Toll-free: 1-888-294-6630

Phone: 807-625-5900 ext. 5108

Fax to: 807-625-4828

Email to: VaccineOrders@tbdhu.com

Health Care Provider/Organization Name:

Date:

Phone Number:

VACCINE	DOSES REQUIRED (# OF CONSENTS)	DOSES ON HAND
AREXVY (GSK) (eligible 60+)		
ABRYSVO (Pregnant or eligible 60+)		
BEYFORTUS 50mg (Infant)		
BEYFORTUS 100mg (Infant)		

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)*
- *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°*