

FOR OFFICE USE ONLY

*Holding Point Code: YOR NW

Requisition number:

UIIP 2023-2024 Influenza Vaccine Order Form

SECTION 1 – INSTRUCTIONS FOR HEALTHCARE PROVIDER

1. Complete all mandatory fields (*) - missing information will result in delays to your order.

2. Do not over stock your refrigerator with vaccines. Ordering excess vaccine can increase the risk of wastage.

3. Entire current fridge inventory amount must be entered. Please enter "0" if there is no vaccine.

4. Orders must include the most current five business days of refrigeration temperature logs.

5. Send both pages to avoid delays in processing to vaccineinventory@york.ca or 905-830-0578

6. You will receive a notification by telephone call or e-mail when your order is ready for pick-up.

Reorders for influenza vaccines can be placed starting October 16, 2023. Reorders submitted prior to October 16, 2023 will not be processed.

SECTION 2 – HEALTHCARE PROVIDER INFORMATION *Holding Point Code: YOR_NW

*Healthcare provider/Practice name					
*Order date (mm/dd/yyyy)			*Number of immunizer(s)		
*Type of practice:	General practice	Pediatrici	an	Other:	
*Number of fridge(s)	*Type(s) of	fridge:	Bar	Domestic	Purpose-built
*Contact person	*Phone number				
*Fax	*Email				
Unit number	*Street number	*Street	address		
*City/Town	*Postal code				

SECTION 3 – PICK UP LOCATIONS

*Select Pick Up Location. Please visit york.ca/vaccineinventory or call 1-877-464-9675 ext. 74033 for information on pick up times.

Newmarket 17150 Yonge St.	Vaughan 9060 Jane St.	Richmond Hill 50 High Tech Rd.	Markham 4261 Highway 7 East	Georgina 24262 Woodbine Ave.
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SECTION 4 - ACCOUNTABILITY STATEMENT

By submitting this order, I verify on behalf of the practice that the refrigerator storing publicly-funded vaccines, at the location listed above, maintains temperatures between +2.0°C to +8.0°C; meets MOHLTC Vaccine Storage and Handling Protocols and Guidelines; maximum, minimum, and current temperatures are recorded at least twice daily. Furthermore, I verify that no more than one month supply of vaccine is stored at the location listed above; red-dotted and short-dated vaccines are used first; expired vaccines are never administered and are returned as wastage; a review of vaccine inventory and checking for expired vaccines has been completed before placing orders; and all due diligence has been taken to prevent the wastage of publicly-funded vaccines. I understand that I am required to maintain accurate temperature logs that must be kept onsite for a minimum of two years and made accessible to York Region Public Health upon request. Upon vaccine pick-up, I will have the necessary materials for the safe transport of publicly-funded vaccines including properly conditioned hard sided, insulated container, digital temperature monitoring device, and appropriate packaging material.

*Print Name

*Signature

*Date (mm/dd/yyyy)

Complete and submit pages 1 and 2

PUBLIC HEALTH



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SECTION 5 – INFLUENZA VACCINE INVENTORY AND REQUEST					
Trade Name(s) (Subject to Availability)	Vaccine	UIIP Eligibility Age Group	Format	Entire Current Vaccine Inventory Number in Doses	Number of Doses Requested
FluLaval® Tetra Fluzone® Quadrivalent	QIV	6 months & older	Pre-filled Syringe/ Multi-dose Vial		
Fluad®	TIV-adjuvanted	65 years & older	Pre-filled Syringe		
Fluzone® High-Dose Quadrivalent	QIV-HD	65 years & older	Pre-filled Syringe		

Note: NACI states that in the absence of a specific product any of the available age appropriate influenza vaccines should be used.

ORDERS MUST INCLUDE THE MOST CURRENT FIVE BUSINESS DAYS OF REFRIGERATION TEMPERATURE LOGS.

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Printed by/date:		Picked by/date:			
Entered by/date:		Packed by/date:			
Sorted by/date:		Audited by/date	:		