

School Vaccines Order Form

for Hepatitis, Meningococcal and
Human Papillomavirus Vaccines

School Vaccines Ordering Process:

1. Refer to the **School Vaccines Eligibility Criteria** below. In the table:
 - a. Record the patient(s)' name(s), gender(s), date(s) of birth.
 - b. Record the corresponding eligibility criteria number(s)
2. All **vaccine orders must be faxed to 905-546-3472** along with 4 weeks of logged (twice daily) current, minimum and maximum temperatures with your facility's name clearly identified on the log sheets. Vaccine will not be released if log sheets are not received.

Orders are processed within 2–3 business days from receipt, followed by delivery by your courier.

Practice Name: _____

Client ID: _____
(must be filled out for order to be processed)

Address: _____

City: _____ Postal Code: _____

Phone number: _____

Fax Number: _____

PATIENT INFORMATION

Last Name	First Name	Gender M/F	Birth Date YYYY-MM-DD

School Vaccines Eligibility Criteria

Check ✓ appropriate box for vaccine and eligibility criteria

- ☐ **Hep B – Adult** - Publicly Funded Routine Eligibility:
- Grade 7-12
 - If between 11 and less than 16 years of age give 2 adult doses (1.0mL) of Hepatitis B
- ☐ **Men-C-ACYW Vaccine** - Publicly Funded Routine Eligibility:
- Grade 7-12
 - Unimmunized individuals born in 1997 or later remain eligible for 1 dose
- ☐ **HPV9 Vaccine** - Publicly Funded Routine Eligibility:
- Grade 7 -12
 - 2 doses of HPV9 are needed to complete the series of a student who started the series less than 15 years of age
 - 3 doses of HPV9 are needed to complete the series of a students who started the series 15 years of age or older
- ☐ **Hep B – Pediatric** - Publicly Funded Routine Eligibility:
- If between 16 and less than 20 years of age (and in between grades 7 and 12), give 3 paediatric doses (0.5mL) of Hepatitis B
 - If 16 or older and have a history of 1 adult dose (1 mL) [and in between grades 7 and 12], 2 paediatric doses (0.5mL) are needed to complete the Hepatitis B series

Fax this form to 905-546-3472

DO NOT COMPLETE THIS SECTION • FOR PUBLIC HEALTH USE ONLY

Quantity	Lot #	Description	Unit Released
		HB Vaccine (pediatric)	Single dose
		HB Vaccine (adult)	Single dose
		Men-C-ACYW Vaccine	Single dose
		HPV9 Vaccine	Single dose