



COVID-19 Vaccine Order Form

Order Instructions

1. Your primary care office must be pre-approved and COVax trained.
2. Review current inventory and count number of doses in stock.
3. Order **only** what your facility can store safely in your vaccine fridge.
4. Orders for 12+ will be filled with available vaccine.
5. Fax this completed form to **519-823-4903** and attach your refrigerator temperature logs.
6. If you have questions about your COVID-19 vaccine order, or allocation, please contact your Vaccine and Medication Administrator:
 Guelph area: 519-822-2715 ext: 4170
 Wellington and Dufferin area: 519-822-2715 ext: 2622
7. All vaccines administered must be entered into COVax.

| Order Information | |
|-------------------------------|-------|
| Healthcare Provider/Facility: | |
| Address: | |
| Ordered By: | Date: |
| Phone Number: | Fax: |

| Recommended Age Group | Doses/Vial | Vaccine | Doses in Stock | Vials Requested | Supplies needed |
|-----------------------|--|----------------------|----------------|-----------------|-----------------|
| 6 months and older | 5 0.5 ml doses <small>(more if 0.25 ml doses pulled)</small> | Moderna XBB | | | Y/N |
| 6 months – 4 years | 10 0.2 ml doses | Infant Pfizer XBB | | | Y/N |
| 5 years – 11 years | 6 0.2 ml doses | Pediatric Pfizer XBB | | | Y/N |
| 12 years + | 6 0.3 ml doses | Adult Pfizer XBB | | | Y/N |

* For orders for 12+ - facilities will receive available vaccine

Delivery/Pick-up Instructions

1. If requested, supplies will accompany your COVID-19 vaccine order.
2. Place vaccine immediately in vaccine fridge.

WDGPH Vaccine and Medication Administrator COVID-19 Order Notes: