

Second Dose Imvamune® Vaccine Referral Form

Moderately to severely immunocompromised individuals are eligible to receive two Imvamune® doses, at least 28 days apart. Please complete, sign and fax this referral form to 1-855-934-5463 and your patient will be directly contacted by WDG Public Health to book their appointment.

Last Name	First Name	Health Card No.
Date of Birth MM / DD / YYYY	Name of Referring Physician	
Home/Mobile Phone	Email address	

COMPLETE THIS SECTION FOR REFERRALS FOR SECOND DOSE

Reason for second dose of Imvamune® vaccine*:

- Receiving active treatment (e.g., chemotherapy, targeted therapies, immunotherapy) for solid tumour or hematologic malignancies (*Active treatment includes patients who have completed treatment within 3 months*)
- Recipient of solid-organ transplant and taking immunosuppressive therapy
- Recipient of chimeric antigen receptor (CAR)-T-cell therapy or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
- Moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Individuals with HIV with current CD4 count $\leq 200/\text{mm}^3$ **or** prior CD4 Fraction $\leq 15\%$ or detectable viral load (i.e., not suppressed)
- Receiving active treatment with the following categories of immunosuppressive therapies: anti-B cell therapies (monoclonal antibodies targeting CD19, CD20 and CD22), high-dose systemic corticosteroids (refer to the CIG for suggested definition of high dose steroids), alkylating agents, antimetabolites, or tumor-necrosis factor (TNF) inhibitors and other biologic agents that are significantly immunosuppressive (*Active treatment for patients receiving B-cell depleting therapy includes patients who have completed treatment within 12 months*)
- Receiving dialysis (hemodialysis or peritoneal dialysis)

- I have provided counselling regarding the risks, benefits, and timing of additional vaccine dose(s) in accordance with provincial guidance.

Physician Signature:

***Individuals must have one of the health conditions listed. Referrals with other health conditions or criteria will not be accepted.**