

**Ottawa Public Health
Influenza Vaccine Order Form - 2016**

**For additional orders please photocopy this form or print out from the Ottawa Public Health website.
*Your fridge temperature recordings must be included for this order to be processed***

Physician or Institution or Agency Name:

Contact Name:

Office Address:

Postal Code:

Office Telephone:

Fax Number:

E-Mail Address:

Vaccines (indicate order of preference*)	Doses on hand	Amount Requesting in doses	Delivery By	FOR OFFICE USE ONLY			
				Date (yy/ mm/dd)	Doses sent	Lot	Initial
<input type="checkbox"/> Fluviral®			<input type="radio"/> Accuro (Registered participants only)				
<input type="checkbox"/> Agriflu®			<input type="radio"/> Bio-Test				
<input type="checkbox"/> FluLaval Tetra® (QIV)			<input type="radio"/> Self pick up				
<input type="checkbox"/> Fluzone® (QIV)			<input type="radio"/> On-Demand Courier (delivery within 3hrs)				
<input type="checkbox"/> Flumist® (QIV)							

*Actual order will depend upon availability of each product

Delivery Information

- Please allow 7-10 business days for process and delivery.
- If you are using **Accuro** (registered participants only) or **Bio-Test**, you can expect automatic delivery of your order.
- If you are using **Self-pick up** or **On-Demand Courier**, you will receive a phone call when your order is ready.
- Please arrange to retrieve your order within 48hrs of notification. **Please bring a cooler and ice packs when picking up vaccine.**
- Vaccine Program hours are **Monday to Friday, 8:00am to 4:00pm.**

E-Mail, Mail Or Fax This Form To:

Ottawa Public Health
Vaccine Distribution
100 Constellation Drive, Ottawa, Ontario K2G 6J8
Fax Number: 613-580-2783
E-Mail : vaccine@ottawa.ca

**Questions and comments regarding your order may be directed to: vaccine@ottawa.ca
or 613-580-6744 ext 24225**

