

Vaccine Special Order Request Form

INSTRUCTIONS: Please select indication for use of vaccine and number of doses requested. Upon approval, doses will be shipped directly to your facility. Fax form to: 317-233-3719. **A minimum of 1 dose can be ordered for each vaccine at any time during the month, regardless of a previous order.**

Facility Name: _____ Facility PIN: _____

Name Person Requesting: _____ Date: _____

Telephone Number: _____ Email: _____

In addition to these three vaccines listed, Td vaccine should be ordered in limited quantities, **preferably in a minimum of 1-2 doses**. Providers can order this through the Vaccine Order catalog in VTrckS. A Vaccine Special Order Request Form does not need to be completed for this vaccine unless a previous order has already been submitted for the month.

Td (Tetanus and Diphtheria toxoids) – Tenivac

<p>A single dose of Tdap should be given to children 7 through 18 years of age who:</p> <ol style="list-style-type: none"> 1. Have received tetanus and diphtheria containing vaccines (DT or Td) instead of DTP/DTaP for some or all doses of the childhood series; 2. Have received fewer than 5 doses of DTP/DTaP or 4 doses if the fourth dose was administered at age 4 years or older; or 	<p>A 3-dose series of Tdap and Td* should be given to children 7 through 18 years of age who:</p> <ol style="list-style-type: none"> 1. Have never been vaccinated against tetanus, diphtheria, or pertussis (no doses of pediatric DTP/DTaP/DT or Td). <p>* The preferred catch-up vaccination schedule is a single Tdap dose, followed by Td for any remaining doses. If not administered as the first dose, Tdap can be substituted for any of the other Td doses in the series. Tdap is preferred over Td for the first dose in the catch-up series.</p> <p>Routine Td Schedule for Unvaccinated Persons 7 Years of Age or Older</p> <ul style="list-style-type: none"> Primary 1 Dose (Tdap) Primary 2 Dose (Td) – minimum 4 week interval Primary 3 Dose (Td) – minimum 6 month interval
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Number of doses requested _____

Notes:

More information about the catch-up is available in Appendix D at:
http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e

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Meningococcal Group B – Trumenba

Meningococcal Group B – Bexsero

<input type="checkbox"/> Sickle cell disease <input type="checkbox"/> Asplenia <input type="checkbox"/> Complement deficiency <input type="checkbox"/> Microbiologist* <input type="checkbox"/> High-risk Outbreak Exposure	<input type="checkbox"/> Sickle cell disease <input type="checkbox"/> Asplenia <input type="checkbox"/> Complement deficiency <input type="checkbox"/> Microbiologist* <input type="checkbox"/> High-risk Outbreak Exposure
*Routinely exposed to isolates of Neisseria meningitidis	*Routinely exposed to isolates of Neisseria meningitidis
Number of doses requested _____	Number of doses requested _____
Notes:	

Pneumococcal Polysaccharide Vaccine (PPSV23) - Pneumovax

Chronic Condition	Asplenia	Immunodeficiency
<input type="checkbox"/> Chronic heart disease <input type="checkbox"/> Chronic lung disease* <input type="checkbox"/> Chronic renal disease <input type="checkbox"/> Diabetes mellitus <input type="checkbox"/> Cerebrospinal fluid leak <input type="checkbox"/> Cochlear implant <input type="checkbox"/> Other _____	<input type="checkbox"/> Sickle cell disease <input type="checkbox"/> Asplenia	<input type="checkbox"/> Congenital or acquired immunodeficiency <input type="checkbox"/> HIV <input type="checkbox"/> Nephrotic syndrome <input type="checkbox"/> Cancer / Leukemia <input type="checkbox"/> Treatment with immunosuppressive drugs <input type="checkbox"/> Solid organ transplant <input type="checkbox"/> Other _____
*Children with asthma only if using long-term oral corticosteroid therapy (does not include inhalers)		
Number of doses requested _____		
Notes:		

Children with immunocompromising conditions or functional/anatomic asplenia should receive a second dose of PPSV23 5 years following the first dose. For more information on the current ACIP recommendations for the use of PPSV23 in children, please visit: <http://www.cdc.gov/vaccines/pubs/ACIP-list.htm>