

Request Date (Please Fill):

Ph (604) 983-6784 Fax: (604) 983-6883
Nsbiologicals@vch.ca

<p>CVP ID: Name Address Phone # Fax #</p>	<p>We will email or call you once, when your order is ready for pick up. Please note pick up must be done within 4 business days of us contacting you.</p>	<p><u>Circle Pickup Location:</u> West Vancouver Esplanade</p>
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<p>Release of Vaccine(s) • Biologicals will only be released to the CVP or their staff. Keep transport time < 1 hour. • Required for pick-up from VCH: Refrigerated Gel blankets (2), a frozen Ice pack, & a hard-sided cooler</p>	<p>We are open Monday-Friday, 8:30 AM - 4:30 PM</p>	<p>Please report all immunizations given to public health asap by using the appropriate reporting form. Please contact the CDC Nurse on call at 604-983-6700 for immunization questions.</p>
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Vaccine Antigens	Brand Names	Box Contains	# Doses on Hand	# Doses Requested	# Doses Given
Diphtheria, Pertussis, Tetanus, Hep B, Polio, Hib (DTaP-HB-IPV-Hib)	Infanrix Hexa	10 x 0.5 ml doses syringes /vials			
Diphtheria, Pertussis, Tetanus, Polio, Hib (DTaP-IPV-Hib)	Pediacel	5 x 0.5 ml vials			
Haemophilus Influenzae type b (Hib)	Act-HIB / Hiberix	5 x 0.5 ml vials			
Hepatitis B - Adult (Hep B - Adult) (20 years + / Grade 6)	Engerix B / Recombivax HB	1 x 1.0 ml vial			
Hepatitis B - Pediatric (Hep B - Ped) 0 - 19 yrs	Engerix-B / Recombivax HB	1 x 0.5 ml vial			
Measles, Mumps, Rubella (MMR)	Priorix / MMR II	10 x 0.5 ml vials			
Measles, Mumps, Rubella & Varicella (MMRV) 4-12yrs diluent	Proquad / Priorix-tetra	10 x 0.5 ml vials			
Meningococcal Conjugate C (Men-C-C)	Neisvac-C	10 x 0.5 ml syringes			
Pneumococcal Conjugate 13 (Pneumo-C-13)	Prevnar 13	10 x 0.5 ml syringes			
Pneumococcal Polysaccharide 23 (Pneumo-P-23)	Pneumovax 23	10 x 0.5 ml vials			
Rotavirus (Rota)	Rotateq	10 x 1.5 ml oral applicator			
Seasonal Flu- LAIV Flumist (Flu-Live-Attenuated) 2-17 years	FluMist LAIV	10 spray-syringes/box			
Seasonal Flu-QIIV Flulaval (Flu-Inactivated)	Flulaval TETRA QIIV	10-dose vial/box			
Seasonal Flu-TIIV Agriflu (Flu-Inactivated)	Agriflu TIIV	10 pre-filled syringes/box or intranasal option			
Seasonal Flu-TIIV Flud (Flu-inactivated) 65+ years	Flud-TIIV	10 pre-filled syringes/box			
Seasonal Flu-TIIV Fluviral (Flu-Inactivated)	Fluviral TIIV	10-dose vial/box or pre-filled Syringe			
Tetanus, Diphtheria (Td) 7+ years	Td Adsorbed	5 x 0.5 ml vials			
Tetanus, Diphtheria, Pertussis (TdaP) 7+ years	Boostrix	10 x 0.5 ml syringes			
Tetanus, Diphtheria, Pertussis, Polio (TdaP-IPV) 7+ years	Boostrix-Polio/ Adacel-Polio	10 x 0.5 ml syringes			
Varicella (Chickenpox) (VAR)	Varilrix / Varivax III	10 x 0.5 ml vials			

Special Request Vaccines - Subject to approval					
Hepatitis A - Adult (Hep A - Adult) 19 years & older	Havrix 1440	1 x 1.0 ml vial			
Hepatitis A - Pediatric (Hep A - Ped) 12 months - 18 yrs	Avaxim / Havrix 720 / Vaqta	1 x 0.5 ml vial			
Hepatitis B - Adult Renal (Kidney) Dialysis (Hep B - Dialysis) Subject to approval, 18 yrs+	Recombivax HB - Adult Dialysis	1 x 1.0 ml vial			
Human Papilloma Virus (HPV-9) grade 6 & 9	Gardasil 9	1 x 0.5ml vial			
Inactivated Polio (IPV)	Imovax-Polio	1 x 0.5 ml syringe			
Meningococcal Conjugate A/C/Y/W-135 (Men-C-ACYW-135) Subject to approval	Nimenrix / Menveo / Menactra	1 x 0.5 ml vial			
TB Skin Test (PPD) limit 1 vial per order	Tubersol	1 ml vial			