

Hepatitis A Vaccine: High Risk Client Order Form

Requirements for Order to be Processed:

- Health Department nurse will assess, and release **one dose of vaccine per order** based on client eligibility and the publicly funded immunization schedule.
- Complete all sections and fax order with temperature logs to the site where you pick up your vaccine (locations below). Orders can take up to 10 business days to process.

Fridge #:	Clinic/Healthcare Pro	vider:
Date:	Phone:	Fax:
Client and Vaccine	Information:	
Last Name:	First Name:	DOB (Y-M-D):
Gender:	Phone:	Other Phone:
Address:		
Dose Requested: Reason for Release Anyone who is greater or ea	Dose 1: ☐ Dose 2 : : : : : : : : : : : : : : : : : :	
☐ Clinic stock supply: ☐ Persons with chronic live ☐ Intravenous drug users ☐ Men who have sex with	Doses required:er disease (including hepatitis	
HCP/Clinic Pick-Up	Method: with nex	kt order
Whitby, ON 605 Rossland Road East, P: 905-668-7711 F: 905-666-6214	Port Perry, ON 181 Perry Street P: 905-985-4889 F: 905-982-0840	Pickering, ON 1355 Kingston Road P: 905-420-8781 F: 905-420-9765

Vaccine Storage and Handling line: 905-668-7711 ext. 3063

Personal health information is collected, used and disclosed under the authority of the Health Protection and Promotion Act R.S.O. 1990 c.H.7, s. 5 and its Regulations. This information is collected for the purpose of assessing, planning, maintaining records, evaluating and reporting on the level of support services required to be provided by the Health Department, Regional Municipality of Durham; such as to reduce or eliminate vaccine preventable diseases, and to provide vaccine services to children and adults. Questions about this collection of information should be addressed to the Manager, Health Information, Privacy and Security, Durham Region Health Department, at 605 Rossland Rd E., P.O. Box 730, Whitby, ON, L1N 0B2, (905) 668-7711.