



Vaccine and Resource Order Form



Date:	Person Placing Order:	Emergency Order <input type="checkbox"/>
Facility Name:	PIN:	
Attn:	Phone:	
Shipping Address:		City, State, Zip

Refrigerator/Freezer (main storage) Temp:	1) Min	Max	Current	2) Min	Max	Current	3) Min	Max	Current	4) Min	Max	Current	5) Min	Max	Current	6) Min	Max	Current	7) Min	Max	Current	8) Min	Max	Current
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Fax completed order to: 208-334-4914 or 800-554-2922 or E-Mail: IIP@dhw.idaho.gov

Vaccine	# syringes	# of vials	Doses on Hand	VIS Forms	English	Spanish
			Combination VIS DTaP, Hep B, Polio, Hib, PCV7, Rotavirus			
DTaP/IPV/Hib (Pentacel)				DTaP, IPV, Hib		
DTaP/Hep B/EIPV (Pediarix)				DTaP, Hep B, IPV		
DTaP				DTaP		
Tdap				Tdap		
Td	10 pack only			Td		
DT				DTaP		
Hepatitis B				Hep B		
Hepatitis A				Hep A		
Hib		5 pack vials only		Hib		
EIPV				Polio		
MMR				MMR		
Varicella				Varicella		
PCV 7 (Prevnar)	10 pack only			PCV-7 Congugate		
Rotavirus	Oral Only			Rotavirus		
MCV4 (Menactra)		5 pack only		Meningococcal		
HPV				Human Papilloma Virus		
PPV23 (Pneumococcal)		5 pack only		Pneumo 23 Polysaccharide		
HepA/HepB (Twinrix) 18 yr olds				Hep A, Hep B		
Flu PF (6 - 35 mo)	10 pack only			Inactivated Flu		
Flu- PF (36 mo - 18 yrs)	10 pack only			Inactivated Flu		
Flu (6 mo.-18 yrs w/ Thimerosal 10 dose vials)				Inactivated Flu		
Flu (4 yrs-18 yrs Novartis 10 dose vials)				(TIV) Inactivated Flu		
FluMist (2-18) Intranasal administration	Intranasal			(LAIV) Live Attenuated		



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Resource	Description	English	Spanish	Resource	English	Spanish
Parent Education				Clinic Resources		
Vaccines What You Should Know	Book Author Paul Offit MD			Provider Exemption Form		
6 Misconceptions	Common Misconceptions			Lifetime Immunization Records		
Immunization Timing Blocks	Color Block Schedule			Clinic Immunization History Forms		
Parent Education	Pamphlet			Clinic Immunization History Forms II For use with labels		
Happy Birthday Reminder	4" X 5" Postcards			VAERS Forms		
Do You Remember When	4"X5" Immunization Reminder Postcards			2008 Immunization Schedule, Accelerated Schedule		
IRIS Pamphlet	Pamphlet			Pink Book		
After The Shots	Post Immunization Tips			Immunization Works CD		
Are You 11-19	Adolescent Immunization Information			No One Will Be Denied Sign		
Shots Aren't For Kids	Adolescent Immunization Brochure			Do Not Unplug Refrigerator Stickers		
I Can't Remember When	Childhood Immunization Brochure			Spanish Screening Question and IRIS Consent Stickers		
				IRIS Consent Form		
				School and Day Care		
Vaccine Forms				Idaho School Health Forms		
Monthly Accountability Form				Certificate of Exemption School <input type="checkbox"/> Child Care <input type="checkbox"/>		
Vaccine Order Form				Imm Names & Abbreviations		
Temperature Log				Guide to School Imm Law		
Nurses Station Worksheet				Schedule of Intended Imm		
Vaccine Transfer Sheets				Idaho Child Care Health Forms		
				Guide to Idaho Child Care Imm Law		
IIP 4/09				School and Child Care resources can be downloaded at IRIS.idaho.gov		