

Request Form for School Based Vaccines Grade 7 to 12 Students Residing in Ottawa

Please fax the completed form to 613-580-2783

Date: _____

This form is for clients who meet one of the following:

- Allergy to a vaccine component – specify: _____
- Previous reaction to a vaccine – specify: _____
- Students with physical/behavioural limitations – specify:
(e.g. McHugh, Crystal Bay schools) _____
- Medical condition – specify: _____
- Not able to receive vaccine in a school environment

Vaccine to be released: (only one dose per vaccine can be released at a time)

Hepatitis B
(1.0 mL/dose) (grade 7 and 8 only)

HPV-4
(grade 9 to 12 girls and grade 9 boys who have already received a dose of HPV 4)

HPV-9
(grade 7 to 12 girls and grade 7 to 9 boys starting new series or have already received HPV 9)
***HPV vaccine administered at 14 years or younger only requires 2 doses to complete series**

Men C-ACYW-135 (grade 7 only)
Batch order form required for students in grade 8 to 12

Client has an appointment booked on (dd/mm/yyyy): _____

Student's Information	Physician's Information
Name:	Name:
DOB:	Address:
Parent/legal guardian:	Phone Number:
Phone number:	Fax Number:
OHIP #:	

**Please allow 10 business days for processing
If you have any questions please contact the
Ottawa Public Health Vaccine Room at 613-580-6744**

FOR VACCINE ROOM USE ONLY

Vaccine	Vials	Lot No.	Date Filled	Signature