State Vaccine Order Form (VOF)

This form MUST reach our office on or before the 1st business day of the month. Late orders will not be processed.

FAX to: (860) 509-8371 or mail to:
Department of Public Health; 410 Capitol Avenue - MS# 11MUN; Hartford, CT 06134-0308

Please report STATE-SUPPLIED vaccines only. Questions? Please Call: (860) 509-7929

Name and Shipping Address:	Date of Order:	Completed By:	**Telephone #**	**PIN #**

VACCINE	Doses per pack	Doses Ordered	Doses on Hand	Expiration Date(s)	Comments
DTaP/HepB/IPV (Pediarix)	5				
DTaP	5				
DTaP/IPV (Kinrix)	5				
Td	10				
Tdap	5				
HIB (ActHib)	5				
PCV (Pneumo. Conj.)	10				
Hepatitis A	5				
Hepatitis B	5				
IPV	10				
DTaP/IPV/Hib (Pentacel)	5				
Rotavirus (Rotarix)	10				
MCV4 (Meningo. Conj.)	5				
MMR	10				
Varicella	10				
HPV	10				
Influenza (6-35 months)	10				
Influenza (3-18 years)	10				
FluMist	10				
HIB (HIBERIX)	10				

Doses Administered MONTH/YEAR:_____ PIN #

VACCINE	DOSE	< 12 Months	12-23 Months	24-35 Months	3-4 Years	5-6 Years	7-8 Years	9-14 Years	15-19 Years	20-24 Years	25-44 Years	45-64 Years	UNK	Sub-Total	Totals
DTaP/HepB/IPV (Pediarix)	1													1	
	2													2	
	3													3	
DTaP/Td (Td for ages 7-18 only)	1													1	
	2													2	
	3													3	
	4													4	
	5													5	
DTaP/IPV (Kinrix)	1														
HIB	1													1	
	2													2	
	3													3	
	4													4	
MMR	1													1	
	2													2	
IPV	1													1	
	2													2	
	3													3	
	4													4	
PCV	1													1	
	2													2	
	3													3	
	4													4	
Hepatitis B	1													1	
	2													2	
	3													3	
MCV4	1														
Tdap	1														
Influenza	1													1	
	2													2	
FluMist	1													1	
	2													2	
Hepatitis A	1													1	
	2													2	
Rotavirus	1													1	
	2													2	
HPV	1													1	
	2													2	
	3													3	
Varicella	1													1	
	2													2	
DTaP/IPV/Hib (Pentacel)	1													1	
	2													2	
	3													3	
	4													4	