# **Facility COVID-19 Vaccine Order Form**



Long-Term Care (LTC), Assisted Living (AL) and Independent Living (IL) Facilities

- Order vaccine at least 5 business days prior to requested pick up date.
- Orders will only be available for pick up once they have been approved.
- > Vaccine will be distributed based on available products and supply.
- We will NOT backfill orders.

Site Name:					Are immunization	ט צווט	leing provided by si	le Stair	Y	IN
Order Date: ImmsBC Supply					ly Location (name):					
Address:										
Contact Pers	on:				E-mail:					
Phone Numb	per:	Ext:			Fax Number:					
Site Immuniz	zer:			Requ	ested Health Unit	nit for pick up:				
Requested Date for pick up: Proposed Clinic D						Date:				
Long-Term Care beds: Assisted Living beds:						Independent Living beds:				
# of Doses COVID-19 Vaccines					Public Health Vaccine Management Use Only					
Requested							# Doses	#	Vials	
	<b>SPIKEVAX™ XBB.1.5</b> (Moderna) 12y+: 0.5mL (50 mcg)									
COMIRNATY® XBB.1.5 (Pfizer) 12y+: 0.3mL (30 mcg)										
Once thawed, store in vaccine fridge Once vial is punctured, st				_	Арр	proved by:				
· · · · · · · · · · · · · · · · · · ·			X <sup>™</sup> (Moderna) must be used within <b>24 Hrs</b> IATY® (Pfizer) must be used within <b>12 Hrs</b>			Date:				
•	· · · · · · · · · · · · · · · · · · ·		NATY® (Pfizer) i	must be	e used within 12 Hrs	Date	e:			

## Submit completed form by email to PublicHealthVaccineManagement@islandhealth.ca

- Ensure all immunizations are appropriately documented, in ImmsBC and any other site-specific location(s).
- Report cold chain incidents by following the Maintain Vaccine Stability
- Complete Clinic Tally where required (paper clinic tally or for those with access, the online tally).

#### Note:

- Request doses based on the number of long-term care (LTC) and assisted living (AL) residents. Request doses for staff and independent living residents (IL) who confirm they will be vaccinated on site. IL facilities without LTC or AL beds should order vaccine using the Vaccine Order Form for Community Vaccine Providers (COVID-19).
- Facilities that contract pharmacists to administer vaccines must place their own vaccine order.
- If unable to store vaccine on site, return any remaining vaccine to the local health unit under cold chain conditions once clinics are complete. Use Transportation section on Page 2. It cannot go into another providers supply (e.g. pharmacy or other facility).

<b>Local Health Unit:</b> print form $\rightarrow$ complete at time of vaccine pick up $\rightarrow$ send original with CVP $\rightarrow$ retain a copy.								
Date Cooler Packed:		Time Cooler Pac	Fridge Temp:					
Vaccine Product Lot Nu		ımber	MFG. Expiry or Thaw Discard Date		Doses Sent	Previous Transport Time		
Filled By:		Picked up By:		ImmsBC Trans	fer Comple	te:		

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Long-Term Care (LTC), Assisted Living (AL) and Independent Living (IL) Facilities

### **Transportation**

- Hard-sided cooler with ice packs and insulating material (gel packs, bubble wrap, packing paper) when picking up vaccine.
- A temperature monitoring device should be used during transport whenever possible, and **must** be used when vaccine will be stored in cooler for 4+ hours. Pack and store vaccine according to BCCDC standards.
- Refer to <u>BCCDC Guidelines</u>, for SPIKEVAX™ (Moderna) duration of transport times.
- Store this form with vaccine (in fridge) to ensure temperature monitoring and transport documentation is accessible.

Use this section for Vaccine Transportation – Record cooler temp at end of each transport leg and when transferring vaccine									
Transport to/from	Date	Depart	Arrival	Current	Min Temp	Max Temp	Reset	Duration of	
Transport to/from		Time	Time	Temp			Min/Max	Transport	
Previous Transport Time	(from pick up section)						H:	M:	
From Health Unit to Site							☐ Yes	H:	M:
From Site to Health Unit							☐ Yes	H:	M:
Vaccine Transported By:					To	Total Duration of Transport			M:

## Monitoring

#### When storing vaccine in a cooler:

- Check temperature every 1-2 hours and each time the cooler is opened. Record the temperatures below. Temperature will gradually rise, minimize frequency of opening. If temperature reaches +6 °C to +7°C, add or replace ice packs and keep lid closed, monitor temperature closely.
- If Covid-19 vaccine is exposed above +8°C, this is considered room temperature, and exposure time must be subtracted from the total allowable time at room temperature:
  - o Record date and time vaccine was last known to be within +2°C to +8°C on Vial Label.
  - Use within time frame established by manufacturer.
  - O Quarantine and report as a cold chain if temperatures is above +24°C.

Monitoring Vaccine in Cooler								
Time	Current Temp.	Min Temp.	Max Temp.	Reset Min/Max	Name (print)			
				☐ Yes				
				☐ Yes				
				☐ Yes				
				☐ Yes				

## When storing in a vaccine fridge:

- Store vaccine between +2°C and +8°C, in the original packaging to protect from light.
- Twice daily (start and end of workday), record the temperatures (current, min and max) on the <u>BCCDC Refrigerator Temperature Form</u>. Store temperature log with vaccine fridge, and retain logs for 3 years. After recording temperatures, reset min/max thermometer.