



# Vaccine Order Form

Naval Hospital Camp Pendleton, Preventive Medicine Department

Vaccine Distribution Program

Building H-143

Marine Corps Base, Camp Pendleton, CA 92055-5191

Telephone: (760) 725-1233/1270 FAX: (760) 725-0564

- Please order your vaccines MONTHLY. Smaller orders allow us to improve our inventory control and reduce vaccine waste.
- Keep only maintenance levels on-hand (50 doses or less of a single vaccine). Allow 72 hours for processing of all orders.
- The *Vaccine Usage Report* and COPIES of current temperature logs or graphs from vaccine storage units are REQUIRED with every order.
- For Vaccine Stand Down Evolutions, please provide the date of the evolution and date of excess vaccine return at the time of the order.

Unit / Facility Name: \_\_\_\_\_ *Please use the same name with each order*

Unit / Facility Address (Building Number): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

Person Completing Form: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Requested Vaccine Pick Up Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Maintenance Doses  Stand Down Date of Stand Down: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date of Return: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## 1<sup>st</sup> Endorsement

To: I-MEF Preventive Medicine Officer / MILVAX Agency Representative

Via: MSC Surgeon's Office (1<sup>st</sup> Marine Division / 3<sup>rd</sup> Marine Air Wing / 1<sup>st</sup> Marine Logistics Group / MEF HQ Group)

Forward recommending approval / disapproval.

**MRRS Validation:** YES / NO

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

## 2<sup>nd</sup> Endorsement

To: I-MEF Preventive Medicine Officer / MILVAX Agency Representative

Via: MSC Surgeon's Office (1<sup>st</sup> Marine Division / 3<sup>rd</sup> Marine Air Wing / 1<sup>st</sup> Marine Logistics Group / MEF HQ Group)

Forward recommending approval / disapproval.

**MRRS Validation:** YES / NO

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

Vaccine	Current Inventory	Doses Ordered	Doses Received	Vaccine Lot #	EXP Date	Comments
Adacel						
Anthrax						
DTap						
Gardasil						
HEP A (Adult)						
HEP B (Adult)						
IPV						
JEV						
Meningococcal						
MMR						
PPD						
Rabies						
Smallpox						
Tetanus						
Twinrix						
Typhoid						
Varicella						
Yellow Fever						
Zostavax						
	Beneficiary Primary	Care Clinics	Only Below This	Line		
Boostrix						
HEP A (Peds)						
HEP B (Peds)						
HiB						
Pediarix						
Pneumoccal						
Pprevnar						
Rotateq						