



FOR OFFICE USE ONLY

Holding Point Code: YOR_NW

Requisition number:

**2026-2027 Infant and High-Risk Children Respiratory Syncytial Virus (RSV)
Prevention Program Product Order Form****SECTION 1 – INSTRUCTIONS FOR HEALTHCARE PROVIDER**

1. Complete all mandatory fields (*) missing information will result in delays to your order.
2. Maintain no more than one month supply of any product. Do not overstock your refrigerator.
3. Enter current refrigerator inventory amount. Enter "0" if there is no product.
4. Include the most current five business days of refrigerator temperature logs.
5. Email all pages to VaccineInventory@york.ca or fax to 905-830-0578.
6. Pick up your order once you receive a notification from York Region Public Health by telephone call or e-mail.

SECTION 2 – HEALTHCARE PROVIDER INFORMATION

*Holding Point Code: YOR_NW

*Healthcare provider/Practice name

*Order date (mm/dd/yyyy)

*Number of immunizer(s)

*Number of refrigerator(s)

*Type(s) of refrigerator: ☐ Bar ☐ Domestic ☐ Purpose-built

*Contact person

*Phone number

*Fax

*Email

Unit number

*Street number

*Street address

*City/Town

*Postal code

SECTION 3 – PICK-UP LOCATIONS*** Select pick-up location. Our office hours are 8:30 a.m. to 4:30 p.m., Monday to Friday at all locations.**

- ☐ Newmarket 17150 Yonge St. ☐ Richmond Hill 50 High Tech Rd. ☐ Markham 4261 Highway 7 E. ☐ Vaughan 9060 Jane St. ☐ Georgina 24262 Woodbine Ave.

SECTION 4 – ACCOUNTABILITY STATEMENT

By submitting this order, I verify on behalf of the practice that the refrigerator storing publicly funded vaccines, at the location listed above, maintains temperatures between **+2.0°C to +8.0°C**; meets MOHLTC Vaccine Storage and Handling [Protocols](#) and [Guidelines](#); maximum, minimum, and current temperatures are recorded at least twice daily. Furthermore, I verify that no more than one month supply of vaccine is stored at the location listed above; red-dotted and short-dated vaccines are used first; expired vaccines are never administered and are returned as wastage; a review of vaccine inventory and checking for expired vaccines has been completed before placing orders; and all due diligence has been taken to prevent the wastage of publicly funded vaccines. I understand that I am required to maintain accurate temperature logs that must be kept onsite for a minimum of two years and made accessible to York Region Public Health upon request. Upon vaccine pick-up, I will have the necessary materials for the safe transport of publicly funded vaccines including properly conditioned hard-sided, insulated container, digital temperature monitoring device, and appropriate packaging material.

*Print Name

*Signature

*Date (mm/dd/yyyy)

Complete and submit pages 1 and 2

SECTION 5 – PRODUCT INVENTORY AND REQUEST

Trade Name	Eligibility	Current Inventory (Number of Doses)	Number of Doses Requested
Beyfortus® 50 mg	Infants born during the current RSV season with body weight < 5kg Infants born on or after April 1, 2026 and less than 8 months of age with body weight < 5 kg		
Beyfortus® 100 mg	Infants born during the current RSV season with body weight ≥ 5kg Infants born on or after April 1, 2026 and less than 8 months of age with body weight ≥ 5kg Children 8 to 24 months of age who remain vulnerable to severe RSV disease through their second RSV season*		
Abrysvo® (Limit 2 doses)	Pregnant individuals from 28 through 36 weeks gestational age who will deliver during the RSV season		

*Refer to the eligibility criteria for [Ontario's Respiratory Syncytial Virus \(RSV\) Prevention Program for Infants and High-Risk Children](#) for further details.

(OPTIONAL) NOTES ON VACCINE ORDER

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Printed by/date:	Picked by/date:
Entered by/date:	Packed by/date:
Sorted by/date:	Audited by/date: