

**SCHOOL IMMUNIZATION CATCH UP (SICU) PROGRAM  
2011/2012 SCHOOL YEAR VACCINE ORDERING FORM**

**Hepatitis B Orders DUE BY NOVEMBER 11, 2011  
Varicella, Tdap and MCV Orders DUE BY MARCH 9, 2012**

Complete and submit this form to the following address at least three weeks before the first immunization clinic date.

**Misty Hall, RN BSN**  
Nursing Services Consultant  
Division of Immunizations  
Pennsylvania Department of Health  
Room 1026 | H & W Building  
625 Forster Street | Harrisburg, PA 17120-0701  
Phone: 717.787.5681 | Fax: 717.705.5513

- 1) Name of School District \_\_\_\_\_ County \_\_\_\_\_
- 2) Name of School(s) \_\_\_\_\_
- 3) Name of School Nurse (Contact Person) \_\_\_\_\_  
Address where vaccines are to be delivered: (no P.O. Box Addresses)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone # \_\_\_\_\_  
Fax# \_\_\_\_\_

- 4) Immunization Clinic Schedule (Doses and Dates)
- |                              |                              |                              |
|------------------------------|------------------------------|------------------------------|
| <b>Hepatitis B (1)</b> _____ | <b>Hepatitis B (2)</b> _____ | <b>Hepatitis B (3)</b> _____ |
| Doses _____ Date _____       | Doses _____ Date _____       | Doses _____ Date _____       |
| <b>Varicella</b> _____       | <b>MCV</b> _____             | <b>Tdap</b> _____            |
| Doses _____ Date _____       | Doses _____ Date _____       | Doses _____ Date _____       |

- 5) To ensure delivery does not occur during times when the school is closed please indicate below hours available for vaccine delivery.

Monday: \_\_\_\_\_  
Tuesday: \_\_\_\_\_  
Wednesday: \_\_\_\_\_  
Thursday: \_\_\_\_\_  
Friday: \_\_\_\_\_

All those requesting vaccines for school-based immunization clinics must submit a Final Report form including those schools that partner with a public health department. Vaccines will be delivered approximately two weeks prior to the immunization date(s). Please order adequate doses of needed vaccines at one time. The Division of Immunizations will not consider any additional requests. **Please ensure that the vaccines are stored appropriately upon delivery.** Should you have any questions regarding this order, please call Misty Hall, RN at (717) 787-5681.

For Office Use: Vaccine Storage and Handling Procedure Approved? Yes No