

FOR OFFICE USE ONLY				
Holding Point Code: YOR_NW				
Requisition number:				

### 2025-2026 Respiratory Syncytial Virus (RSV) Product Order Form

#### SECTION 1 — INSTRUCTIONS FOR HEALTHCARE PROVIDER

- 1. Complete all mandatory fields (\*) to request RSV products for eligible individuals who meet eligibility criteria for <u>Ontario's Respiratory Syncytial Virus (RSV) Prevention Programs</u>— missing information will result in delays to your order Note: A maximum of one month supply of doses will be released at a time to prevent product wastage.
- 2. Include the most current five business days of refrigerator temperature logs.
- 3. Email all pages to VaccineInventory@york.ca or fax to 905-830-0578.
- 4. Pick up your order once you receive a notification from YRPH 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)

\*Type of practice: General practice Pediatrician Other:

\*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 Richmond Hill Georgina

17150 Yonge Street 50 High Tech Road 24262 Woodbine Avenue

Vaughan Markham

9060 Jane Street 4261 Highway 7 East

#### 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 MOH 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.

Complete and submit pages 1 to 3



## 2025-2026 Respiratory Syncytial Virus (RSV) Product Order Form

### **SECTION 5 – ROUTINE RSV PREVENTION PROGRAM**

Product	Eligibility	Current Inventory (Number of Doses)	Number of Doses Requested
Beyfortus® 50 mg	Infants born on or after April 1,2025 and less than 8 months of age with body weight < 5 kg		
Beyfortus® 100 mg	Infants born on or after April 1,2025 and less than 8 months of age with body weight ≥ 5kg		
Abrysvo® Arexvy®	Adults 75 years & older  Note: Studies show a single dose of the RSV vaccine provides multi-year protection. An individual who has received a dose of RSV vaccine previously does not require another dose this season. Booster doses are not currently recommended.		

## SECTION 5 - HIGH RISK RSV PREVENTION PROGRAM (CONTINUED ON PAGE 3)

	High Risk Eligibility Criteria Code			
Product	*Refer to the eligibility criteria for <u>Ontario's Respiratory Syncytial Virus (RSV) Prevention Programs</u> for further details.			
	Child 8 to 24 months of age who remains vulnerable to severe RSV disease through their second RSV season <u>with</u> one of the following:			
	1A. Chronic lung disease of prematurity (CLD)*			
Beyfortus® 100mg	1B. Hemodynamically significant congenital heart disease (CHD)*			
Dose = 200mg, given as two 1mL	1C. Severe immunodeficiency			
injections of Beyfortus®100mg	1D. Down Syndrome / Trisomy 21			
, ,	1E. Cystic fibrosis with respiratory involvement and/or growth delay*			
	1F. Neuromuscular disease impairing clearing of respiratory secretions			
	1G. Severe congenital airway anomalies impairing the clearing of respiratory secretions			
Abrysvo®	2.Pregnant individual from 32 through 36 weeks gestational age*			
   Abrysvo®	Adult 60 to 74 years of age <u>and</u> one of the following:			
Arexvy®	3A. Resident of a long-term care home, Elder Care Lodge, or retirement home including similar settings*			
Note: Studies show a single dose of the RSV vaccine provides multi-year protection. An individual who has	3B. Patient in hospital receiving alternate level of care (ALC) including similar settings*			
	3C. Patient with glomerulonephritis (GN) who is moderately to severely immunocompromised 3D.			
	Patient receiving hemodialysis or peritoneal dialysis			
received a dose of RSV vaccine previously does not require another	3E. Recipient of solid organ or hematopoietic stem cell (HSC) transplant			
dose this season. Booster doses are not currently recommended.	3F. Individual experiencing homelessness			
	3G. Individual who identifies as First Nations, Inuit or Metis			



# 2025-2026 Respiratory Syncytial Virus (RSV) Product Order Form

SECTION 6 - HIGH RISK RSV PREVENTION PROGRAM (CONTINUED FROM PAGE 2)							
Recipient Initials	Date of (mm/dd.			eria Code des on Page 2			
(OPTIONAL) NOTES ON VACCINE	ORDER						
FOR OFFICE USE ONLY							
Printed by/date:	Entered by/date:		Sorted by/date:				
Picked by/date:	Packed by/date:		Audited by/date:				