COVID 19 Immunization Clinic
Vaccine Request Form

Algoma PUBLIC HEALTH
Santé publique Algoma

Please forward all requests to logisticsmic@algomapublichealth.com

Date Request Submitted	
Requestor (Name & Email Address)	
Date of Clinic	
Location of Clinic / COVax Vaccination Event	
Expected # of Vaccinations	

Vaccine Type	Doses Requested	Doses Approved	LOT #
Pfizer 12+ Multi dose vial (6 doses/vial) Dark Grey Cap			
Pfizer 12+ Single dose prefilled syringe			
Pfizer 5-11 Single dose vial (1 dose/vial) Light Blue Cap			
Moderna 6 mo+ Multi dose vial (5 full doses/vial) Royal Blue Cap 6 mo – 11 yrs 0.25 mL dose 12 + 0.5 mL dose			
Moderna 12+ Single dose prefilled syringe			

Not all vaccine brands and/or formats will be available at all times or at all locations. All publicly funded COVID-19 vaccines are considered to be equivalent and to provide the same protection against COVID-19 disease. Health care providers should use the vaccine (according to the products' age indications) that is available unless the patient has a medical contraindication toward a specific vaccine.