



## PEDIATRIC Biological Order Form

|   |             |              |                   |   |  |                                   |
|---|-------------|--------------|-------------------|---|--|-----------------------------------|
| <b>HOURS (use military time)</b>        |             |              |                   |   |  | <b>PIN:</b>                       |
| <b>DAY</b>                              | <b>OPEN</b> | <b>CLOSE</b> | <b>LUNCH TIME</b> |   |  | <b>Primary/Secondary Contact:</b> |
| Mon                                     |             | -            |                   | - |  | <b>Facility Name:</b>             |
| Tue                                     |             | -            |                   | - |  | <b>Address:</b>                   |
| Wed                                     |             | -            |                   | - |  | <b>City/State:</b>                |
| Thu                                     |             | -            |                   | - |  | <b>Zip Code:</b>                  |
| Fri                                     |             | -            |                   | - |  | <b>Primary/Secondary Phone:</b>   |
| Office closures over the next 2 months: |             |              |                   |   |  | <b>Primary/Secondary Fax:</b>     |
|   |             |              |                   |   |  | <b>Primary/Secondary Email:</b>   |

*All Texas Vaccines for Children (TVFC) providers will place a monthly order for a 75-day supply of vaccine inventory. Vaccine selections per group must total 100%.*

Please do not write in the grey areas

| VACCINE  | MAXIMUM STOCK LEVEL | % SELECTED | ORDER AMOUNT |
|--|---------------------|------------|--------------|
| <b>Diphtheria and Tetanus (DT)</b>   |                     |            |              |
| DIPHTHERIA AND TETANUS TOXOIDS ADSORBED (Sanofi), single-dose vial, 1 pack |                     |            |              |
| <b>Diphtheria, Tetanus, acellular Pertussis (DTaP)</b>                     |                     |            |              |
| DAPTACEL (Sanofi), single-dose vial, 10 pack                               |                     |            |              |
| INFANRIX (GSK), pre-filled syringe, 10 pack                                |                     |            |              |
| <b>DTaP/Hep B/IPV</b>  |                     |            |              |
| PEDIARIX (GSK), pre-filled syringe, 10 pack                                |                     |            |              |
| <b>DTaP-IPV</b>  |                     |            |              |
| KINRIX (GSK), pre-filled syringe, 10 pack                                  |                     |            |              |
| KINRIX (GSK), single-dose vial, 10 pack                                    |                     |            |              |
| QUADRACEL (Sanofi), single-dose vial, 10 pack                              |                     |            |              |
| <b>DTaP-IPV/Hib</b>  |                     |            |              |
| PENTACEL (Sanofi), single-dose vial, 5 pack                                |                     |            |              |
| <b>Hepatitis A</b>   |                     |            |              |
| HAVRIX (GSK), pre-filled syringe, 10 pack                                  |                     |            |              |
| VAQTA (Merck), pre-filled syringe, 10 pack                                 |                     |            |              |
| <b>Hepatitis B</b>   |                     |            |              |
| ENGRIX-B (GSK), pre-filled syringe, 10 pack                                |                     |            |              |
| RECOMBIVAX-HB (Merck), single-dose vial, 10 pack                           |                     |            |              |
| <b>Hepatitis A-Hepatitis B</b>   |                     |            |              |
| TWINRIX (GSK), pre-filled syringe, 10 pack                                 |                     |            |              |
| <b>Haemophilus influenzae type b (Hib)</b>                                 |                     |            |              |
| ACTHIB (Sanofi), single-dose vial, 5 pack                                  |                     |            |              |
| HIBERIX (GSK), single-dose vial, 10 pack                                   |                     |            |              |
| PEDVAXHIB (Merck), single-dose vial, 10 pack                               |                     |            |              |

| VACCINE  | MAXIMUM STOCK LEVEL | % SELECTED | ORDER AMOUNT |
|--|---------------------|------------|--------------|
| <b>Human Papillomavirus (HPV)</b>  |                     |            |              |
| GARDASIL 9 (Merck), pre-filled syringe, 10 pack  |                     |            |              |
| <b>Inactivated Polio Vaccine (IPV)</b>   |                     |            |              |
| IPOL (Sanofi), multi-dose vial, 1 pack   |                     |            |              |
| <b>Meningococcal Conjugate Vaccine A/C/Y/W-135 (MCV4)</b>  |                     |            |              |
| MENACTRA (Sanofi), single-dose vial, 5 pack  |                     |            |              |
| MENVEO (GSK), single-dose vial, 5 pack   |                     |            |              |
| <b>Meningococcal type B (MENB)</b>   |                     |            |              |
| BEXSERO (GSK), pre-filled syringe, 10 pack   |                     |            |              |
| TRUMENBA (Pfizer), pre-filled syringe, 10 pack   |                     |            |              |
| <b>Measles, Mumps, Rubella (MMR)</b>   |                     |            |              |
| M-M-R II (Merck), single-dose vial, 10 pack  |                     |            |              |
| <b>Pneumococcal Conjugate Vaccine (PCV13)</b>  |                     |            |              |
| PREVNAR 13 (Pfizer), pre-filled syringe, 10 pack   |                     |            |              |
| <b>Pneumococcal Polysaccharide Vaccine (PPSV23)</b>  |                     |            |              |
| PNEUMOVAX 23 (Merck), single-dose vial, 1 pack   |                     |            |              |
| <b>ROTAVIRUS</b>   |                     |            |              |
| ROTARIX (GSK), oral applicator, 10 pack  |                     |            |              |
| ROTATEQ (Merck), oral applicator, 10 pack  |                     |            |              |
| ROTATEQ (Merck), oral applicator, 25 pack  |                     |            |              |
| <b>Tetanus and diphtheria (Td)</b>   |                     |            |              |
| Td VACCINE (Grifols), single-dose vial, 1 pack   |                     |            |              |
| TENIVAC (Sanofi), pre-filled syringe, 1 pack   |                     |            |              |
| TENIVAC (Sanofi), single-dose vial, 1 pack   |                     |            |              |
| <b>Tetanus, diphtheria, acellular pertussis (Tdap)</b>   |                     |            |              |
| ADACEL (Sanofi), pre-filled syringe, 5 pack  |                     |            |              |
| ADACEL (Sanofi), single-dose vial, 10 pack   |                     |            |              |
| BOOSTRIX (GSK), pre-filled syringe, 10 pack  |                     |            |              |
| BOOSTRIX (GSK), single-dose vial, 10 pack  |                     |            |              |
| <b>The following vaccines are shipped separately.<br/>Allow additional time to receive these vaccines:</b> |                     |            |              |
| <b>Varicella</b>   |                     |            |              |
| VARIVAX (Merck), single-dose vial, 10 pack   |                     |            |              |
| <b>Measles, Mumps, Rubella, Varicella (MMRV)</b>   |                     |            |              |
| PROQUAD (Merck), single-dose vial, 10 pack   |                     |            |              |

*NOTE: Products may be substituted without notice due to supply limitations from the manufacturer.*

**Date of Order**

Texas Department of State Health Services  
Immunization Unit

**Primary/Secondary Signature**

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Stock No. EC-68-1  
Rev. 12/2020