



State of Nevada
 Dept of Health and Human Services
 Nevada State Immunization Program
 4150 Technology Way, Ste 210
 Carson City, NV 89706
 Fax to (775) 684-8338

Nevada Cocooning Program for Pregnant Women

2016 - 2017 FLU SEASON

Influenza Vaccine Request Form

Facility Name:	PIN:
Primary Vaccine Coordinator:	DATE:
Direct Phone Line:	

Use this form to request NSIP Flu Vaccine at any time during the month. Use the "Nevada Cocooning for Pregnant Women Flu Vaccine Inventory Accountability Form" to report monthly influenza vaccine usage.

COCOONING FLU VACCINE REQUEST			Doses on Hand	Doses Requested
Fluarix Quad GSK	NDC 58160-0905-52	0.5mL single dose syringe, 10-pack , 36mos +		



VACCINE PROJECT FOR PREGNANT WOMEN

