



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 for Pregnant Women**  
**2014-2015 SEASON**  
**Influenza Vaccine Request Form**

<b>Facility Name:</b>	<b>PIN:</b>
<b>Contact:</b>	
<b>Direct Phone Line:</b>	

**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.**

<b>COCOONING FLU VACCINE REQUEST</b>				<b>Doses on Hand</b>	<b>Doses Requested</b>
Fluarix - GSK	NDC 58160-0901-52	0.5mL single dose syringe, 10 pack, 36mo +	<b>QUAD</b>		



**VACCINE PROJECT FOR PREGNANT WOMEN**

