

VIMS: ORDER REQUESTS

DEFINING TERMS

VFC VFA Population for whom the vaccine is purchased; VFC= pediatric (0-18), VFA= adult (19-64).

Note If a product is licensed for both pediatric and adult patients and you are enrolled in both VFC and VFA, you will see two separate lines on the order form— one for each population. Questions about which line to choose can be addressed by the Immunization Program.

#Doses On Hand Number of doses reported in last Reconcile Request where the Vaccine, NDC, and VFC/VFA intention match.

Doses Weekly Average number of doses administered per week rounded to the nearest whole number.

Order Increment The multiple used when ordering, based on package size.

Rec # Doses Recommended number of doses to order based on your usage history and Order Schedule. The specific equation is noted directly above the order detail.

Note This calculation is based on averages and does not consider seasonality or other practice specific variables and is, therefore, only a recommendation. You should order the quantity needed for your practice.

Order # Doses **Required Field** The number of doses you would like to order. Enter desired quantities for each line in the Order # Doses column, including zero quantities. This value must be a multiple of the Order Increment.

Appd # Doses Number of doses approved to order by the Immunization Program. Provider staff should leave this blank.

Practice Inventory

Requests

Transfer




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Reconcile

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Reports

Line	Vaccine	Brand	NDC	VFC VFA	Packaging	# Doses on Hand	# Doses Weekly	Order Increment	Rec # Doses	Order # Doses	Appd # Doses	Cost	Total
1	HPV	Gardasil®9	00006-4119-03	VFA	10 pack - 1 dose vial	8	2	10	30	<input type="text"/>		\$116.220	\$0.000
3	HPV	Gardasil®9	00006-4119-03	VFC	10 pack - 1 dose vial	0	0	10	0	<input type="text"/>		\$145.070	\$0.000
2	TDAP	Boostrix®	58160-0842-11	VFA	10 pack - 1 dose vial	17	3	10	30	<input type="text"/>		\$24.360	\$0.000