Florida SHOTSTM FLU PRE-BOOKING

Contact Information

www.flshots.com

Free help desk: 877-888-SHOT (7468) Monday – Friday, 8 A.M. to 5 P.M. Eastern



1. FLU PRE-BOOKING

All VFC flu pre-booking requests must be entered into Florida SHOTS. You will be able to enter your request when flu pre-booking begins for the next flu season. Only the Primary/Secondary contacts and the Enrollee will have access to enter this request.

Please log into Florida SHOTS to complete this request.

Select "Vaccine Inventory" from the Florida SHOTS menu, and click "Flu Pre Booking."



This will open the Flu Pre Booking page. If you are the Primary/Secondary contact or the Enrollee for multiple locations, you will see all PINs listed here.

Flu F	Flu Pre-Booking								
		Presentation	Previous Flu Seasons			Pre Booking Current Flu Season 2018-2019			
VFC Pi	n Effort		Doses Ordered in 2015-2016	Doses Ordered in 2016-2017	Doses Ordered in 2017-2018	Requested Doses	Approved Doses	Doses Ordered	% FulFilled
	All	All	740	620	350	0	0		
	VFC/PED	0.25 Syringe (10 doses)	360	210	150	0	0	0	
291006	VFC/PED	0.5 Single Dose (10 doses)	200	370	150	0	0	0	
	VFC/PED	FluMist (10 doses)	180			0	0	0	
	VFC/PED	Multi Dose Vial (10 doses)		40	50	0	0	0	
	All	All	430	320	330	0	0		
	VFC/PED	0.25 Syringe (10 doses)	160	110	100	0	0	0	
291069	VFC/PED	0.5 Single Dose (10 doses)	150	210	210	0	0	0	
	VFC/PED	FluMist (10 doses)	120			0	0	0	
	VFC/PED	Multi Dose Vial (10 doses)			20	0	0	0	
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1. FLU PRE-BOOKING (cont.)

On this page, you will see the following columns:

- Effort Who should receive this vaccine
- Presentation The types of flu vaccines available for pre-booking request
- Previous Flu Seasons Lists the amounts pre-booked in previous flu seasons
- Current Flu Season
 - Requested Doses The amount you pre-booked for the current season
 - Approved Doses The amount VFC approved
 - Doses Ordered The amount of flu vaccine that has been ordered
 - % Fulfilled How much of your pre-booked request has been fulfilled

Pre-Booking Upcoming Flu Season

You will enter your pre-book requests for the upcoming flu season in these fields, and click **"Submit"** to submit this request to the VFC office for approval.

		Presentation	Previous Flu Seasons			Pre Booking Current Flb Season 2018-2019		
VFC Pin	Effort		Doses Ordered in 2015-2016	Doses Ordered in 2016-2017	Doses Ordered in 2017-2018	Requested Doses	Approved Doses	Deses Ordered % FulFilled
	All	All	740	620	350	0	0	
	VFC/PED	0.25 Syringe (10 doses)	360	210	150	170	0	0
291006	VFC/PED	0.5 Single Dose (10 doses)	200	370	150	200	0	0
	VFC/PED	FluMist (10 doses)	180			0	0	0
	VFC/PED	Multi Dose Vial (10 doses)		40	50	60	0	0
	All	All	430	320	330	0	0	
	VFC/PED	0.25 Syringe (10 doses)	160	110	100	100	0	0
291069	VFC/PED	0.5 Single Dose (10 doses)	150	210	210	240	0	0
	VFC/PED	FluMist (10 doses)	120			0	0	9
	VFC/PED	Multi Dose Vial (10 doses)			20	10	0	0

You will have the ability to edit these amounts at any time during the flu pre-booking season. After the season has closed, you will need to contact your VFC representative for any changes.

2. VFC FLU ORDER REQUEST

All VFC flu requests are submitted electronically in Florida SHOTS. The VFC Program office will approve your order request and submit the request to the CDC for processing.

Log into Florida SHOTS. Use the following information to enter and complete your site's flu Order Request.

Open the Order Request page as you do when placing regular vaccine orders. You will see a button to create a new VFC/PED flu order request. This button will only be active after 50% of your pre-booked amount has been shipped or when open ordering begins.

c	PIN: Org Name: Site Name: entral Pharmacy:	CHARLES BOTTOM TAMPA FAMILY HE CHARLES BOTTOM No Edit Site Infe	M HC (V ALTH CI I HC	(FCPIN: 700273) ENTERS <u>Temp Logs for P</u>	V IN: 700273	VFC Shipping Address Line 1:5611 SHELDON RD Line 2: City: TAMPA State: FL Zip: 33615	VFC Shipping Contact Info Phone: (813)397-5320 Fax: (813)866-0929 Email: NOTVALID@FLSHOTS.COM Contact: FARRAR,KEENAN Change
order Reque	sts						
Order Request#	Туре	Inv As Of Date		Status	Created Date Created By	Last Update Date Last Updated By	
125692	VFC/PED Scheduled	04/27/2018	0	Terminated	2018-04-27 09:41 FARRAR,KEENAN	2019-01-02 11:24 TerminateReguest: FARF	AR,KEENAN
125569	VFC/PED Scheduled	03/02/2018	0	Orders Generated	2018-03-02 13:12 NUNEZ RIVERA,ROSELLINE	2018-03-05 13:49 COBB, JIM D	
125270	VFC/PED Scheduled	02/27/2018	0	Terminated	2018-02-27 15:31 NUNEZ RIVERA, ROSELLINE	2018-03-02 11:19 TerminateRequest: NUNE	Z RIVERA, ROSELLINE
120410	VFC/PED Scheduled	12/15/2017	0	Orders Generated	2017-12-15 13:01 NUNEZ RIVERA, ROSELLINE	2017-12-18 10:48 SWEIGERT, WENDY NIC	COLE
120374	VFC/PED Scheduled	12/15/2017	0	Terminated	2017-12-15 07:36 LANSING, JENNIFER	2017-12-15 07:37 TerminateRequest: LANS	ING,JENNIFER
				< <	Page 1 of 10	> >	
					Effort: VFC/PED	Add New VFC/PED Scheduled Order Request Add New VFC/PED Flu Order Request	

When you click on the **"Add New VFC/PED Flu Order Request"** button you will be brought to the Order Request – Doses Requested and Approved page. You will not complete an inventory page, as you do for a regular vaccine order. **Only presentations that are available for ordering will be displayed.**

Flu Order Request - Doses R	Requested And Ap	proved			ت 📀	raining Environme		
(Goto Bottom) Order F	Organization: TAMi Request Create Date: 01/02	PA FAMILY HEALTH CENTE /2019	RS		Order Request Sta Order Reques Request Ty Pri	tus: ** New ** st #: /pe: VFC/PED Flu int		
VFC PIN: 291006								
Name of Physician's office, practice, clinic, etc. OSBORNE CENTER					Contact Person FARRAR, KEENAN			
Delivery Address (Number and Street - No PO Boxes) 4620 N 22 ST TAMPA, FL 33610					Telephone (813)272-5240 x5006 Fax (813)247-5591			
Provider's designated ordering schedule is: B2: B	i-monthly 1st through 15th of F	eb / Apr / Jun / Aug / Oct / Dec.						
The Provider orders Vaccines of Type: Both (Direc	tShip and Non-DS)							
Presentation: 0.5 Single Dose (10 doses)								
Brand Name	Packaging \$ per dose		# of Doses [*] Requested	# of Doses* Approved	Total Cost to VFC for Doses Approved	Doses Available		
Flulaval 19515-0912-52	10 Single Do \$ 14.	se Syringes 4300			\$ 0.00	200 doses		
Certer Request Notes								
Requested Doses by Presentation Summary								
0.5 Single Dose (10 doses) 200 0 0 0 - select - >								
Goto Tool Total Cost to VFC for this Order Request: \$ 0.00 Request Complete - Ready for VFC Approval								

2. VFC FLU ORDER REQUEST (cont.)

Please pay close attention to the "Doses Available" column. You are allowed to order this amount of the presentation.

Flu Order Request - Doses	Requested And Ap	proved				Training Environme
[Goto Bottom] Order	Organization: TAM Request Create Date: 01/02	PA FAMILY HEALTH CENTE	RS		Order Request St Order Reque Request 1 P	atus: ** New ** ost #: Type: VFC/PED Flu rint
VFC PIN: 291006						
Name of Physician's office, practice, clinic, etc.					Contact Person	~
Delivery Address (Number and Street - No PO Boxes) 4620 N 22 ST TAMPA, FL 33610					Telephone (813)272-6240 x5006 Fax (813)247-5591	
Provider's designated ordering schedule is: B2: E	Bi-monthly 1st through 15th of I	Feb / Apr / Jun / Aug / Oct / Dec.				
The Provider orders Vaccines of Type: Both (Dire	ctShip and Non-DS)					
Presentation: 0.5 Single Dose (10 doses)				1		
Brand Name	Pack \$per	aging dose	# of Doses* Requested	# of Doses*	Total Cost to VFC for Doses Approved	Doses Available
Flulaval 19515-0912-52	10 Single Do \$ 14.	ose Syringes 4300			\$ 0.00	200 doses
Order Request Notes						
Requested Doses by Presentation Summary	,					$\overline{}$
Presentation	Doses Available	Requested Doses	Approved Doses		Reason for Overage	
0.5 Single Dose (10 doses)	200	0	0	select	×	
(Goto Top) Total Cost to VFC for this Order Request:	\$ 0.00					
Request Complete - Ready for VEC App	oval			Order G	uantities Approved - Ready for Export	

If you enter an amount that exceeds that number, you will receive a pop-up stating that the request quantity must be less than or equal to the doses available. Please contact your VFC representative if you need more doses.



If you do not receive the pop-up, that means VFC has an adequate amount of that presentation to fulfill additional requests. You will need to select a reason for overage at the bottom.

Requested Doses by Presentation Summary								
Presentation	Doses Available	Requested Doses	Approved Doses	Reason for Overage				
0.5 Single Dose (10 doses)	200	250 *	0	select				
[Goto Top] Total Cost to VFC for this Order Request:	\$ 0.00			First order of vaccine types/brand Increased (decreased) clinicians at site New Provider or First Order for the provider One time event occurring in the next order period Other providers in the area have eligibility changes Other providers open/close clinics				
Request Complete - Ready for VFC Appro	Ran out of VFC doses & replacing private stock used Seasonality d Vaccine expiring before next scheduled order							

2. VFC FLU ORDER REQUEST (cont.)

As with regular vaccine orders, when you are ready to submit your order you will check the box **"Request Complete – Ready for VFC Approval,"** then click **"Submit."** Please make sure your temperature logs are up-to-date before doing so. If they are not, your order will be suspended until all missing temperatures are entered. You will not be notified of this until you click the submit button.

Total Cost to VFC for this Order Request:	\$ 0.00	
Request Complete - Ready for VFC Approva	l	Order Quantities Approved - Ready for Export (Differences between Doses Approved and Doses Requested exist)
Submit	Return to OrderRequest List	Go to Service Site

After you submit your order, VFC will approve the order and submit it to the distributor for processing. Flu orders are usually delivered within 2 to 3 business days of submission to the distributor.