



Renfrew County and District Health Unit
 "Optimal Health for All in Renfrew County and District"

COVID-19 VACCINE CLINIC SUMMARY

Date:
Clinic Location:
Clinic Contact:

Name of Vaccine & Diluent (if applicable)	Lot # (s)	Doses Dispensed	# Extra Doses	# Doses Wasted	# Doses Administered	COVax		Doses Returned
						# Consents entered	# No Data Collection	



Wastage			
Please note two signatures are required for reporting			
Reason(s) for Wastage	Name (Printed)	Signature	Designation

Comments (ex: doses allocated to In-Home)

Please email completed form to covid19vaccine@rcdhu.com