



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

COVID-19 Epinephrine ORDER FORM

Order Date:		
Facility:		
Street Address:		
City/Town:		
Contact Person(s):		
Contact Number:		
Product	DISTRIBUTION	
Epinephrine Inj. USP 1 mg/ml Ampule	Number of Ampules Requested:	Number of Ampules Distributed:
RCDHU INVENTORY TEAM USE ONLY		
Name of Staff		
Date of Delivery		
Time of Delivery		
Lot #(s)		
Expiry		

Confirmation of Delivery:

Name: _____ Signature: _____
Receiving staff