



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 Returned	COVax		Initials
						# Consents entered	# No Data Collection	



Wastage		
Please note two signatures are required for reporting		
Reason(s) for Wastage	Signature	Initials

Name (Printed)	Designation	Initials

Please email completed form to covid19vaccine@rcdhu.com