

Immunization Forms Order Information

Screening Questionnaire for Child and Teen Immunization

The Screening Questionnaire can be downloaded from the Immunization Action Coalition website at <http://www.immunize.org/catg.d/p4060.pdf>

Immunization Consent and History Form

This form can be ordered in bulk from the Department of Health and Senior Services at no cost to the provider. To order forms, please use the following process:

- Log onto DHSS Request for Forms site: <http://www.dhss.mo.gov/warehouse/>
- Click on “DH-48 - Request for Forms (downloadable word.doc)”
- Enter desired quantity (each pad contains 50 forms)
- Enter form number: IMMP-8M
- Enter name of form: Immunization Consent and History
- Enter relevant contact info
- Fax to DHSS at 573-751-1574

Notification of Vaccination Letter

This letter can be downloaded from the Immunization Action Coalition website at <http://www.immunize.org/catg.d/p3060.pdf>

Missouri Immunization Record

This record can be downloaded from the Department of Health and Senior Services website at: <http://www.dhss.mo.gov/living/wellness/immunizations/pdf/RecordCard.pdf>

It can also be ordered in bulk from the Department of Health and Senior Services at no cost to the provider. To order records, please use the following process:

- Log onto DHSS Request for Forms site: <http://www.dhss.mo.gov/warehouse/>
- Click on “DH-48 - Request for Forms (downloadable word.doc)”
- Enter desired quantity
- For blue record, enter form number: IMMP-1
- For blue record, enter name of form: Missouri Immunization Record (MO580-0242)
- For plastic sleeve, enter form number: IMMP-BAG
- For plastic sleeve, enter name of sleeve: IMMP-1 BAGS (COVER)
- Enter relevant contact info
- Fax to DHSS at 573-751-1574

Immunization Appointment Reminder Card

This card can be ordered in bulk from the Department of Health and Senior Services at no cost to the provider. To order forms, please use the following process:

- Log onto DHSS Request for Forms site: <http://www.dhss.mo.gov/warehouse/>
- Click on “DH-48 - Request for Forms (downloadable word.doc)”
- Enter desired quantity
- Enter form number: IMMP-18
- Enter name of form: **Immunization Appointment Reminder Card**
- Enter relevant contact info
- Fax to DHSS at 573-751-1574