


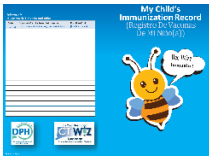


DPH IMMUNIZATION PROGRAM



CT WiZ HANDOUT & RECORD BOOKLET ORDER FORM FOR CT BIRTHING HOSPITALS

All materials are free of cost, please allow 2 weeks for processing and delivery.

		Number of Forms
	<p>CT WiZ Handout Please include the CT WiZ Handout in the birth packets for parents to take home. This information sheet comes bi-lingual in English and Spanish. *Note: Additional language translations can be found on our website: Notice to Patients About Reporting to CT WiZ If you need DPH to print and ship copies in additional languages, please make a note of the language(s) and quantity desired in your helpdesk ticket.</p>	
	<p>My Child's Immunization Record A pocket-sized personal 6-page booklet for parents to keep track of their child's shots and other routine tests during a child's checkup. This booklet comes bi-lingual in English and Spanish. <i>Updated in Jan 2024</i></p>	

For additional Educational Materials Order Forms, visit:

<https://portal.ct.gov/immunization/Providers-Landing-Page> (in the Patient Education section)

****TO PLACE YOUR ORDER****

Save this order form to your computer, fill it out, and submit a Helpdesk ticket to the Immunizations Program with your completed form attached:

<https://dph-cthelpdesk.ct.gov/Ticket>

In case we have questions about your order, please **type/print** your email and phone number:

Email: _____

Phone Number: _____

**THE BOX BELOW IS USED AS THE SHIPPING LABEL.
PLEASE PRINT CLEARLY AND PROVIDE MAIL STOPS OR FLOOR/AREAS.**

SHIPPING LABEL	
Date of Order:	_____
Birthing Hospital Name:	_____
Address:	_____

Attn:	_____