



TOLL FREE: 866-451-6337

FAX: 800-207-6946

www.VesselMedical.com



**FLU SEASON IS EXPECTED AT ITS HIGH
ALONG SIDE WITH COVID-19**

2021-2022 PREBOOK NOW!

LOWEST PRICE

We won't be beat!

GUARANTEE

Description		Age Indication	Doses Per U/M	Estimated # of Boxes or Vials
Seqirus Flucelvax® Quadrivalent Multi-Dose Vial		4 years +	10 Doses per Vial	
Seqirus Flucelvax® Quadrivalent Prefilled Syringe	Thimerosal, Mercury & Latex Free	4 years +	10 Syringes per Box	
Seqirus Afluria® Quadrivalent Multi-Dose Vial		6 months +	10 Doses per Vial	
Seqirus Afluria® Quadrivalent Prefilled Syringe	Thimerosal, Mercury & Latex Free	3 years+	10 Syringes per Box	SOLD OUT
Seqirus Afluria® Quadrivalent Pediatric Prefilled Syringe	Thimerosal, Mercury & Latex Free	6-35 months	10 Syringes per Box	SOLD OUT
Seqirus Fluad® Quadrivalent Prefilled Syringe	Thimerosal, Mercury & Latex Free	65 years +	10 Syringes per Box	
Sanofi Fluzone® Quadrivalent Pediatric Prefilled Syringe	Thimerosal, Mercury & Latex Free	6-35 months	10 Syringes per Box	SOLD OUT
Sanofi Fluzone® Quadrivalent Multi-Dose Vial		6 months +	10 Doses per Vial	SOLD OUT
Sanofi Fluzone® Quadrivalent Single-Dose Vial	Thimerosal, Mercury & Latex Free	6 months +	10 Doses per Vial	SOLD OUT
Sanofi Fluzone® Quadrivalent Prefilled Syringe	Thimerosal, Mercury & Latex Free	6 months +	10 Syringes per Box	SOLD OUT
Sanofi Fluzone® H9 Prefilled Syringe	Thimerosal, Mercury & Latex Free	65 years +	10 Syringes per Box	SOLD OUT
Sanofi Flublok® Quadrivalent Prefilled Syringe	Thimerosal, Mercury & Latex Free	10 years +	10 Syringes per Box	SOLD OUT

FLU SEASON RELATED PRODUCTS

Pneumovax-23 0.5ML			10 per Pack	
Tamiflu Capsules 75MG			10 per Pack	
Syringe with Needle, 3mL, Luer Lock, 25G x 5/8"			100/bx, 16 bx/cs	
Syringe with Needle, 3mL, Luer Lock, 25G x 1"			100/bx, 16 bx/cs	
Hypodermic Needle, 25G x 5/8"			100/bx, 10 bx/cs	
Hypodermic Needle, 25G x 1"			100/bx, 10 bx/cs	
Syringe, 3mL, Luer Lock			100/bx, 24 bx/cs	

Limited Supply. We ship on a first come, first served basis, until our stock runs out. Your facility won't be billed until the vaccine is shipped. Standard shipping charges will apply. We cannot accept returns on 2021-2022 flu vaccines.

Date: _____ Physician Name: _____ State License: _____ DEA Cert: _____
 Clinic Name: _____ Contact: _____
 Email Address: _____ Phone: _____ Fax: _____
 Shipping Address: _____
 Billing Address: _____
 Type of Credit Card: Visa MC Amex Card Number: _____ CW: - Expiration: _____
 Name on Credit Card: _____

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