**Order requests for COVID-19 Rapid Antigen Tests (RATs) should be submitted (at minimum) 1 week in advance to** **covid19supplies@gov.pe.ca** **by close of business every Friday for delivery the following week.**

|  |  |  |
| --- | --- | --- |
| COVID-19 RAT Order Form - Send to email: covid19supplies@gov.pe.ca**Warehouse USE ONLY****Date Order received:** |  | **Pharmacy Name:****Address:** **Contact Person:** **Contact Number:** **Contact email:** **Available Delivery Days and Hours:**  |
| **Product Description** | **Units** | **Amount Requested** (Maximum Limit of 5 cases per week) |
| **Flowflex – 5 tests per box** | **120 boxes / case**  |  |

*Note: All efforts will be made to fulfill the preferred type and volume of the RAT requests however orders are subject to substitutions and size based on availability of the RAT supply*.

**Pharmacy Notes for Warehouse Staff:**