Ontario

Ministry of Health
Ontario Government Pharmaceutical
and Medical Supply Services (OGPMSS)

Requisition for Naloxone

Please follow these instructions:

1. Download the form.
2. Fill out and save the form.
3. Attach the saved form in an email to ONP@ontario.ca

If you have any questions please contact the Ontario Naloxone Program at 416-326-7167.

Client Number	Date (yyyy/mm/dd)	Order Number **(For Ministry Use Only)**

Ship to

Organization Name

Unit Number	Street Number	Street Name	PO Box

City/Town	Province	Postal Code
	Ontario	

Ordered By

Last Name	First Name

Telephone Number ext.	Email

Catalogue Number	Description	Units/Containers	Total Number Required
658512170	Naloxone Hydrochloride 4mg Nasal Spray Kit	2x4mg pre-assembled kit	
658512200	Naloxone Hydrochloride 4mg Nasal Spray Refill	2x4mg nasal sprays	
658512180	Naloxone Hydrochloride 0.4mg/ml Injectable Ampoule Kit	2x0.4mg/ml pre-assembled kit	
658512131	Naloxone Hydrochloride 0.4mg/ml Injectable Ampoule Refill	10x0.4mg/ml injectable ampoules	

Additional Ordering Information (For Naloxone Distribution Lead Only)

Naloxone Distribution Leads are public health units or organizations designated to distribute naloxone to community-based organizations. Distribution Leads are required to provide the breakdown of "Total Number Required" (**Reported Above**) by "Organization Type".

		Nasal Spray Naloxone		Injectable Naloxone	
Organization Name	**Organization Type**	**Kits**	**Refill Boxes**	**Kits**	**Refill Ampoules**
	Naloxone Distribution Lead				
	Total				

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