

# VACCINE STORAGE INCIDENT REPORT

(For use when vaccine is wasted due to storage or power failure)

Name of Provider \_\_\_\_\_ Date of Loss \_\_\_\_\_

OSIIS# \_\_\_\_\_ (For Office Use - VFC# \_\_\_\_\_)

1. **Correct the situation.** Close the door, plug in the refrigerator/freezer, or transfer vaccine to a working storage unit with temperatures in the correct range.
2. **Mark the compromised vaccine** so that it will not be used until the status can be determined. Do not automatically throw out the affected vaccine.

**3. Record the following:**

The current temperatures of the unit in which the vaccine was stored.

Refrigerator: \_\_\_\_\_ Freezer: \_\_\_\_\_

The maximum and minimum temperatures reached.

Refrigerator: \_\_\_\_\_ Freezer: \_\_\_\_\_

The amount of time the temperature was out of range.

Refrigerator: \_\_\_\_\_ Freezer: \_\_\_\_\_

Has the vaccine previously been exposed to temperatures outside the recommended range?    Y    N

4. **Contact the manufacturer** of all vaccines that were stored at temperatures out of range. Record the manufacturer's recommendations on the Vaccine Storage Incident Inventory Form.

Manufacturer	Phone Number	Vaccines
Sanofi Pasteur	1-800-822-2463	DTaP, DTaP-Hib, DT, Td, Tdap, TT, Hib, Influenza, IPV, MCV4, MPSV4
Merck	1-800-637-2590	Hib, Hib-HepB, HepA, HepB, HPV, Measles, Mumps, Rubella, MMR, MMRV, PPV23, Rotavirus, Varicella, Zoster
GlaxoSmithKline	1-888-825-5249	DTaP, DTaP-HepB-IPV, Tdap, HepA, HepB, HepA-HepB, Influenza
Wyeth	1-800-999-9384	Hib, PCV7
Novartis	1-800-244-7668	Influenza
Medimmune	1-877-633-4411	Influenza
Mass Biologics	1-617-474-3000	Td, IGIM, TT
Akorn	1-800-932-5676	Td

5. **Calculate and record the cost** of each vaccine and the total cost of vaccine loss on the Inventory Form (pg 2).
6. **Describe the incident** that resulted in loss of vaccines, and describe actions taken to prevent a similar loss in the future on the Incident Report Form (pg 3).
7. **Sign the report.**
8. **Contact your Immunization Field Consultant** before faxing the completed form (3 pages). If your IFC cannot be reached, contact the Immunization Service at 405-271-4073.
9. **If the manufacturer recommends the vaccine not be used**
  - Immediately remove the vaccine from the storage unit and mark "Do Not Use" on the box
  - Set aside full boxes or vials to be picked up by the IFC, or send to OSDH-IMM, 1000 NE 10, OKC, OK 73117
  - Properly destroy partial boxes or vials of vaccine.
10. **Remove the spoiled vaccine from OSIIS inventory.** (If not on OSIIS, call 405-271-4073 for further instruction.)

## Vaccine Inventory Form

Vaccine Brand Name	Manufacturer	Lot Numbers	# of Doses	Cost per Dose	Total Cost	Manufacturer's Instructions
DTaP (Daptacel)	Sanofi Pasteur			13		
DTaP (Infanrix)	GSK			14		
DTaP-IPV (Kinrix)	GSK			32		
DTaP/HepB/IPV (Pedarix)	GSK			49		
DTaP-IPV/Hib (Pentacel)	Sanofi Pasteur			51		
DTaP - Hib (TriHIBit)	Sanofi Pasteur			27		
Pediatric DT	Sanofi Pasteur			29		
IPV (IPOL)	Sanofi Pasteur			12		
Hep A Pediatric (VAQTA)	Merck			13		
Hep A Pediatric (Havrix)	GSK			13		
Hep A - Hep B (Twinrix)	GSK			42		
Hep B - Ped/Adol (ENGERIX)	GSK			10		
Hep B - Ped/Adol (RECOMBIVAX)	Merck			10		
Hib (PedvaxHIB)	Merck			11		
Hib (ActHIB)	Sanofi Pasteur			9		
Hib (Hiberix)	GSK			9		
HPV (Gardasil)	Merck			106		
MMR-V (ProQuad)	Merck			83		
Meningococcal Conjugate (Menactra)	Sanofi Pasteur			80		
MMR (MMR II)	Merck			18		
Pneumococcal Conjugate (Prevnar)	Wyeth			71		
Pneumococcal Polysaccharide (Pneumovax)	Merck			21		
Rotavirus (Rotatech)	Merck			57		
Rotavirus (Rotarix)	GSK			83		
Tdap (BOOSTRIX)	GSK			29		
Tdap (ADACEL)	Sanofi Pasteur			28		
Varicella (Varivax)	Merck			64		
Td (Decavac)	Sanofi Pasteur			18		
Td (MassBiologics)	MassBiologics			15		
Td (Akorn)	Akorn			13		
Influenza (Fluzone)	Sanofi Pasteur			10		
Influenza (Fluvirin)	Novartis			8		
Influenza (FluMist)	MedImmune			15		
Influenza - adult				8		
TOTAL OF ALL VACCINE *						

