Provider/Practice Name: ______________________________ VFC PIN: ____________________________

**Personnel:**
1. ____________________________ is the Vaccine Coordinator for this office. The Coordinator will be responsible for maintaining appropriate vaccine handling and storage conditions, completing all necessary documentation, and ensuring all staff are properly trained in the handling and storage of vaccines.
2. ____________________________ will serve as back-up Vaccine Coordinator.
3. All personnel will receive annual education on proper vaccine storage and handling.
4. All personnel who handle vaccines will refer to this plan when necessary.
5. This vaccine management plan will be updated at least annually or with any change in personnel.

**Equipment:**
1. Stand-alone refrigerators where vaccines are stored will be capable of maintaining temperatures between 36° F to 46° F (2° C to 8° C).
2. Stand-alone freezers in which vaccines are stored will be capable of maintaining temperatures below 5° F (-15° C).
3. No refrigerator or freezer will be connected to an outlet with a ground-flow circuit interrupter or one activated by a wall switch. All storage units will be plugged directly into the wall outlet without the use of extension cords or power strips.
4. Every refrigerator and freezer unit will be equipped with a calibrated digital data logging thermometer that has a current Certificate of Traceability and Calibration and an external detachable probe in glycol. The glycol buffered probes must be located in the center of the storage compartment.
5. Temperature logs provided by the Kentucky Immunization Program will be used to record refrigerator and freezer temperatures for each unit’s minimum and maximum temperatures reached in the previous 24 hours. These temperature logs must be kept for a minimum of three years.
6. Bottles of water will be placed in the refrigerators and freezers to help stabilize temperatures.
7. “Do Not Unplug” stickers will be placed on the storage unit, by the wall plug and on the circuit breaker box.
8. For manual defrost storage units, frozen vaccines will be stored at the following location during defrosting:

(Write ‘not applicable’ if it is an auto-defrosting storage unit.)

**Procedures:**

1. **Accepting a vaccine shipment**
   a. Examine shipping container for any evidence of damage during transport.
   b. Examine cold-chain monitor cards for any evidence of exposure to out-of-range temperatures.
   c. Contact the KY VFC Program immediately if reasonable suspicion exists that the delivered product may have been mishandled.
   d. Contact the manufacturer when circumstances raise questions about the efficacy of a delivered vaccine. Follow manufacturer’s recommendations.
   e. Check expiration date to make sure vaccine has not expired.
   f. Place in appropriate storage immediately.

2. **Refrigerator and Freezer Monitoring**
   a. Temperature minimums and maximums for the previous 24 hours must be measured and documented at the start of the clinic day on the temperature log.
   b. If refrigerator temperatures are not between 36° F to 46° F (2° C to 8° C) or the freezer temperatures rise above 5° F (15° C), immediately adjust the temperature in the unit and check temperature again within one half hour. If the temperature is still not within range, immediately segregate (place in a bag, label “Do Not Use”) and place vaccine into a proper working storage unit. Contact the Kentucky Immunization Program to report the storage issue. Contact vaccine manufacturers for guidance regarding the viability of the vaccine. Follow manufacturer’s recommendations. Complete the Storage and Handling Incident Report and send to the Kentucky Immunization Program.
c. Complete a vaccine inventory reconciliation at least monthly and before placing a vaccine order.

3. Routine Procedures
   a. Download digital data logger monthly and upload into KYIR, email to DPH.KVP@ky.gov, or fax to 502-564-4760.
   b. Discard reconstituted vaccines not used within the interval allowed on the package insert.
   c. Do not open more than one multi-dose vial of a specific vaccine at a time.
   d. Always contact the appropriate vaccine manufacturer if there is any question about the storage or handling of any vaccine and inform the Kentucky Immunization Program.

4. In Case of a Power Failure or other Emergency
   a. Do not open the refrigerator or freezer during a power outage.
   b. If the outage is prolonged (more than two hours) or in the event of an emergency, please describe your procedure for alternate storage:

   

   c. If temperatures in the storage unit are out of recommended ranges, move vaccine into a proper working storage unit as soon as possible and contact manufacturers for guidance. Follow manufacturer’s recommendations, report, and submit incident report to your assigned Immunization Field Representative within 72 hours.

5. Ordering vaccine
   a. Inventory reconciliation must be completed before placing your monthly order.
   b. Keep a copy of your order form so that you can check your order when it arrives.
   c. Keep private stock and VFC stock separate and labeled as such.
   d. Contact the KY Immunization Registry Helpdesk at 502-564-0038 or KYIRHelpdesk@ky.gov for assistance.

Helpful Telephone Numbers

Kentucky Immunization Branch: (502) 564-4478
Kentucky Immunization Registry Helpdesk: (502) 564-0038 or email KYIRHelpdesk@ky.gov
KIB Field Representative: ________________________________

Vaccine Manufacturers:
Sanofi Pasteur: 1–800–822–2463
Merck: 1–800–609–4618
Glaxo Smith Kline: 1–866–475–8222 or 1–888–825–5249
Wyeth (Pfizer): 1–800–999–9384
MedImmune Inc.: 1–877–633–4411
Novartis Vaccines: 1–800–244–7668

Name (Print)          Title (Print)

Signature

Date Reviewed (must be reviewed annually)  Check the box to renew your satellite, temporary or off-site clinic pledge.

Kentucky Immunizations Branch  Phone (502) 564-4478  Fax (502) 564-4760
August 2020