

VACCINE STORAGE AND EMERGENCY RESPONSE PLAN

Post on outside of refrigerator for all staff

Practice Name:	
Primary Person Responsible:	Phone:
Secondary Person Responsible:	Phone:
Person with 24-hour access:	Phone:

For a Power Outage: If you do not have a generator, identify at least one location with a generator (hospital, 24-hour store, etc.). Before transporting, call the back-up location site to ensure that their generator is working.

#1. Location & Contact's Name _____ Ph# _____
#2. Location & Contact's Name _____ Ph# _____

How will you be notified of an outage? _____

Vaccines must be transported in an insulated cooler with a barrier separating the vaccines from the ice/cold packs. Frozen vaccines should only be transported or shipped in an emergency. Please contact the Immunization Program prior to transporting or shipping frozen vaccines.

If your emergency back up location is more than 30 minutes away and you have a large quantity of vaccine, consider renting a refrigerated truck to transport your vaccine.

Refrigeration company _____ Ph# _____

OTHER RESOURCES:

Local Health Department _____ Ph# _____

<p style="text-align: center;">PREVENT LOSS FROM EXPIRED VACCINES!! Check and rotate your stock to assure shortest dated vaccine is used first. (Post vaccine expiration date table.) Notify the state Immunization Program if vaccines are going to expire within 3-6 months.</p>

CHECK AND RECORD REFRIGERATOR AND FREEZER TEMPERATURES TWICE A DAY

- Once in the am when the practice opens.
- Once in the afternoon to allow for adjustments prior to the time the practice closes.

What to do if a power failure occurs, the refrigerator door was left open, the temperature was too cold, and the refrigerator plug was pulled or any other situation which would cause improper storage conditions:

1. Close the door and/or plug in the refrigerator/freezer.
2. Record the current temperature of the refrigerator/freezer.
3. Store the vaccines at appropriate temperatures. Make sure that the refrigerator/freezer is working properly or move the vaccines to a unit that is. Do not automatically throw out the affected vaccine.
4. Collect essential data on the reverse side of this sheet and notify the state health department.
5. **Call all manufacturers of affected vaccine(s) (see table on the backside) and ask to speak to medical advisor.**

Turn over for Emergency Response Worksheet

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