

Carolina Family Health Centers, Inc.

Refrigerated Vaccine Packaging Transport Checklist

- Use a hard-sided insulated cooler.
- Place a layer (at least 2 layers) of “**conditioned**” frozen water bottles in the transport container first. To “condition” water bottles, place them in a sink filled with several inches of cool or lukewarm water until you see a layer of water forming near the surface of the bottle. The bottle is properly conditioned if the ice block inside spins freely when rotated. Frozen water bottles that are not “conditioned” can freeze vaccines.
- Place 2 sheets of corrugated cardboard over water bottles to cover them completely.
- Place an insulating barrier layer of bubble wrap, packing foam, or Styrofoam at least 1 inch thick on top to cover the cardboard completely.
- Stack boxes of vaccines and diluents on top of insulating material. When the cooler is halfway full, place the digital data logger buffered probe in the center of the vaccines, and keep the digital data logger display outside the cooler. Add remaining vaccines and diluents to the cooler, covering the probe.
- Cover vaccines with another 1-inch layer of bubble wrap, packing foam, or Styrofoam.
- Place another sheet of cardboard on top of the barrier.
- Fill the remaining space in the cooler with an additional layer of “**conditioned**” frozen water bottles.
- Ensure there is no direct contact between frozen water bottles and vaccines.
- Close the lid and attach the digital data logger display and the printed inventory list to the top of the lid.
- **Document Digital Data Logger (DDL) Pre-delivery Temperature Reading (min/max):**
_____/_____
- Discuss vaccine transport rules with the courier.

Vaccine Transport Rules

- **Do NOT** place the vaccine container in the trunk of the vehicle. Transport vaccines in the passenger compartment of the vehicle.
- Record time and min/max temperatures: At start of transport, when container is opened, & when transport concludes.
- Deliver the vaccine directly to the transport facility.
- Deliver the vaccines to the Clinical Site Manager or hospital designee and obtain their signature.

CourierName (Print & Sign) *Date* ____/____/____
Time

Vaccines Packaged & Transport Rules Reviewed By *Date* ____/____/____

CFHC facility sending transport: _____

Delivery Receipt of Vaccines:

Vaccines Received By *Date* ____/____/____
Time

Facility receiving transport: _____

- Document DDL Delivery Temperature Reading (min/max): ____/____
- **NOTE:** Promptly unpack and place the vaccines into the appropriate storage unit upon arrival. (Between 35°F and 46°F [2°C and 8°C]). If the delivery temperature is not within range, then label the vaccines “Do Not Use” and store the vaccines at appropriate temperatures until a determination can be made.
- Please notify Vaccine Coordinator _____ at _____ if you have any questions, concerns, or temperature is out of range.

Return Receipt of Vaccines:

Vaccines Received By *Date* *Time* / _____

- Follow the packing instructions above for the return of vaccines
 - Vaccine return date: _____
 - Document Temperature Reading of off-site storage unit (min/max): _____/_____
 - Document DDL Delivery Temperature Reading (min/max): _____/_____ & Final DDL Return Temperature: _____
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Vaccines Transported:**Vaccine #1:**

Vaccine Name: _____ Lot # & Exp. Date: _____

Quantity: _____ Funding Source: _____

Vaccine #2:

Vaccine Name: _____ Lot # & Exp. Date: _____

Quantity: _____ Funding Source: _____

Vaccine #3:

Vaccine Name: _____ Lot # & Exp. Date: _____

Quantity: _____ Funding Source: _____

Vaccine #4:

Vaccine Name: _____ Lot # & Exp. Date: _____

Quantity: _____ Funding Source: _____