



Ohio Pandemic Vaccine Management Plan

- All Ohio Pandemic providers are required to use this vaccine management plan as a reference tool to ensure proper vaccine storage and handling practices.
- This document must be maintained at a location accessible to all health care personnel handling vaccines and near the vaccine storage units at your facility.

Name of Office / Clinic	
VFC or Pandemic PIN #	

VACCINE STORAGE PRACTICES LISTED IN THIS DOCUMENT ARE THE PRIMARY RESPONSIBILITY OF:

Pandemic Primary Vaccine Coordinator	Primary Phone Number	Secondary Phone Number
Pandemic Back-up Vaccine Coordinator	Primary Phone Number	Secondary Phone Number

1. RESPONSIBILITIES OF HEALTH CARE PERSONNEL WHO HANDLE VACCINES

The responsibilities of the pandemic primary vaccine coordinator and the pandemic back-up vaccine coordinator include the following vaccine management activities:

- Document the temperatures on the paper logs for each storage unit twice each day, including a once-daily morning minimum and maximum check.
- Manage all vaccine usage including access to the ImpactSIIS system; order pandemic vaccine using ImpactSIIS; reconcile pandemic vaccine inventories in ImpactSIIS immediately (i.e., within 24 hours); monitor vaccine storage conditions daily; assure vaccine loss is minimized, and ensure all vaccine receiving is performed according to current policy. Refer to state or local guidance for vaccine transport.

2. VACCINE STORAGE & HANDLING BASICS

A. Vaccine Storage and Handling Practices

- Open and correctly store vaccine shipments as soon as they arrive at your health care facility.
- Maintain proper vaccine storage temperatures: storage recommendations will vary by product.
- **Contact the Ohio Immunization Program during weekday business hours from 8 a.m. – 5 p.m. at 1 (800) 282-0546 for any vaccine storage issues. ODH personnel will discuss storage and handling issues to determine the next steps of action.**
- Store vaccines in the middle of the refrigerator or freezer compartment away from the coils, walls, floor, and cold air vent.
 - **Do not** store vaccines against the walls (or sides), in the doors, in the vegetable bin, or in the bottom of the refrigerator/freezer unit.
- Ensure stored vaccines have space around their containers for cold air circulation.
- Check the refrigerator/freezer doors to ensure they are closed at the end of each day.
- Place "**Do Not Unplug**" signs near the vaccine storage units' electrical outlets and circuit breakers.
- **Do not** store food in the vaccine storage units.

3. VACCINE SHIPPING, RECEIVING, AND COLD CHAIN FAILURES

- A. Staff accepting vaccine deliveries must be aware of the importance of maintaining the cold chain and of the need to notify appropriate staff of the arrival of the vaccine so that it can be handled and stored appropriately.

- B. If there are any discrepancies with the packing slip, concerns about the vaccine's viability, or possible cold chain failures with the vaccine shipment, immediately notify your practice's Pandemic Vaccine Coordinator(s).
 - If you suspect the vaccines may not be viable:
 - Mark the vaccine or diluents as "Do Not Use,"
 - Store the vaccine under proper conditions; and
 - Contact the ODH Immunization Program during weekday business hours from 8 a.m. – 5 p.m. at 1 (844)963-4829

4. VACCINE EXPIRATION AND SPOILAGE GUIDELINES

- A. If the vaccine becomes spoiled or expired, the Pandemic Primary Vaccine Coordinator or the Pandemic Back-up Vaccine Coordinator will be responsible for reporting these vaccines to the Ohio Immunization Program. Assigned health care personnel must:
 - Quarantine the suspected spoiled vaccine in the storage unit until the vaccine manufacturers and ODH determine the vaccine to be viable or non-viable.
 - Do not administer the suspected spoiled vaccine. Post a sign on the vaccine storage unit indicating that the vaccine must not be used until viability is determined.
 - Call ODH at 1 (844)963-4829 during weekday business hours from 8 a.m. – 5 p.m. to report the suspected spoilage.

Pandemic Primary Vaccine Coordinator Signature: _____ Date: _____

Pandemic Back-up Vaccine Coordinator Signature: _____ Date: _____

Note: Retain this plan as a tool for facility staff. Do not send the Vaccine Management Plan to ODH unless requested.