



## **Instructions For Use Of 2014-15 Influenza Accountability Sheet - Ohio VFC Program**

The 2014-15 Influenza Accountability Sheet is designed for use by Private Vaccine for Children (VFC) providers who do not use ImpactSIIS to account for their VFC vaccine use. This form will serve to document the status of VFC-eligible children who receive influenza vaccine at your provider office. Local health departments and Federally Qualified Health Centers are required to use ImpactSIIS to account for their VFC vaccine use.

### **Directions:**

1. Make numerous copies of the 2014-15 Influenza Accountability Sheet.
2. Select the month the VFC-supplied influenza vaccine is to be administered at your VFC provider office.
3. Complete the demographic information on the top of the form to identify your provider's name, address, city, zip, contact name, telephone number, VFC provider number and Medicaid number.
4. When a VFC eligible child receives an influenza vaccine, record the child's name, date of birth, and date of service - then place one check mark on the same line to document the child's VFC eligibility under the type of vaccine received (there are only 3 options)
  - \* **VFC eligibility option #1:** 0.25 ml dose of QIV preservative-free prefilled-syringe vaccine (for VFC children age 6 - 35 months).
  - \* **VFC eligibility option #2:** 0.5 ml dose of QIV preservative-free prefilled-syringe vaccine (for VFC children age 3 - 18 years).
  - \* **VFC eligibility option #3:** Flu Mist (LAIV) - single dose (QIV) live vaccine (for healthy VFC children age 2 - 18 years).
5. Complete one line under the '**Patient Eligibility Status**' section for each child who receives a VFC-supplied influenza vaccine.
6. When the sheet is full with 15 names, add up all the numbers of doses of each type of vaccine administered and record the total numbers on the line titled '**Total Doses Given for Each Category**'. Use additional forms as needed.
7. Keep the original copy of the 2014-2015 Influenza Accountability Sheet at your provider office with your other VFC program documentation. Ohio Department of Health VFC consultants will request to review these accountability sheets during site visits to verify VFC eligibility.
8. Repeat directions 1- 8 for VFC vaccine used each month.

Note: Federal VFC and State rules require that providers maintain all VFC records for a period of at least 6 years.

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