



VACCINE TRANSFER FORM

Instructions if returning wasted or expired vaccine to McKesson:

1. Complete this form and then fax to 614-564-2508 or email a copy to Vaccine@odh.ohio.gov.
2. Make a copy of the transfer form for your records.
3. After you receive the vaccine return label, enclose the vaccine transfer form in the shipping container with the expired/wasted vaccine.
4. Stick or tape the vaccine return label on the shipping container.
5. Mark the outside of the shipping container "Expired and/or Wasted Vaccine Enclosed".
6. Follow the return instructions from McKesson Distribution.

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|--|--|------------------------------|-------|
| Provider's Name | | Contact Name | |
| Provider's Address | | Telephone Number () | VFC # |
| City | | Zip Code | Date |
| Send Vaccine Return Label Via Email? YES NO | | Email Address: | |

Please complete ALL sections on this form

| DATE | NDC # | VACCINE TYPE | MANUFACTURER | LOT NUMBER | EXPIRATION DATE | NUMBER OF DOSES | TRANSACTION CODE (SEE BELOW) | COMMENTS |
|------|-------|--------------|--------------|------------|-----------------|-----------------|------------------------------|----------|
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TRANSACTION CODES - Enter above

| NOTES | ADDITIONAL INFORMATION WHEN TRANSFERRING OR RECEIVING VIABLE VACCINE FROM ANOTHER VFC PROVIDER | | DEFINITION |
|---|---|-------|--|
| | Name | VFC # | |
| You need the approval of the VFC Program prior to transferring vaccine to another VFC provider. You must use a data logger when transferring viable vaccine. An explanation of the events (e.g., power outage) that resulted in wasted vaccine should be included with the form. McKesson does not accept returns of opened vials of IPV. If a total of 9 or fewer doses of vaccine, do not return to McKesson, but dispose as biohazard. | Name | VFC # | 1 Viable vaccine transferred to another VFC Provider |
| | Name | VFC # | 2 Viable vaccine received from another VFC Provider |
| | All wasted and expired vaccine must be returned to McKesson using a return label requested through the Immunization Program. To receive a return label, fax completed Vaccine Transfer Form to 614-564-2508. | | 3 Wasted vaccine returned to McKesson |
| | | | 4 Expired vaccine returned to McKesson |

Questions? Call VFC Vaccine Order Support at (614) 752-1352 or Immunization Program Phone (800) 282-0546