

# EMERGENCY VACCINE MANAGEMENT PLAN (Sample)

Post on outside of storage unit for all staff

Phone Number:

Practice Name:	
Primary Person Responsible for Vaccines:	
Secondary Person Responsible for Vaccines:	
Person with 24-hours Access:	
Local Health Department:	

## How to Manage Vaccines in the Following Scenarios:

- **Power failure**
- **Vaccine storage unit failure**
- **Staff left the refrigerator door open**
- **Temperature was too cold**
- **Storage unit became unplugged**
- **Any other improper storage condition**

1. Close the door and/or plug in the refrigerator/freezer.
2. Record the current time and temperature of the refrigerator/freezer.
3. Move the vaccines to a refrigerator/freezer that is working properly and document the time of relocation. *Do not throw out the affected vaccine.*
4. Mark and quarantine the potentially compromised vaccines for easy identification.
5. Notify the VFC Program at 1-877-888-7468 Option 1.
6. Adjust thermostat as needed and monitor temperatures frequently.
7. Call manufacturers of all exposed vaccine(s) and submit documents\* to [floridavfc@flhealth.gov](mailto:floridavfc@flhealth.gov).

**In Case of 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 and they have room for the vaccine stock.

1. Location & Contact's Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_
2. Location & Contact's Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

How will you be notified of an outage? \_\_\_\_\_