



INFLUENZA VACCINE DISCARD OR TRANSFER FORM

- This form is used to report either the **discarding or transfer** (between practice locations) of **influenza vaccines only**.
- A separate form to report the discard or transfer of other Immunisation Program vaccines is available.
- Record all vaccine details, including batch numbers and the number of doses to be discarded or transferred.
- Vaccines should not be discarded before actual expiry date (if actual date not specified, expiry date is last day of the relevant month).
- Please email completed form to the Immunisation Program at QHIP-ADMIN@health.qld.gov.au.

Practice name	
VSP number	
Contact name	

If you are **discarding influenza vaccines**, please complete the following:

Discard date:		
Reason for discard:	<input type="checkbox"/> Expired vaccines	<input type="checkbox"/> Other, please specify:

If you are **transferring influenza vaccines**, please complete the following:

Vaccines transferred to (<i>practice name</i>)	
VSP number (<i>of above practice</i>)	
Transfer date	

Vaccine Brand	Batch Number	Quantity	Batch Number	Quantity	Batch Number	Quantity
Afluria Quad						
Fluad Quad						
Fluarix Tetra						
FluQuadri						
Vaxigrip Tetra						
Other:						