



# VACCINE DELIVERY REPORTING FORM

- This form is used to report vaccine deliveries issues that may have led to the vaccines being temperature-affected.
- The person who unpacked the delivery should complete this form.
- Please email the completed form to the Immunisation Program at [QHIP-ADMIN@health.qld.gov.au](mailto:QHIP-ADMIN@health.qld.gov.au).

<b>Practice name</b>	
<b>VSP number</b>	
<b>Contact name</b>	
<b>Order number</b>	
<b>Date delivered</b>	
<b>Date reported</b>	

<b>VSP to complete:</b>	<b>YES</b>	<b>NO</b>
Is this report being made by the person who unpacked the vaccines?		
Was the vaccine delivery checked within one hour of delivery?		
Was the vaccine delivery packed appropriately, i.e. with insulating material, ice bricks, cold chain monitor (CCM)?		
Did the esky feel warm?		
Had the ice bricks melted?		
Did the ice bricks have residual ice?		
Was the CCM in contact with the ice bricks?		
Where was the CCM located/placed inside the esky? <i>(Please describe)</i>		
Where was the heat monitor located/placed inside the esky? <i>(Please describe)</i>		
Any other relevant information or details? <i>(Briefly describe)</i>		

<b>Immunisation Program use only:</b>			
VSP action required	Discard vaccines	<b>YES</b>	<b>NO</b>
Reason for vaccine discard	CMM		<input type="checkbox"/>
	Heat affected		<input type="checkbox"/>
	Delivery time		<input type="checkbox"/>
	Damaged or tampered goods		<input type="checkbox"/>
IP action required	1. Email Toll for reorder		<input type="checkbox"/>
	2. Email CDU-VCO		<input type="checkbox"/>
	3. Email QHIP-ADMIN		<input type="checkbox"/>
Other comments:			