

Online Registry Vaccine Management: Reporting Vaccine Wastage and Returns

NYC Department of Health & Mental Hygiene Bureau of Immunization July 2014







Reporting VFC vaccine returns and wastage is a simple <u>3-step</u> process:

- 1. Enter VFC vaccine returns/wastage information
 - Complete all the fields in the "VFC Vaccines Return/Wastage form" below
- 2. Review/confirm VFC vaccine return/wastage information
- 3. Receive VFC Vaccine Return/Wastage receipt





Navigating to the Vaccine Returns and Wastage Tool



 The Shipping Contact will receive the vaccine return label, if that person needs to change please call 347-396-2405.





Step 1a. Enter returned and wasted vaccine information on VFC stock



- Select Vaccine Return/Wastage Reason, Vaccine Type, Brand, Manufacturer, Vaccine Lot, Expiration Date, and Unit Presentation from the dropdown lists for each lot of returned vaccine.
- Enter the number of doses returned for each vaccine lot.
- Click the Add Event + button to add additional vaccine returns.





Step 1b. Enter returns/wastage vaccine information on borrowed stock

lf you ha purchas	ave previously borrowed vaccines from yo ed vaccines that were used to replace wh	our VFC stock to us at you borrowed a	e on non-VFC eligib nd now need to rep	le patients, do you curr ort as return/wastage?	ently have in your VFC sto Yes C No	ck privately		^
Return privately purchased vaccine inventory which was used to replace VFC Inventory:								
	Vaccine Return/ Wastage Reason	Vaccine Type	Brand	Manufacturer	Vaccine Lot Exp. Da	ite	Unit # Presentation D	of Soses
Reset 🕸	Select	•	•	•	•		_	Add Event 💠
\Rightarrow	Improper storage upon receipt Refrigerator/Mechanical failure Power outage Opened multi-dose vial Refrigerator too cold					Note: You o section of t you need to an addition	can add up to 5 re he Vaccine Returns o add more returns al Vaccine Returns/	turns in this (*) /Wastage Form. If , complete and submit /Wastage Form(s).
Number o	Refrigerator too warm Expired vaccine Natural disaster							
	Recall Broken Vial\Syringe Vaccine drawn into syringe but not admin Lost or unacounted for vaccine Other wastage (non-returnable)						Clear C	ontinue

- If you are returning privately-purchased vaccine which was used to replace VFC Inventory (after borrowing VFC vaccine was documented), please select "Yes" to the question highlighted in blue, a new section will appear on the screen. If not, please select "No."
- For the privately-purchased replacement vaccine, select from each of the dropdown lists a Vaccine Return/Wastage Reason, Vaccine Type, Brand, and Manufacturer.
- Type in the vaccine lot, expiration date, and number of doses for the replacement vaccine.









VFC Vaccine Returns/Wastage:									
Vaccine Return/ Wastage Reason	Vaccine Type	Brand	Manufacturer	Vaccine Lot ${\cal P}$	Exp. Date	Unit # of Presentation Dos	es		
Reset 📎 Expired vaccine	▼ DTaP	DAPTACEL	▼ SANOFI PASTEI ▼	C3916AA -	12/02/201: -	SDV: 10-Pac 100	Add Event 🔶		
					Note: You Vaccine Re add more additional	can add up to 25 ret aturns/Wastage Form. returns, complete and Vaccine Returns/Wast	urns in this († If you need to I submit an age Form(s).		
If you have previously borrowed vaccines from your VFC stock to use on non-VFC eligible patients, do you currently have in your VFC stock privately purchased vaccines that were used to replace what you borrowed and now need to report as return/wastage? Yes ? No									
Number of Return Labels Requested									
						Clear Con	itinue 🤳		

- Please select the number of return labels needed based on the size of your vaccine return. A label is not necessary for reporting vaccine wastage events.
- Select







Step 2. Review/confirm VFC vaccine return/wastage information

VFC Vaccine Returns/Wastage:



- Review/confirm the return/wastage information.
- Select Change to update any incorrect or missing information.
- Select Confirm ✓ once all of the information is accurate.



Step 3. Receive confirmation of VFC vaccine return and wastage form submission

Thank you. This VFC Vaccine Return/Wastage form has been submitted by

The confirmation number is 323. A copy of this return has been emailed to



Sample Return Label

Please use the Printer-Friendly Format link below to print this confirmation and only insert the VFC Vaccine Return/Wastage Receipt with your vaccines in an empty shipping box. If you are unable to print the series, you can also print the email confirmation you will receive and include it in the vaccine delivery box.

- If returning vaccines, return label(s) will be sent to you from McKesson Specialty after you submit your form to the Bureau of Immunization. Please allow up to 2 weeks for delivery.
- · DO NOT mail any vaccine products directly to the Bureau of Immunization. They will be returned to you.
- DO NOT include ice packs.
- DO NOT send open vials, broken vials or syringes.
- · Give the packed and labeled box to UPS the next time a delivery is made to your site.
- Only the vaccines eligible for return that you originally reported on the vaccine return/wastage form will be accepted.
 Please do not add any additional vaccines to the box.
- Please DO NOT call McKesson Specialty, UPS, or Federal Express to arrange a pickup or you will be charged for the
 pickup. Below are samples of the return label and return envelope.
- Please e-mail <u>nycimmunize@health.nyc.gov</u> or call 347-396-2405 with your CIR facility code and/or VFC PIN if you have questions.











Step 3. Receive VFC Vaccine Returns/Wastage Receipt

NYC Department of Health & Mental Hygiene Bureau of Immunization Vaccines for Children Program

VFC VACCINE RETURN/WASTAGE RECEIPT

VFC Contact Information								
VFC PIN:	BAA 00023	Provider Name:	SEAVIEW MEDICAL BUILDING	Transact Date:	07/10/2014			
Shipping Contact Name:	MARY ATKINS	Phone/Ext:	(718) 668-3417	Fax:	(718) 668- 3420	Email:	DAWNS12@MSN.COM	

VFC Vaccine Returns/Wastage

VFC Return/Wastage #1 Vaccine Return/Wastage Reason: Brand: Expiration Date: DAPTACEL Expired vaccine 12/02/2013 Vaccine Type: Manufacturer: Unit Presentation: SANOFI PASTEUR SDV: 10-Pack DTaP Number of Doses: NDC: Vaccine Lot: C3916AA 49281-0286-10 100 Number of Return Labels Requested: 1

 Insert the VFC Vaccine Return Receipt with your returnable vaccine in a shipping box.





Contact



If you have questions regarding the Citywide Immunization Registry please email us at:

nycimmunize@health.nyc.gov



