

# VACCINE RECEIVING, STORAGE, AND HANDLING INCIDENT REPORT

## Naval Hospital Camp Pendleton Vaccine Distribution Program

Provider Name: HN B. Schmucately Unit / Facility: 11<sup>th</sup> Marines RAS

Date / Time of Incident: 04 / 12 / 07 0645 a.m. / p.m. Phone #: 760-725-0000

Unit / Facility Address (bldg #): 11<sup>th</sup> Marine Regiment, RAS Camp Pendleton CA  
(City) (State)

Type of Incident: Equipment failure  
(Power outage, equipment failure, failure to properly store, etc.)

Reported By: HN Schmucately Reported To: HMC Umptesquat, LCPO  
(Include name, rank, title)

### TEMPERATURE DATA

Date, time and temperature of units last documented  
prior to incident:

Refrigerator: \_\_\_\_\_  
Date Time Temperature

Freezer: \_\_\_\_\_  
Date Time Temperature

Date, time and temperature of unit when aware  
of problems:

Refrigerator: \_\_\_\_\_  
Date Time Temperature

Freezer: \_\_\_\_\_  
Date Time Temperature

Description of Incident (Describe how, when and where the vaccine loss occurred.)

On 4/5/07 I instructed the Corps Staff to start recording temperatures twice daily, checking to make sure temps are in range and logging them in. On 4/12/07 I returned from holiday leave to find that the temperatures in the refer unit were out of range.

Incident Resolution (Describe steps taken when you were aware of the problem – i.e. called the OOD, Prev Med Department.)

On 4/12/07 I notified HMC Umptesquat our LCPO of the problem. I informed the rest of the Corps Staff to suspend all immunizations until further notice. On 4/13/07 we notified the NHCP Preventive Medicine Department of the incident.

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Corrective Action Plan (Describe steps taken to assure that another loss does not occur in the future.)

- Ordered a new refrigeration unit
- Arranged an inservice for all Staff conducting immunizations
- Closer administration of staff involved in immunizations handling as a whole.
- Maintain temp logs 2 times a day and record, and send logs on a monthly basis, as needed and with every order to the NHCP Vaccine Distribution Program

## OTHER CONDITIONS:

1. Vaccines exposed to temperature variations outside recommended range: Yes   X   No
2. Water bottles are stored in the refrigerator Yes            No   X
3. Ice packs are stored in the freezer: Yes   X   No
4. Other: Temperatures not monitored 2 times a day.

**NOTE:** If the vaccine is wasted, complete the Vaccine Return Form and return all unopened vials on non-viable vaccine to the Naval Hospital Camp Pendleton Preventive Medicine Department (PMD) in the proper container. Bring the Vaccine, Receiving, Storage and Handling Incident Report, Vaccine Return Form and if possible the Vaccine Loss Statement with you to the PMD. Notification must be made as soon as possible to the office at 760-725-1270/1233 or by pager after hours to 760-293-0680. Return these vaccines within (48) hours of the incident.

**NOTE:** A copy of the temperature log **MUST** be submitted with any storage incident (i.e. where the temperatures were recorded “out of range” and vaccines were wasted as a result). If the incident was a result of a “receiving error” (HM did not store in refer unit immediately) please include names, ranks and titles of all parties involved.