



**SEPTEMBER 16, 2009**

## **Washington State H1N1 Vaccine Management Guidelines Check List**

### **I: Guidelines for Participation and General Immunization Practices**

- The local health jurisdiction (LHJ) is the point of contact for participation in the H1N1 Vaccine Program.
- All providers receiving or administering H1N1 vaccine must have a signed H1N1 Provider Agreement on file with the LHJ.
- Providers should review the H1N1 Provider Agreement and agree to follow the requirements listed in the Agreement.
- Providers may not charge for H1N1 vaccine or supplies received as part of the H1N1 Vaccine Program.
- Providers may charge a vaccine administration fee (more information will be provided under separate cover).

### **II: Guidelines for Screening, Administration and Documentation:**

- Administer vaccine according to the ACIP recommendations
- Include documentation in immunization records as required by statute 42 US Code 300aa-25 (Vaccine name, manufacturer, date administered, route/site, vaccine lot number, VIS publication date, signature and title of person administering vaccine, address of clinic where vaccine administered)
- Provide current Vaccine Information Statements (VISs) each time a vaccination is administered
- Review true contraindications to vaccine and discuss different indication for live versus inactivated vaccines
- Use appropriate needle lengths and comply with the ACIP recommendations for administration techniques
- Prepare syringes 'just in time' prior to vaccination.
- Report Vaccine Adverse Events by contacting 1-800-822-7967 or <http://vaers.hhs.gov/contact.htm>
- Maintain all records for at least 3 years (eligibility screening, temperature logs, reports, etc.).

### **III: Guidelines for Vaccine Ordering, Receipt and Reporting:**

- The LHJ is the point of contact for all vaccine ordering and distribution.
- The LHJ has the authority to approve, deny or adjust H1N1 vaccine orders.
- When an order is received, the provider will immediately check the order for accuracy and viability, and report any shipment problems to the LHJ.
- The provider will submit a refrigerator count (inventory on hand) on the H1N1 vaccine order form each time an order is placed.
- The provider will submit doses used since their last vaccine order on the H1N1 vaccine order form each time an order is placed.
- The provider will submit detailed doses administered data to the LHJ on a weekly basis to the LHJ as directed by the LHJ.
- The provider will submit a Provider's Report of Vaccine Usage on a monthly basis as directed by the LHJ.
- The provider will submit wasted/expired vaccine reports as required.
- Report forms will be made available to providers following confirmation of enrollment by the LHJ.

### **IV: Guidelines for Vaccine Storage and Handling:**

- Designate and train primary and back-up staff persons who will be available to receive and monitor H1N1 vaccine supplies.
- Maintain appropriate refrigerator/freezer storage temperatures and environment.
- Ensure that working, properly placed thermometers are located in compartments where vaccine is stored.
- Document temperatures twice daily.
- Contact the LHJ immediately for guidance on vaccine viability when temperatures are found to be out of range.
- If vaccines are exposed to out of range temperatures, do not immediately discard vaccine – mark do not use and store appropriately until directed by the LHJ to discard the vaccine.
- Rotate vaccine stock (i.e., place short-dated vaccine in front so it will be used first).

For more detail, see the Washington State Guidelines for H1N1 Vaccine Management on-line at:  
<http://www.doh.wa.gov/cfh/immunize/vaccine/vaccine-supply.htm>