

VACCINE RETURN AND ACCOUNTABILITY

PENNSYLVANIA DEPARTMENT OF HEALTH

Terms used in accountability of vaccines and determining the proper form to complete and submit to the Division of Immunizations (wasted-nonviable-nonreturnable or returnable-nonviable vaccines) for returning of expired/wasted vaccines for Federal Excise Tax Credit

EXPIRED: is any vaccine that has not been administered prior to the expiration date indicated on the vial or syringe.

OPENED: is a partially used multi-dose vial;
a vial that has been punctured;
a syringe with an opened safety cap; or
a vial missing the plastic cap.

UNOPENED: is a box of ten single dose vials with three doses administered – the remaining seven doses are considered “unopened”;
is a five pack of syringes with only two doses administered, the remaining three syringes are considered “unopened”; and
includes situations in which the original packaging (box) of any vaccine is missing but the vial/syringe still has the plastic cap/safety cap on and has not been punctured.

SPOILAGE: is any vaccine in a multi-dose vial, single dose vial or syringe that has been exposed to temperatures out of the recommended range, power outages or unit failure.

WASTED: is any vaccine that has been drawn up but not administered;
is a vial or syringe that is accidentally broken;
includes open/partial vials exposed to out-of- range temperatures, power outages, unit failures or expired vaccines.

The above descriptions should be considered when completing the Vaccine and Return Accountability Form.

All unopened non-viable vaccine, including influenza vaccine, if ordered through the Department of Health, should be returned to McKesson ARS Specialty for Federal Excise Tax credit **within six months after the expiration date**. However, vaccines that have expired more than 6 months previously will still be accepted. Diluent is not a vaccine and does not need to be returned.

If the vaccine being returned is a result of anything other than “expired” a Vaccine Incident Report and Worksheet (Section 6-F) must be submitted to the Department of Health with a copy of the Vaccine Return and Accountability Form within 5 days of the incident.

To return expired/non-viable vaccine to McKesson, follow these steps:

1. Fax a copy of the completed Vaccine Return and Accountability Form to the Vaccine Manager (717) 214-7223. Faxing this form will initiate a request for a return label. If you call FedEx or UPS directly you will be charged for the retrieval of the box(es)
2. Check the appropriate box on the return form to indicate if you have routine UPS service at this facility
3. McKesson will be forwarding UPS return labels in one of three ways:
 - By E-Mail to the primary VFC Contact indicated in PA-SIIS from uoltsupport@ups.com with a subject line – UPS Shipping API. Providers should receive UPS return label within 1 to 3 hours after Division of Immunizations staff enters the return in to the appropriate system (VTrckS)
 - One unique return label will be included per email
 - The return label will be coded with an internal tracking number used by McKesson – IT WILL NOT include the VTrckS return ID number required on the return form
 - Return labels cannot be photocopied or reprinted for multiple uses
 - If it is indicate three boxes will be used to return vaccines, the provider will receive three separate e-mails with one label per e-mail – the labels are not specific to any of the 3 boxes
 - Unused labels **must be discarded** and cannot be used on future returns
 - By routine US Mail addressed to the primary VFC Contact indicated in PA-SIIS – approximately 7 to 10 business days
 - By the UPS driver at the time of scheduled pick-up for those without routine UPS service

Sample of the e-mail

The email reads:

[UPS Label Delivery, 1Z2R43839097612737](#)

UPS Returns Label Delivery

This notice tells you that a UPS shipper has sent you an electronic label.

You can print and use this label to include in your outbound shipment, or send it to the consignee. The label will be available for 30 days.

Note: When retrieving your label below, we will provide you with both a UPS Returns Label and Commercial Invoice if the invoice was prepared by the original shipper.

[View UPS Returns Documentation Instructions](#)
[Retrieve Your Shipment Label](#).

4. Returns can be sent in the McKesson shipping container or a container of your own. If you use your own container, ensure that vials are secure so they don't break during transport
5. You **must** include a copy of the completed Vaccine Return and Accountability Form in each box with the non-viable vaccines being returned to McKesson. The **Vaccine Return ID number must** be included on this form. VFC Program staff will fax or e-mail the Vaccine Return ID information to the VFC contact once the Vaccine Return and Accountability Form is received by the VFC Program.
6. **DO NOT** return any vaccines **not** included on the original Vaccine Return and Accountability Form. A separate request must be submitted for additional returns.
7. Keep a copy of the completed form for your records.
8. UPS will pick up all boxes to return to McKesson, even when packages are shipped to you via FedEx, UPS or DHL.
9. Once you have the label and affix it to the box, simply give to your UPS driver the next time they are at your facility **within 30 days of receiving the return label**.
10. **IF** you indicated on the Vaccine Return and Accountability Form that your facility does not have routine UPS service staff at McKesson will make arrangements for a pick-up. The label will be created at the time of pick-up by the UPS driver.
11. **Do not** return vaccines prior to the expiration date **unless** they were exposed to temperatures outside of the recommended range for storing vaccines.

**VACCINE RETURN AND ACCOUNTABILITY FORM
PENNSYLVANIA DEPARTMENT OF HEALTH**

RETURNABLE – NON-VIABLE VACCINE

Date: _____	** VTrckS Return ID _____	VFC PIN #: _____
Site Name: _____		
Person Reporting: _____	Phone: _____	# of Shipping Labels needed _____
Does this facility have routine UPS service – please check the appropriate box: YES <input type="checkbox"/> NO <input type="checkbox"/>		
If yes, do you prefer to have UPS shipping label sent via e-mail? YES <input type="checkbox"/> NO <input type="checkbox"/>		
E-Mail Address: _____		

**** VTrckS Return ID number will be provided to the VFC Contact by fax or e-mail**

NON-VIABLE VACCINES TO RETURN TO MCKESSON

COMPLETION OF ALL COLUMNS IS REQUIRED

NDC #**	Vaccine	Manufacturer	Lot #	Expiration Date	# Doses	Reason Code

****The NDC Number can be found on each individual vaccine vial/syringe.**

Non-Viable – Returnable Vaccines Reason Code includes:

- A. Expiration date has passed
- B. Failure to store or handle properly (e.g. vaccine left out overnight, not put away upon arrival)
- C. Mechanical Failure (refrigerator/freezer failure)
- D. Power outage/Natural Disaster
- E. Refrigerator/Freezer too warm
- F. Refrigerator/Freezer too cold
- G. Vaccine spoiled in transit

If it is a partial vial it is considered wasted and non-viable – non-returnable and should be documented on the non-returnable section

Please fax completed Vaccine Return and Accountability Form to (717) 214-7223

**VACCINE RETURN AND ACCOUNTABILITY FORM
PENNSYLVANIA DEPARTMENT OF HEALTH**

WASTED- NON-VIABLE- NON-RETURNABLE

Date: _____	VFC PIN #: _____
Site Name: _____	
Person Reporting: _____	Phone: _____

ACCOUNTABILITY OF WASTED, NON-VIABLE – NON-RETURNABLE VACCINES

COMPLETION OF ALL COLUMNS IS REQUIRED

NDC #**	Vaccine	Manufacturer	Lot #	Expiration Date	# Doses	Reason Code

****The NDC Number can be found on each individual vaccine vial/syringe.**

Although wasted non-viable/non-returnable vaccines are not returned to McKesson ARS Specialty, the VFC Program must account and document this vaccine.

Properly dispose of all wasted non-viable/non-returnable vaccine.

Wasted – Non-Viable- Non-Returnable Vaccine Reason Code Includes:

- A. Vaccine drawn up but not administered
- B. Broken vial or syringe
- C. Lost or unaccounted for
- D. Open/partial vial exposed to out of range temperatures, unit failures or power outages
- E. Open/partial vial that has passed the expiration date
- F. All vaccines deemed **non-viable/non-returnable** must be properly disposed of according to the policy in place at your facility.

Please fax completed Vaccine Return and Accountability Form to (717) 214-7223