

Instructions for Completing the Wasted/Destroyed Form

To report vaccine as wasted/destroyed, use the Wasted/Destroyed Form. Please use the following link to access the form: [Wasted/Destroyed Form](#). A direct link to the form is also available on the VFC website.

By submitting this form, you are indicating the vaccines have been destroyed appropriately and will not be returned to McKesson. Make sure to complete all required fields. Forms with missing information will not be processed.

Note: When using a personal computer, most fields on this form will utilize drop-down menus. When using a mobile device, several questions will appear as radio buttons.

Section 1:

VFC PIN: Enter the VFC PIN for the site. PINs are five or six digits, and sometimes include one or two letters.

Person reporting: Enter the first and last name of the person reporting the wasted vaccine.

Site Name: Enter the full name of the provider site.

Phone Number: Enter the direct telephone number of the person reporting. Include the area code.

Email Address: Enter the email address of the person reporting.

Will an incident report be submitted for these vaccines? Answer Yes, No, or Incident report has already been submitted.

If the vaccine is being wasted due to a temperature excursion, a Vaccine Incident Report and Worksheet must be completed and submitted to the Division of Immunizations within five days of the incident.

Vaccine Wastage Reason: Choose a wastage reason from the list.

Sections 2 - 10:

Choose vaccine type: All vaccine National Drug Codes (NDCs) are listed. Select the correct NDC from the list. If you do not see your NDC, please choose from the brand name and syringe/vial to match your return. Do NOT select 'Other' and enter the NDC manually.

Influenza vaccines are an exception, since these NDCs change often. For influenza vaccines, please click 'Other' and enter the NDC manually. Format should be XXXXX – XXXX – XX. Include all numbers, even zeros. Missing or incorrect NDCs will delay processing.

Expiration date: Enter the expiration date indicated on syringe/vial. The date can be inputted manually or chosen from a pop-up calendar.

Number of doses: Enter the number of doses being returned. This value must be a number. All vaccines with the same NDC but different lot numbers can be entered as one.

Do you have another vaccine to report as wasted? To enter additional NDCs, please click Yes and then 'Next.'

Providers can enter up to 10 NDCs for the same wastage reason. If the wastage reasons differ, a separate form must be submitted for each reason.

Once all NDCs have been entered, click No and then 'Submit.' If more than 10 NDCs need to be entered, click Yes, Done with this form, and then 'Submit.' This will close and submit the form, so a new form can be started.

Once you click 'Submit,' the following message will appear confirming receipt of your form:

Thank you! Your submission has been received.

Please properly dispose of the vaccines in accordance with your site's policy and update your inventory to account for the wastage.

No communication will be sent from DOI once the request is processed.

Providers may contact ra-pavfc@pa.gov with questions.

Providers must destroy the vaccines and update the site's inventory accordingly. Once these steps have been taken, the wastage request is complete.

No further communications will be received from DOI.