



Vaccine Transport Monitoring Sheet

Provider Site Name: _____ VFC PIN: _____

Vaccine packed by: _____ Date: _____ Time prepared: _____

Type of vaccine: (Circle one) Frozen / Refrigerated
 Are diluents enclosed? (Circle one) Yes / No / NA
 Is inventory sheet attached? (Circle one) Yes/ No/ NA
 Acceptable refrigerator temp: 36.0° to 46.0°F / 2.0°C to 8.0°C
 Acceptable freezer temp: - 58.0° to 5.0° F / -50.0° to -15.0°C

Time (Circle one)		Temperature			
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	
a.m./p.m.		°C		°F	

Facility accepting vaccine: _____ Date: _____ Time received: _____

Type of vaccine: (Circle one) Frozen / Refrigerated
 Are diluents enclosed? (Circle one) Yes / No / NA
 Is inventory sheet attached? (Circle one) Yes/ No/ NA

The above vaccine has been transported in accordance with CDC guidelines and has been accepted and stored appropriately following transport.

Signature of person accepting vaccine: _____

Signature of person storing vaccine: _____

Are these signatures on inventory sheet? (Circle one) Yes/ No/ NA

****Temperatures should be recorded every 30 minutes. This is to ensure there is no cold chain failure. All vaccine transport sheets must be kept on file for three years and be made available upon request.**