

## VFC Vaccine Troubleshooting Record

Practice Name: \_\_\_\_\_

VFC#: \_\_\_\_\_

Month/Year: \_\_\_\_\_

Date	Time Problem Was Noticed	Out-of-Range Storage Unit Temp	Room Temp	Problem	Corrective Action Taken to Resolve Problem	Results (Include New Temp Within Required Range)	Time Problem Resolved	Staff (First & Last Name)

\*This form must be completed and faxed into our office at (210) 207-2867 Attn: Yvonne Puente when storage units holding VFC vaccine are found to be outside of the required temperature range.  
 Refrigerator: 35-46F or 2-8C Freezer: 5F/-15C or lower

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