Emergency Response Plan

POST ON OUTSIDE OF REFRIGERATOR FOR ALL STAFF

Practice Name: ___________________________ PIN: ___________________________
Primary Person Responsible: ___________________________ Phone: ___________________________
Secondary Person Responsible: ___________________________ Phone: ___________________________
Person with 24 hour access: ___________________________ Phone: ___________________________

WHAT TO DO IN THE EVENT OF A POWER OUTAGE (FILL IN THE BLANKS)

Electrical

Power Company __________________________________________________Phone___________________________
How will the primary/secondary person be notified of an outage after business hours? __________________________________________
Who lives closest to the clinic location that would know about an outage during the weekend? __________________________________________
Name of Facility with Generator____________________________________ Address____________________________________
Name of Point of Contact for Generator_______________________________________ Phone____________________________

1. **If possible, do not open the refrigerator or freezer during a power outage.** An unopened unit will keep colder longer.
2. Call the power company and ask how long the power will be out. How long will power be out? ______________________
3. Monitor the storage temperatures once the power goes out and record on the back of this sheet or a temperature log.
4. If it looks like the power outage will last for several hours, prepare vaccines for alternate storage. Label the vaccine boxes “VFC” or place them in a separate bag for easy identification.
5. ALTERNATE STORAGE PLAN: _______________________________________________________________________
   ___________________________________________________________________________________________________
   E.g., Put vaccines in a cooler surrounded by ice with a thermometer, move to location with a generator.
6. If the temperatures are out of range for several hours and vaccines are not moved to another functional storage unit, spoilage may have occurred. Mark the affected vaccine for identification. Do not administer these vaccines until manufacturers have been contacted. Do not automatically discard the affected vaccine.
7. Collect essential data on the reverse side of this sheet. Notify Virginia Vaccines For Children (VVFC) at 1-800-568-1929.

WHAT TO DO IN EVENT OF STORAGE UNIT MALFUNCTION / PROBLEM

The refrigerator door was left open, the plug was pulled, the temperature dial was set too cold or too warm

Refrigerator Repair Company: __________________________________________________Phone___________________________
Location of Circuit Breaker: ________________________________ Circuit # for Storage Unit__________________________

1. Record the current temperature of the refrigerator/freezer when the incident is discovered (see back of this sheet).
2. Close the refrigerator door and/or plug in the refrigerator to restore appropriate temperatures. Adjust the thermostat dial. Check your circuit breaker to see if the circuit for the refrigerator was tripped.
3. If the refrigerator cannot achieve appropriate temperatures within an hour, prepare vaccines for alternate storage. ALTERNATE STORAGE PLAN:
4. The unit may be malfunctioning if temperatures do not change after several hours. Call the refrigerator repair company.
5. Do **not** automatically discard the affected vaccine. Mark the affected vaccine for identification. Do **not** administer these vaccines until the manufacturers have been contacted. See the back of this sheet for manufacturers’ phone numbers.
Emergency Response Worksheet

What to do in case of a power failure or other event that results in vaccine storage outside of the recommended temperature range

Follow these procedures:
1. Close the door tightly.
2. Ensure the vaccine is kept at appropriate temperatures. Make sure the refrigerator or freezer is plugged in and working properly, or move the vaccines into proper storage conditions as quickly as possible.
3. Do NOT discard the affected vaccines unless directed to by your state/local health department and/or the manufacturer(s). Label the vaccines “Do Not Use” so that the potentially compromised vaccines can be easily identified.
4. Notify the state/local health department or call the manufacturer (see manufacturers’ phone numbers below).
5. Document the inventory of affected vaccines below and document the circumstances of the event and the actions taken on the Vaccine Storage Troubleshooting Record (see www.immunize.org/catg.d/p3041.pdf).

Vaccines Stored in Refrigerator

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Manufacturer</th>
<th>Lot #</th>
<th>Expiration Date</th>
<th># of Doses (i.e., not # of vials)</th>
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Vaccines Stored in Freezer

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<tr>
<th>Vaccine</th>
<th>Manufacturer</th>
<th>Lot #</th>
<th>Expiration Date</th>
<th># of Doses (i.e., not # of vials)</th>
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Important Contact Information:

Vaccine Manufacturers
- Crucell Vaccine Inc. ★ 1 (800) 533-5899
- CSL Biotherapies, Inc. (refer to Merck)
- Emergent BioSolutions ★ 2 (877) 246-8472
- GlaxoSmithKline (888) 825-5249
- InterCell Biomedical★ 3 (301) 556-4500
- MedImmune, Inc. (877) 633-4411
- Merck & Co., Inc. ● (800) 672-6372
- Novartis Vaccines (800) 244-7668
- Pfizer Inc. (800) 438-1985
- Protein Sciences Corp. (800) 488-7099
- sanofi pasteur (800) 822-2463

★Manufacturer for less commonly used vaccine:
1. typhoid
2. anthrax
3. Japanese encephalitis

●Questions on Afluria (CSL Biotherapies, Inc.) should be directed to Merck & Co., Inc.

Health Departments
Local Health Department phone __________________________ State Health Department phone __________________________

Adapted by the Immunization Action Coalition, courtesy of the Michigan Department of Community Health

Technical content reviewed by the Centers for Disease Control and Prevention

Immunization Action Coalition • Saint Paul, Minnesota • 651-647-9009 • www.vaccineinformation.org • www.immunize.org

www.immunize.org/catg.d/p3051.pdf • Item #P3051 (2/14)