Temperature Recording Form for Freezer – Fahrenheit

F°

Monitor temperatures closely!

1. Note the time in "Exact Time".
2. Record freezer temps twice each workday, including exact decimals.
3. If temps are out-of-range (outside **5.0°F to ⁻58.0°F**), see instructions to the right.
4. Record the min/max temps once each workday preferably in the morning.
5. Write your initials under "Staff Initials."
6. After each month has ended, save each month's log for five years.
7. Enter the data logger expiration dates:

Data Logger Exp. Date: _____

Backup Data Logger Exp. Date: _____

Month / Year _____ TVFC/ASN PIN _____

Facility Name _____

TVFC/ASN Coordinator _____

Danger! Take action immediately if temp is out of range— too warm (above 5.0°F) or too cold (below ⁻58.0°F).

1. Label exposed vaccine "do not use," and store it under proper conditions as quickly as possible. Do not discard vaccines unless directed to by your state/local health department and/or the manufacturer(s).
2. Record the out-of-range temps and the room temp with decimals in the "Action" area of this log.
3. Notify your vaccine coordinator or call the Texas immunization program or your local health department for guidance.
4. Document the action taken on the "Vaccine Storage Troubleshooting Record" on page four.

| Day | Exact Time | Current Freezer Temperature in °F | | | | | | | | | Staff Initials | Daily Temp | | ACTION | |
		5	4	3	2	1	0	⁻1	⁻2	⁻3 to ⁻58		Min	Max	Out of range (<⁻58.0° or >5.0°F)	Room Temp
1	a.m.														
	p.m.														
2	a.m.														
	p.m.														
3	a.m.														
	p.m.														
4	a.m.														
	p.m.														
5	a.m.														
	p.m.														
6	a.m.														
	p.m.														
7	a.m.														
	p.m.														
8	a.m.														
	p.m.														
9	a.m.														
	p.m.														
10	a.m.														
	p.m.														

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TVFC/ASN Coordinator _____

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2. Record the out-of-range temps and the room temp with decimals in the "Action" area of this log.
3. Notify your vaccine coordinator or call the Texas immunization program or your local health department for guidance.
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| Day | Exact Time | Current Freezer Temperature in °F | | | | | | | | | Staff Initials | Daily Temp | | ACTION | |
		5	4	3	2	1	0	⁻1	⁻2	⁻3 to ⁻58		Min	Max	Out of range (<⁻58.0° or >5.0°F)	Room Temp
11	a.m.														
	p.m.														
12	a.m.														
	p.m.														
13	a.m.														
	p.m.														
14	a.m.														
	p.m.														
15	a.m.														
	p.m.														
16	a.m.														
	p.m.														
17	a.m.														
	p.m.														
18	a.m.														
	p.m.														
19	a.m.														
	p.m.														
20	a.m.														
	p.m.														

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Month / Year _____ TVFC/ASN PIN _____

Facility Name _____

TVFC/ASN Coordinator _____

Danger! **Take action immediately if temp is out of range—too warm (above 5.0°F) or too cold (below ⁻58.0°F).**

1. Label exposed vaccine "do not use," and store it under proper conditions as quickly as possible. Do not discard vaccines unless directed to by your state/local health department and/or the manufacturer(s).
2. Record the out-of-range temps and the room temp with decimals in the "Action" area of this log.
3. Notify your vaccine coordinator or call the Texas immunization program or your local health department for guidance.
4. Document the action taken on the "Vaccine Storage Troubleshooting Record" on page four.

Day	Exact Time	Current Freezer Temperature in °F									Staff Initials	Daily Temp		ACTION	
		5	4	3	2	1	0	⁻1	⁻2	⁻3 to ⁻58		Min	Max	Out of range (<⁻58.0° or >5.0°F)	Room Temp
21	a.m.														
	p.m.														
22	a.m.														
	p.m.														
23	a.m.														
	p.m.														
24	a.m.														
	p.m.														
25	a.m.														
	p.m.														
26	a.m.														
	p.m.														
27	a.m.														
	p.m.														
28	a.m.														
	p.m.														
29	a.m.														
	p.m.														
30	a.m.														
	p.m.														
31	a.m.														
	p.m.														

Vaccine Storage Troubleshooting Record ☐ **Refrigerator** ☐ **Freezer**

Use this form to document any unacceptable vaccine storage event, such as exposure of refrigerated vaccines to temperatures that are outside the manufacturers' recommended storage ranges.

Date & Time of event *If multiple related events occurred, see "Description of event" below.*	Storage unit temperature *at the time the problem was discovered*		Room temperature *at the time the problem was discovered*	Person completing report	
Date:	Temp:		Temp:	Name:	
Time:	Min temp:	Max temp:	Comment:	Title:	Date:

Description of event
If multiple, related events occurred, list each date, time and length of time out of storage.

General description *i.e., what happened? Include any other information you feel might be relevant to understanding the event.*

Estimated length of time between event and last documented reading of storage temperature in acceptable range:
(36.0°to 46.0°F [2.0° to 8.0°C] for refrigerator; -58.0° to 5.0°F [-50.0° to -15.0°C] for freezer

Inventory of affected vaccines, including lot #s and whether purchased with public or private funds.
Use separate sheet if needed, but maintain the inventory with this troubleshooting record.

At the time of the event, what else was in the storage unit? *For example, were there water bottles in the refrigerator?*

Prior to this event, have there been any storage problems with this unit and/or with the affected vaccine?

Action taken
Document thoroughly. This information is critical to determining whether the vaccine might still be viable!

When were the affected vaccines placed in proper storage conditions?
Note: Do not discard the vaccine. Store exposed vaccine in proper conditions and label it "do not use" until after you can discuss with your state/local health department and/or the manufacturer[s].

Who was contacted regarding the incident? *For example, supervisor, state/local health department, manufacturer—list all.*

IMPORTANT: What did you do to prevent a similar problem from occurring in the future?

Results | Case

What happened to the vaccine? Was it able to be used? If not, was it returned to the distributor?
Note: For public purchase vaccine, follow your state/local health department instructions for vaccine disposition.