TEXAS

Vaccine Loss Report
Please fill out form completely. You may be contacted if additional information is required.

			PIN:				
Address:	Street						
	Street	City	Zip (County			
Contact:	Person Completing Form		Phone:				
·	Person Completing Form						
Date loss was	discovered:						
Circle Reason							
1. Expired			5. Failure to store properly upon receipt				
2. Natural Disaster/power outage			6. Vaccine spoiled in transit7. Mechanical Failure				
3. Storage temperature too warm4. Refrigerator temperature too cold		8. Spoiled	i ranure				
Itemige	Tarior voniporation von voru	9. Other					
Explanation o	f Loss (required entry):				_		
-							
					_		
In order to ens	sure that this will not happ	en again the follow	ing stens will/have h	een taken:			
in order to em	sare that this will not happ	ion again, the follow	ing steps will have e				
	o notify LHD or HSR 90 days h	nefore vaccines evnire (it	floss due to expiration)		_		
☐ Trained staff to	o notify LHD or HSR 90 days be orotate stock using the shortest	dated product first (if lo	ss due to expiration)	Dor USD (if loss of			
☐ Trained staff to	o rotate stock using the shortest o take immediate action to corre	dated product first (if lo	ss due to expiration)	D or HSR (if loss o	lue		
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Texas Department of State Health Services Immunization Branch



TEXAS Vaccine Loss Report Page 2 Addendum

			NDC	Expiration	# D
Vaccine	Manufacturer	Lot No.	Number	Date	Lo
	1				
				Total	
Circle Reason(s)) for Loss:			Doses	
 Expired Natural Di Storage ter 	isaster/power outage imperature too warm or temperature too cold	5. Failure to store properly6. Vaccine spoiled in trans7. Mechanical Failure8. Spoiled9. Other			
For HSR or LHI	D use supporting doc	rumentation or additiona	l comments only: _		

