

Freezer Temperature Log

Days 1-15 Month/Year _____

Record temperatures twice (2x) a day.

1. Write your initials and the time of day.
2. Place an "X" next to the current temperature.
3. Record the temps twice each workday
4. Record the min/max once each workday-preferably in the morning
5. If the temperature is too warm or too cold, follow the actions steps listed on reverse side.
6. At the end of the month, file this log and save for 3 years.

Unit Name/Location _____

Thermometer type: °F (Fahrenheit) °C (Celsius)

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Staff Initials															
Time															
Min/Max Temp															

Freezer Temperatures

8°F	≥13°C																
7°F	-14°C																
6°F																	
Danger! Temperatures above 5°F/-15°C are too warm! Immediately follow the action steps listed on reverse side.*																	
5°F	-15°C																
4°F																	
3°F	-16°C																
2°F																	
1°F	-17°C																
0°F																	
-1°F	-18°C																
-2°F																	
-3°F	-19°C																
-4°F																	
-58 to -5°F	-50 to -15°C																

ISDH Immunization Program Toll Free Number: (800) 701-0704

*Record problem, Actions taken and Outcome on reverse side.

Actions Steps

1. Store vaccine under proper conditions as quickly as possible.
2. Call the vaccine manufacturer(s) to determine if vaccine can still be used.
3. Ask for a Case # from each manufacturer
4. Call your ISDH Field Representative.
5. Record problem, actions taken and outcomes below.

Date/Time & Initials	Problem (Too Warm, Too Cold, Power Failure, etc)	Actions Taken	Outcome

Manufacturer Quality Control Office Telephone Numbers (as of 4-15-2018)

Manufacturer/ Distributor	Telephone Number	Products	
Biotest Pharmaceuticals	(800) 458-4244, Opt 2	HBIG	
Centers for Disease Control & Prevention Drug Service	(770) 488-7100	Distributor for Diphtheria antitoxin	
GlaxoSmithKline	<u>Temperature excursions</u> (888) 593-5977 <u>Vaccine Service Center</u> (866) 475-8222	Bexsero® Boostrix® Engerix-B® Fluarix® FluLaval® Havrix®	Hiberix® Infanrix® Kinrix® Menveo® Pediarix® Rotarix® Twinrix®
Grifols USA, LLC (Mass Biologics)	(617) 474-3220	Td (generic)	
Grifols USA, LLC	(800) 520-2807	HBIG, IGIM, RIG, TIG	
MedImmune, Inc.	<u>LAIV customer support</u> (877) 358-6478 <u>General customer support</u> (877) 633-4411	FluMist®	
Merck	<u>National Service Center</u> (800) 672-6372 <u>Health Care Professional</u> (800) 609-4618 <u>Vaccine Customer Care</u> (877) 829-6372	Gardasil® 9 MMRII® PedvaxHIB® Pneumovax® 23 ProQuad®	RecombivaxHB® RotaTeq® VAQTA® Varivax® Zostavax®
Pfizer	<u>Medical Information Dept</u> (800) 615-0187	Prevnar™	TRUMENBA®
Sanofi Pasteur	(800) 822-2463	ActHIB® Adacel® Daptacel® DT (generic) FluZone®	IPOL® Menactra® Pentacel® Tenivac® QUADRACEL™

Freezer Temperature Log

Days 16-31 Month/Year _____

Record temperatures twice (2x) a day.

1. Write your initials and the time of day.
2. Place an "X" next to the current temperature.
3. Record the temps twice each workday
4. Record the min/max once each workday-preferably in the morning
5. If the temperature is too warm or too cold, follow the actions steps listed on reverse side.
6. At the end of the month, file this log and save for 3 years.

Unit Name/Location _____

Thermometer type: °F (Fahrenheit) °C (Celsius)

Day of Month	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Staff Initials																
Time																
Min/Max Temp																

Freezer Temperatures

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7°F	-14°C																
6°F																	
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1°F	-17°C																
0°F																	
-1°F	-18°C																
-2°F																	
-3°F	-19°C																
-4°F																	
-58 to	-50 to																
-5°F	-15°C																

ISDH Immunization Program Toll Free Number: (800) 701-0704

*Record problem, Actions taken and Outcome on reverse side.

Actions Steps

1. Store vaccine under proper conditions as quickly as possible.
2. Call the vaccine manufacturer(s) to determine if vaccine can still be used.
3. Ask for a Case # from each manufacturer
4. Call your ISDH Field Representative.
5. Record problem, actions taken and outcomes below.

Date/Time & Initials	Problem (Too Warm, Too Cold, Power Failure, etc)	Actions Taken	Outcome

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Manufacturer/ Distributor	Telephone Number	Products	
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Centers for Disease Control & Prevention Drug Service	(770) 488-7100	Distributor for Diphtheria antitoxin	
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Pfizer	<u>Medical Information Dept</u> (800) 615-0187	Prevnar™	TRUMENBA®
Sanofi Pasteur	(800) 822-2463	ActHIB® Adacel® Daptacel® DT (generic) FluZone®	IPOL® Menactra® Pentacel® Tenivac® QUADRACEL™