



Cold Chain Incident Report Form

Government-funded vaccines

Complete the Cold Chain Breach Incident checklist on the following page prior to contacting your **Regional Immunisation Coordinator (RIC)** for advice. **FAX** both pages of this form to the **RIC** in your area (see RIC contact details on next page)

RIC Name: _____ **Public health unit:** _____

RIC Fax No: _____ **RIC Telephone No:** _____

Report the **number of government-funded vaccines** involved in the cold chain incident in the table below. **Do not discard any of these vaccines before discussing the incident with your RIC.**

Adacel (dTpa)	Gardasil (HPV)	HBVax-II Adult	HBVax-II Paed	Hiberix (Hib)	Infanrix Hexa	Ipol (IPV)	Neisvac (MenCCV)	Pneumovax (23vPPV ³)	Prevenar (13vPCV)

Priorix (MMR)	Quadracel (DTPaIPV)	Rotateq (ORV ¹)	Twinrix (HepA/B)	Vaqta (Hep A)	Varilrix (VZV)	Fluvax	Influvac	Vaxigrip	Vaxigrip Jnr

Other vaccine (not listed above): _____

Date of Incident: _____ **Name of Notifier:** _____

Location/Address of Cold Chain Incident: _____

Phone: _____ **Fax:** _____ **Email:** _____

Type of incident: fridge failure , power outage , transport issue , vaccine expiry , other

Description of Incident: _____

Actions undertaken by practice/clinic reporting incident: _____

Further recommended actions from the RIC: _____

Signed: _____ **Date:** _____



COLD CHAIN BREACH (CCB) INCIDENT CHECK LIST

Follow steps 1-5 and complete the table below **prior** to contacting your **Regional Immunisation Coordinator (RIC)**. See RIC contact list at the bottom of the page for details of your nearest RIC.

1. Immediately isolate the vaccines in a **+2°C and +8°C** environment and clearly label 'do not use'.
2. Record the type and number of vaccines involved in the CCB, using the table of the previous page.
3. Contact the RIC as soon as possible, see contact details below.
4. Do not discard any vaccines until advice has been sought from your RIC.
5. Take active steps to correct and prevent the problem recurring.

Date of the breach	
What were the minimum and maximum temperature readings?	
What was the reading when the breach was noticed?	
How long was the temperature outside +2°C to +8°C?	
When was the thermometer last reset?	
When was the battery in the thermometer last changed?	
When was the accuracy of the thermometer last checked?	
How long do you think these problems have been occurring?	
Where is the temperature probe situated?	
Where are your vaccines stored in the refrigerator?	
Have any vaccines been pushed up against the cooling plate or a cold air outlet?	
What is the expiry date of the vaccines?	
Are the vaccines in their original packaging?	
Are the vaccines kept in a domestic refrigerator?	
If using a domestic refrigerator, are there water bottles in the doors, unused shelves and drawers?	
Does the refrigerator have a designated power source?	
Does the refrigerator have an alarm fitted?	
What do you think was the cause of the CCB?	
Has the cause of the CCB been rectified?	
Has anybody been vaccinated with potentially affected vaccines?	

REGIONAL IMMUNISATION COORDINATOR (RIC) CONTACT LIST

North Metro (upper) Tel: 9380 7745 Fax: 9380 7736	North Metro (lower) Tel: 9380 7746 Fax: 9380 7751	South Metro Tel: 9431 0217 Fax: 9431 0223	Wheatbelt Tel: 9622 4320 Fax: 9622 5752	Goldfields Tel: 9080 8200 Fax: 9080 8202	Great Southern Tel: 9842 7500 Fax: 9842 7534
Kimberley Tel: 9194 1643 Fax: 9194 1631	Midwest Tel: 9956 1964 Fax: 9956 1991	Carnarvon Tel: 9941 0519 Fax: 9941 0520	Pilbara Tel: 9158 9207 Fax: 9158 9220	South West Tel: 9781 2355 Fax: 9781 2382	