

# Temperature Excursion Reporting Form

This form should be used to document any temperature excursions that your site experiences. Keep detailed notes of all problems and resolutions on this form. All Temperature Excursion Reporting Forms must be uploaded into the MIIS. Uploading this form into the MIIS satisfies the Vaccine Program record retention requirement for maintaining documents for at least 3 years. **One Temperature Excursion Reporting Form must be completed for each out-of-range unit. You cannot report multiple out-of-range units on the same Temperature Excursion Reporting Form.**

Practice Name \_\_\_\_\_ PIN \_\_\_\_\_  
Staff Completing Form \_\_\_\_\_ Date of Excursion \_\_\_\_\_  
 Fridge  Freezer Name of Storage Unit Impacted \_\_\_\_\_

*Note: Please list the name of the storage unit as it appears in MIIS profile*

What is the Total Time the Vaccines Were Out of Range? \_\_\_\_\_  
Did the Storage Unit become too warm?  Yes  No  
If yes, what is the maximum temperature reached (C°)? \_\_\_\_\_  
Did the Storage Unit become too cold?  Yes  No  
If yes, what is the minimum temperature reached (C°)? \_\_\_\_\_

## Key Steps Taken:

Have the vaccines been quarantined and appropriately labeled "Do Not Administer"?  Yes  No

Were vaccines administered after the excursion began?  Yes  No

Has your Medical Director been informed of the temperature excursion?  Yes  No

What caused the temperature excursion?

Storage Unit Malfunction  Power Outage  Shipment/Delivery Issue  Vaccine Storage Problem

Other (*please explain*): \_\_\_\_\_

Is the storage unit back in the proper temperature range?  Yes  No What is the current temperature (C°)? \_\_\_\_\_

Please provide additional details of the cause of the temperature excursion: \_\_\_\_\_



**Vaccine Program**  
Massachusetts Department of Public Health | Immunization Division  
305 South Street, Jamaica Plain, MA 02130  
P: 617-983-6828 | E: [dph-vaccine-management@mass.gov](mailto:dph-vaccine-management@mass.gov)

**Please Note:** Please clearly indicate viability results as either viable, non-viable, or short-dated in the viability results column. When determining vaccine viability only use the website tools if it is the vaccine’s first excursion. If the vaccine has already experienced a previous excursion, always call the manufacturer directly for viability determinations. All manufacturers contact information can be found at [immunize.org](http://immunize.org). If you need additional space to track all lot numbers involved in the excursion, please utilize the table on Page 3.

Vaccine Name & NDC	Lot Number	Number of Doses	Expiration Date <small>(Include short-dated expiration)</small>	Previous Excursion Details	Viability Results	How Was Viability Determined	Manufacturer Case Number
HPV 00006-4121-02	ABC123	10	7/7/2025	1/3/23 +8.7C for 52 minutes	Viable	<input checked="" type="checkbox"/> Direct Call <input type="checkbox"/> Website	# 456789
						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	
						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	
						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	
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						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	

**IMPORTANT:** We highly suggest waiting to hear back from the Vaccine Unit regarding the continued use of any affected units/vaccines, but if the Vaccine Unit is not available and your site feels there may be missed opportunities to administer viable vaccines, it is at the discretion of your site’s Medical Director to approve continued used. Please have them sign below:

Medical Director name/credentials: \_\_\_\_\_

Date: \_\_\_\_\_



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Vaccine Name & NDC	Lot Number	Number of Doses	Expiration Date (Include short-dated expiration)	Previous Excursion Details	Viability Results	How Was Viability Determined	Manufacturer Case Number
						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	
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						<input type="checkbox"/> Direct Call <input type="checkbox"/> Website	
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## To Be Completed By Vaccine Program Staff Only

This page includes all follow-up actions regarding your site's temperature excursion that are being requested by the Vaccine Program. This page should be completed by Vaccine Program staff only. Please ensure the final copy, with the listed Vaccine Program follow-up actions is uploaded into the MIIS as part of the record retention policy.

Vaccine Program Comments:

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**Storage and Handling Issue Submission Required?**  Yes  No

If **Yes**, submit a storage and handling issue ([mini guide](#)) in MIIS for the non-viable vaccines listed above

If **No**, mark and date all boxes of vaccines impacted by the temperature excursion  Site has been informed

**Storage Unit Follow-Up Required?**  Yes  No

Your site must have your storage unit serviced by a technician  Yes  No

Your site must purchase a new storage unit  Yes  No

Your site will be receiving a new glycol bottle/digital data logger from the Vaccine Program  Yes  No

Other  Yes  No

*If yes, please explain:*

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**Approval to Remove Impacted Vaccines From Quarantine and Begin Administering?**

Yes  No



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