



Iowa Department of Public Health - Immunization Program Vaccine Temperature Log - Fahrenheit

Facility Name: _____ VFC PIN: _____ Month/Year: _____

Storage Unit (Main, 1, 2, 3): _____ Facility Review Signature: _____

Instructions: Check the temperatures in both the freezer/refrigerator units at least twice each working day. Write the actual temperature in the box that corresponds with the temperature, and record the time of the temperature readings, staff initials and alarm status. Vaccine temperature logs should be maintained for a minimum of three years.

Days 16-31

Day of Month	16		17		18		19		20		21		22		23		24		25		26		27		28		29		30		31	
Time of Day	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm		
Exact Time																																
Staff Initials																																
Alarm Triggered Y/N																																
REFRIGERATOR	≥ 49°	TOO WARM																														
	48°	OUT OF RANGE - TAKE IMMEDIATE ACTION																														
	47°	OUT OF RANGE - TAKE IMMEDIATE ACTION																														
	46°																															
	45°																															
	44°																															
	43°																															
	42°																															
	41°																															
	Aim for 40°																															
	39°																															
	38°																															
	37°																															
	36°																															
	35°																															
34°	TOO COLD																															
33°	OUT OF RANGE - TAKE IMMEDIATE ACTION																															
≤ 32°	OUT OF RANGE - TAKE IMMEDIATE ACTION																															
FREEZER	≥ 8°	TOO WARM																														
	7°	OUT OF RANGE - TAKE IMMEDIATE ACTION																														
	6°	OUT OF RANGE - TAKE IMMEDIATE ACTION																														
	5°																															
	4°																															
	3°																															
	2°																															
	≤ 1°																															

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If the recorded temperature is in the shaded zone, follow these steps:

1. Store the vaccine under proper conditions as quickly as possible.
2. Mark the vaccine "Do Not Use" while vaccine viability is being determined.
3. Call the manufacturer(s) of the affected vaccine(s).
4. Call the Iowa Immunization Program at 1-800-831-6293.
5. Document the action taken on the Emergency Vaccine Response Worksheet and Troubleshooting Record.