

**Freezer Temperature Log (Celsius)**

Circle: F1 F2

Circle: Combination Standalone

MONTH/YEAR: \_\_\_\_\_ PIN: \_\_\_\_\_

PRACTICE: \_\_\_\_\_

TELEPHONE NUMBER: (802) \_\_\_\_\_ - \_\_\_\_\_



**START OF BUSINESS DAY:** 1) Record an "X" in the box corresponding with the current temperature. 2) Initial & enter time. 3) Record the MIN & MAX. 4) Check for "ALARM".

**END OF BUSINESS DAY (1 hr before close):** 1) Record an "X" in the box corresponding with the current temperature. 2) Initial & enter time. 3) Check for "ALARM".

When "ALARM" is present, download and email the data logger file to [immunizationprogram@state.vt.us](mailto:immunizationprogram@state.vt.us) and call 800-640-4374 or 802.863.7638

Download data logger weekly (initial & date) Week 1: \_\_\_\_\_ Week 2: \_\_\_\_\_

DAY	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Time																
Initials																
Alarm	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
MAX																
MIN																
≥-14	CALL IMMEDIATELY if temperature is in shaded section, if you see ALARM, or if MIN/MAX falls within shaded area *															
-15																
-16																
-17																
-18																
-19																
-20																
-21																
-22																
-23																
-24																
-25																
-26																
-27																
-28																
↓																
≤-51	CALL IMMEDIATELY if temperature is in shaded section, if you see ALARM, or if MIN/MAX falls within shaded area *															

**Vaccine Storage Troubleshooting Log**

Date	Time	Temp	Incident	Actions Taken	Results	Initials
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		

\* Vermont Immunization Program Phone: 1.800.640.4374 802.863.7638 (24/7) Fax: 802.863.7395 Email: [ahs.vdhimmunizationprogram@vermont.gov](mailto:ahs.vdhimmunizationprogram@vermont.gov)

**Freezer Temperature Log (Celsius)**

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MONTH/YEAR: \_\_\_\_\_ PIN: \_\_\_\_\_

PRACTICE: \_\_\_\_\_

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Download data logger weekly (initial & date) Week 1: \_\_\_\_\_ Week 2: \_\_\_\_\_

DAY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Time															
Initials															
Alarm	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
MAX															
MIN															
≥-14	CALL IMMEDIATELY if temperature is in shaded section, if you see ALARM, or if MIN/MAX falls within shaded area *														
-15															
-16															
-17															
-18															
-19															
-20															
-21															
-22															
-23															
-24															
-25															
-26															
-27															
-28															
↓															
≤-51	CALL IMMEDIATELY if temperature is in shaded section, if you see ALARM, or if MIN/MAX falls within shaded area *														

**Vaccine Storage Troubleshooting Log**

Date	Time	Temp	Incident	Actions Taken	Results	Initials
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		

\* Vermont Immunization Program Phone: 1.800.640.4374 802.863.7638 (24/7) Fax: 802.863.7395 Email: ahs.vdhimmunizationprogram@vermont.gov



**Refrigerator Temperature Log (Celsius)**

Circle: R1 R2 R3 R4

Circle: Combination Standalone

MONTH/YEAR: \_\_\_\_\_ PIN: \_\_\_\_\_

PRACTICE: \_\_\_\_\_

TELEPHONE NUMBER: (802) \_\_\_\_\_ - \_\_\_\_\_



**DEPARTMENT OF HEALTH**

**START OF BUSINESS DAY:** 1) Record an "X" in the box corresponding with the current temperature. 2) Initial & enter time. 3) Record the MIN & MAX. 4) Check for "ALARM".

**END OF BUSINESS DAY** (1 hr before close): 1) Record an "X" in the box corresponding with the current temperature. 2) Initial & enter time. 3) Check for "ALARM".

When "**ALARM**" is present, download and email the data logger file to immunizationprogram@state.vt.us and call 800-640-4374 or 802.863.7638

Download data logger weekly (initial & date) Week 1: \_\_\_\_\_ Week 2: \_\_\_\_\_

DAY	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		
Time																															
Initials																															
Alarm	Y/N																														
MAX																															
MIN																															
≥9																															
8																															
7																															
6																															
5																															
4																															
3																															
2																															
1																															
≤0																															

**Vaccine Storage Troubleshooting Log**

Date	Time	Temp	Incident	Actions Taken	Results	Initials
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		
				Called Immunization Program <input type="checkbox"/> Emailed Data Logger Download <input type="checkbox"/>		