



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH
IMMUNIZATION PROGRAM

PLEASE COPY THIS FOR ALL HEALTH CARE PROVIDERS

IN YOUR PRACTICE

TO: All Users of State Supplied Vaccine

FROM: Mick Bolduc-Vaccines Coordinator

A handwritten signature in black ink, appearing to read "Mick Bolduc".

Connecticut Vaccine Program

DATE: October 26, 2012

SUBJECT: Hurricane Sandy

The primary purpose of this communication is to ensure that your facility is prepared for Hurricane Sandy that may impact Connecticut early next week.

Emergency Preparedness Checklist

With Hurricane Sandy scheduled to make landfall somewhere along the East early next week, all providers should take a moment to review their storage and handling practices with all relevant staff. Each practice should have a back-up protocol for vaccine recovery (see attached). Providers should take all steps necessary to safeguard the viability of their vaccine before the hurricane hits. Such steps include having a back-up generator on site in case power is lost, or making arrangements with a facility (local hospital, pharmacy, fire station, another practice, private residence etc.) to temporarily store vaccine that has a back-up generator. Make sure your continuously recording thermometer is working correctly and has paper to record the temperature in the unit. If you do have a power outage and do not have a back-up generator, do not assume the vaccine is no longer viable. Instead, record the date, time and temperature and contact the Immunization Program so that we can work with you to determine if the vaccine is still good to use. Remember do not discard or administer affected vaccines until you have discussed the viability of such vaccine with the Immunization Program. We appreciate you and your staff taking the necessary time to safeguard all vaccines in your possession and minimize any vaccine loss.

As always, if you have any questions, please feel free to contact the Immunization Program at (860) 509-7929.

Connecticut Immunization Program

Recommended Back-up Protocol for Vaccine Recovery

PRACTICE NAME: _____	PIN #: _____
CITY/TOWN: _____	PHONE NUMBER: _____
PERSON COMPLETING FORM: _____	DATE: _____

This document offers guidance for developing a vaccine disaster recovery plan. Included are steps to follow when your refrigerator or freezer malfunctions due to mechanical failure or natural disaster. *If you have any questions about vaccine transportation or stability call (860) 509-7929.*

I. Vaccine Recovery Plan

A. Designated Person(s)

Designate a primary and a back up person within your practice to:

- Monitor the operation of the vaccine storage equipment and systems daily;
- Track inclement weather conditions. Set up and maintain a monitoring/notification system during times of inclement weather or other conditions that would create a shut down in power. An alarm/notification system is recommended for practices with an inventory or \$5,000 or more;
- Assure the appropriate handling of the vaccine during the disaster or power outage.

Names of designated employees:

NAME	TITLE	HOME PHONE

B. Back-Up Systems

1. If you do not have a back-up generator, identify a location with one. This may be the local hospital, pharmacy, fire station, another practice, or an employee's home. Make arrangements with the site to store your vaccine there when weather predictions call for inclement conditions (severe ice/snow storms, hurricanes etc.) and when your vaccine storage equipment cannot be fixed or the power cannot be restored within 6 hours.

Document the name(s) of location, contact person and phone number of your back-up system/generator.

Location Name/Phone #	Contact Person	Home Telephone Number

Determine if your refrigerator is having a mechanical failure (no lights in the refrigerator, no fan noise, etc.) or if the building has lost electrical power. Check with building maintenance to ensure that the generator is operational and has been activated. If a time-frame for the restoration of electrical power cannot be determined, contact your back-up location for temporary storage of vaccine.

2. In situations where a location with a back-up generator cannot be identified within a reasonable distance, preparations should be made to have coolers, and frozen ice packs available to temporarily and safely store your vaccine.

C. Conduct an inventory before you transport the vaccine.

D. Package the vaccine in a well-insulated container with ice packs.

Remember that Varicella must be kept frozen between -58 degrees F and +5 degrees F (-50 C to -5 C). Use of dry ice to transport Varicella may subject the vaccine to temperatures colder than recommended and should not be used. Varicella should be packaged separately from other vaccines since it must be kept frozen at all times. (Exception: MMR can be kept frozen but may also be refrigerated). Do not expose the other vaccines to freezing temperatures.

E. Staff Training/Posted Information

Post your Vaccine Recovery Plan on or near the vaccine storage equipment. Ensure that all staff (current and new) read the plan and understand it as part of their orientation.

F. Large Practices and Medical Centers

If your are a very large practice or a medical center, and have large quantity of vaccine, consider joining with other practices and rent a refrigerated truck to transport or store your vaccine. Have the name and telephone number of a local refrigeration company available. You will need to monitor the temperature of the refrigerated truck until you can get your vaccine safely returned to your office.

Refrigeration Company(s)	Telephone Number	Contact Person and Home Telephone Number

II. THINGS TO DO NOW ... BEFORE IT IS TOO LATE!

- A. Complete this plan and update as staff changes occur. It will only take a few minutes and may save you hours of work later, not to mention our federal and state tax dollars.
- B. Fill the empty spaces in your refrigerator with jugs of water and line the sides and bottom of your freezer with ice packs. In the event that your refrigerator/freezer is out of order, this exercise will help maintain the temperature for a longer period of time.

III. IT IS IMPORTANT TO CUSTOMIZE A BACK-UP PLAN RELEVANT TO YOUR PRACTICE!

IV. HELPFUL HINTS

- A. Fill a cup with water and put it in the freezer containing vaccine; once the water has frozen put a penny or paper clip on top of the frozen water. If you find the object has been frozen over you'll know the temperature rose above freezing at some point in time. This is especially helpful over a holiday weekend or school break.
- B. Use the blinking light of a digital clock or microwave as an indicator that power was lost some time during closing hours.