**COVID-19 Vaccine Unused Doses Report Form**

# West Virginia Division of Immunization Services

Phone 800-642-3634

Date: Pin Number:

Provider Name:

Phone #: Fax #

Contact Person:

Wastage Reason Codes:

Explanation of 10 - Other, if applicable

1. Vial provided fewer doses than stated
2. Expired
3. Natural Disaster/power outage
4. Refrigerator temperature too warm
5. Refrigerator temperature too cold
6. Failure to store properly upon receipt
7. Vaccine spoiled in transit
8. Mechanical Failure
9. Spoiled
10. Other

**PLEASE PRINT CLEARLY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Wastage Code | Doses | Manufacturer | Lot # | Expiration Date |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please email the completed copy of this form [COVIDVaccinationprog@wv.gov](mailto:COVIDVaccinationprog@wv.gov). Providers are responsible for disposing of vaccines in accordance with West Virginia Infectious Medical Waste Rule 64CSR56

COVID-RVF-0220 FEB 2021