

Temperature Log for Refrigerator – FahrenheitDAYS 1-15

CDC recommends the use of a digital data logger (DDL) for vaccine temperature monitoring. Using a DDL, or other appropriate temperature monitoring device (TMD), check and record the storage unit temperature each workday using one of the options below. Save each month's log for 3 years, unless state/local jurisdictions require a longer period.

and handling, including Co	temperature monitoring devices (TMDs) and all aspects of vaccine storage DVID-19 vaccines, see CDC's Vaccine Storage and Handling Toolkit at cp/admin/storage/toolkit/storage-handling-toolkit.pdf
Month/Year	VFC PIN or other ID #
Facility Name	

Option 1: Minimum/Maximum (Min/Max) Temperatures* (preferred)

- Most DDLs display minimum and maximum temperatures. Check and record the min/max temperatures at the start of each workday.
- Document both of these temperatures in the min/ max temperature rows under the appropriate date.

Option 2: Current Temperature

- If the TMD does not display min/max temperatures, check and record the current temperature twice, at the start and end of the workday.
- 2. Document these temperatures by writing an "X" in the row that corresponds to the refrigerator temperature under the appropriate day of the month.
- 3. If using a DDL without min/max, review continuous temperature data daily.

If the temperature is out of range, TAKE ACTION!

- Do not discard the vaccine unless directed to by your state/ local health dept and/or the manufacturer(s).
- 2. Label the vaccine "Do Not Use" and store it under proper conditions as quickly as possible.
- 3. Complete the Vaccine Storage Troubleshooting Record † .
- 4. Notify your vaccine coordinator, or call the immunization program at your state or local health dept for guidance.

Day of Month		1	L	2	2	;	3	،	4		5	,	6	7	7	8	3	'	9	1	0	1	1	1	2	1	3	1	.4	1	5
Staff Initials																															
Option 1	Time																														
	Min Temp																														
ō	Max Temp																														
	Time	АМ	PM	AM	PM	АМ	PM	АМ	PM	AM	PM	AM	PM	АМ	PM	АМ	PM	АМ	PM	AM	PM	АМ	PM	АМ	PM	AM	PM	AM	PM	АМ	PM
	Time																														
	46°F																														
	45°F																														
Option 2	44°F																														
Opt	43°F																														
	42°F																														
	41°F																														
	40°F to 36°F																														
DA	NGER! Tempera	atures	above	e 46°I	or b	elow 3	36°F aı	e out	of rar	nge. If	found	d, wri	te the	se ten	npera	tures	and ro	oom t	empe	rature	belo	w. Coi	ntact	your s	tate/l	local I	nealth	dept	imme	diate	ly!
Action	Write any out-of-range temps (above 46°F or below 36°F) here.																														
Act	Room Temp																														

^{* &}quot;Min/max" means the lowest (minimum) and highest (maximum) temperatures recorded during a specific time period.

[†] Vaccine Storage Troubleshooting Record found at www.immunize.org/catg.d/p3041.pdf.





Adapted with appreciation from California Department of Public Health



Temperature Log for Refrigerator – FahrenheitDAYS 16-31

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- Do not discard the vaccine unless directed to by your state/ local health dept and/or the manufacturer(s).
- 2. Label the vaccine "Do Not Use" and store it under proper conditions as quickly as possible.
- 3. Complete the Vaccine Storage Troubleshooting Record[†].
- 4. Notify your vaccine coordinator, or call the immunization program at your state or local health dept for guidance.

Day of Month		16		1	7	1	.8	1	9	2	20	2	21	2	22	2	23	2	4	2	5	2	6	27	2	28	2	29	3	0	3	31
Staff Initials																																
Option 1	Time																															
	Min Temp																															
ō	Max Temp																															
	Time	АМ	PM	AM	PM	АМ	PM	АМ	PM	АМ	PM	АМ	PM	АМ	PM	AM	PM	АМ	PM	АМ	PM	АМ	PM	AM PM	AM	PM	AM	PM	АМ	PM	AM	PM
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	42°F																															
	41°F																															
	40°F to 36F																															
DA	NGER! Tempera	tures	above	e 46°	F or b	elow	/ 36°I	are	out of	rang	e. If f	ound	, writ	e the	se ter	npera	ature	and	room	temp	eratı	ure be	elow.	Contact y	your s	tate/l	local l	health	dept	imm	ediat	ely!
ction	Write any out-of-range temps (above 46°F or below 36°F) here.																															
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