

Temperature Log for Vaccines (Fahrenheit)

Month/Year: _____ Days 1–15

Name of Practice: _____ PIN Number: _____

Instructions: Place an "X" in the box that corresponds with the temperature. The RED REGIONS represent unacceptable temperature ranges. If the temperature recorded is in the red region: 1. **Store the vaccine** under proper conditions as quickly as possible, 2. For further assistance **call Chicago VFC: (312) 746-5385**.

Day of Month	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		
Exact Time																															
°F Temp	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	
Refrigerator temperature	≥49~	Take immediate action if the temperature falls within this red region																													
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	34~	Take immediate action if the temperature falls within this red region																													
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Room temp																															
Staff Initials																															

Adapted by the Immunization Action Coalition courtesy of the Michigan Department of Community Health

Fax temperature logs with Chicago VFC Order and Accountability Form to (312) 746-6220

