

## FIELD RETURN FORM

Health Unit:
Address:
Phone:
Fax:

**REASON CODES:**

<p>A - Cold chain incident: power outage          B - Cold chain incident: equipment malfunction          C - Cold chain incident: handling error          D - Damage to product          E - Expired product          F - Surplus (for BCCDC redistribution)*</p>	<p>G - Wrong product shipped by BCCDC or requested by Health Unit          H - Product recall by manufacturer          I - Annual influenza harvest          J - Cold chain incident: in transit BCCDC to Health Unit          K - Cold chain incident: in transit within HA</p>
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\*If F code, product must be returned under cold chain conditions with this Field Return Form and Biologicals Return Requirements Form as per: Communicable Disease Manual.  
[http://www.bccdc.ca/NR/rdonlyres/74061D2E-482B-4A8C-BE6B-E551E8B2BC0A/0/Biologicals\\_return\\_and\\_redistribution\\_requirements\\_form.pdf](http://www.bccdc.ca/NR/rdonlyres/74061D2E-482B-4A8C-BE6B-E551E8B2BC0A/0/Biologicals_return_and_redistribution_requirements_form.pdf)

VACCINES	Product Code (BCCDC Use)	LOT NUMBER	EXPIRY DATE (YYYY/MM/DD)	REASON	DOSES
DaPT/IPV/HB/Hib, Infanrix Hexa	INFANRIX				
DaPT/IPV/Hib, PediaCel	PEDIACEL				
DaPT/IPV, QuadriCel	SPACE				
Haemophilus B Conjugate, ActHIB	TALL				
Hepatitis A, Pediatric, Vaqta	VAQTA0.5				
Hepatitis A, Adult, Vaqta	VAQTA1.0V				
Hepatitis A, Pediatric, Havrix 720	HEPA720				
Hepatitis A, Adult, Havrix 1440	HEPA1440VL				
Hepatitis A, Pediatric, Avaxim	AVAXIM80				
Hepatitis B, Pediatric, (T-free), Recombivax-HB	RECOMB0.5				
Hepatitis B (Renal/Kidney Dialysis), Recombivax-HB	RECOMB-DYS				
Hepatitis B, Adult, Recombivax-HB	RECOMB1.0				
Hepatitis B, Pediatric, Engerix B	HEPB10ENG				
Hepatitis B, Adult, Engerix B	HEPB20ENG				
HPV, Gardasil	HPV1				
HPV, Cervarix	CERVARIX				
Immune Serum Globulin, GamaSTAN	ISG-SD2.0				
Inactivated Polio, Imovax Polio	POLVACS				
Influenza, Agriflu	AGRIFLU				
Influenza, Fluad	FLUAD				
Influenza, Fluviral	FLUVIRAL				
Influenza, Influvac	INFLUVAC				
Influenza, Vaxigrip	VAXIGRIP				
Measles, Mumps, Rubella, MMR II	MMR II				
Measles, Mumps, Rubella, Priorix	PRIORIX				
Meningococcal C Conjugate, NeisVac-C	MENC0.5-NV10				
Meningococcal Conjugate A/C/Y/W-135, Menactra	MENCVAC				
Meningococcal Polysaccharide A/C/Y/W-135, Menomune	MOSS				
Pneumococcal Conjugate, Prevnar 13	PREVNAR13				
Pneumococcal Polysaccharide, PneumoVax23	PNEUV23				
Rabies Immune Globulin, HyperRAB	RABIGH300TC2				
Rabies, Imovax Rabies	IMOVAX				
Rabies, RabAvert	RABAVERT				
Rotavirus, Rotarix	ROTARIX				
Td Adsorbed	SOUND				
Td/IPV Adsorbed (adult)	ELEMENT				
Tdap Adsorbed, Adacel	ADCL5-0.5				
Tdap-IPV, Adacel-Polio	ADACEL-POLIO				
Tetanus Immune Globulin, HyperTET	TIG250I				
Varicella, Varivax III	VARVX0.5-10				
Varicella, Varilix	VARI2000I				
Other:					

Fax Form to: 604-707-2581

<b>Name of Biological Products Monitor:</b>	Biologicals Desk at BCCDC 1100-655 West 12th Avenue Vancouver BC V5Z 4R4	Email: <a href="mailto:biologicals@bccdc.ca">biologicals@bccdc.ca</a> Phone: 604-707-2582
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<b>BCCDC Use Only</b>	Return Processed by: (Initials)	Process Date: (YYYY/MM/DD)	Authorization Number:

This form available at: <http://www.bccdc.ca/imm-vac/ForHealthProfessionals/VaccineAndPharmacyServices.htm>