

# VFC Vaccine Usage Worksheet

|                       |              |           |              |   |
|-----------------------|--------------|-----------|--------------|---|
| <b>Provider Name:</b> |              |           |              | Numbers are required for this report. <u>Do not</u> send with hash marks/check marks.<br><br>There are separate forms for requesting vaccines and reporting balances on hand, expiration, spoilage and wastage. |
| <b>Pin Number:</b>    |              |           |              |   |
| <b>Usage from:</b>    | <b>Date:</b> | <b>to</b> | <b>Date:</b> |   |
| <b>Contact Name:</b>  |              |           |              |   |

**Ages 19+ for Health Departments Only**

| Vaccine      | age <1 | age 1 | age 2 | ages 3-5 | age 6 | ages 7-10   | ages 11-12 | ages 13-18 | ages 19-24 | ages 25-44 | ages 45-64 | ages 65+ | Total |
|--------------|--------|-------|-------|----------|-------|---|------------|------------|------------|------------|------------|----------|-------|
| DT 1 (ped)   |        |       |       |          |       | <b>West Virginia Immunization Program</b><br><b>1-800-642-3634</b><br><b>(304) 558-2188</b><br><b>Fax 1-888-558-1941</b><br>Enter totals for all rows in the Total column |            |            |            |            |            |          |       |
| DT 2 (ped)   |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DT 3 (ped)   |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DT 4 (ped)   |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Td 1 (adult) |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Td 2 (adult) |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Td 3 (adult) |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Td 4 (adult) |        |       |       |          |       |   |            |            |            |            |            |          |       |
| MMR 1        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| MMR 2        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Hib 1        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Hib 2        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Hib 3        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| Hib 4        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| IPV 1        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| IPV 2        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| IPV 3        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| IPV 4        |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DTaP 1       |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DTaP 2       |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DTaP 3       |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DTaP 4       |        |       |       |          |       |   |            |            |            |            |            |          |       |
| DTaP 5       |        |       |       |          |       |   |            |            |            |            |            |          |       |

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| Vaccine  | age <1 | age 1 | age 2 | ages 3-5 | age 6  | ages 7-10 | ages 11-12 | ages 13-18 | ages 19-24 | ages 25-44 | ages 45-64 | ages 65+ | Total |
|--|--------|-------|-------|----------|--|-----------|------------|------------|------------|------------|------------|----------|-------|
| Prevnar 1  |        |       |       |          | <b>West Virginia Immunization Program</b><br><b>1-800-642-3634</b><br><b>(304) 558-2188</b><br><b>Fax 1-888-558-1941</b> |           |            |            |            |            |            |          |       |
| Prevnar 2  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Prevnar 3  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Prevnar 4  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Hep-B-PF 1   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Hep-B-PF 2   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Hep-B-PF 3   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Rotavirus 1  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Rotavirus 2  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Rotavirus 3  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| FLU  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| FLU-PF   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Pneumococcal   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Varicella 1  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Varicella 2  |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Pediarix 1   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Pediarix 2   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Pediarix 3   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Menactra   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| Tdap   |        |       |       |          |  |           |            |            |            |            |            |          |       |
| <b>Report state supplied MMR vaccine administered to family planning and maternity clients here.</b> |        |       |       |          | MMR 1  |           |            |            |            |            |            |          |       |
|  |        |       |       |          | MMR 2  |           |            |            |            |            |            |          |       |

