**VFC VACCINE LOG FORM-HEP B/nirsevimab**

|  |  |
| --- | --- |
| **BEGINNING BALANCE** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **LABEL** | **ADMINISTERED BY** | **WAS *VIS* GIVEN?** | **IS THE VACCINE VFC ELEGIBLE FOR PRIVATE?** | **-** | **+** | **BALANCE****ON HAND** |
|  | * **Engerix-B®**
* **Recombivax HB ®**
* **nirsevimab LOT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXP: \_\_\_\_\_\_\_\_\_\_**
 |  | * **YES**
* **NO**
 | * **VFC (MEDI-CAL, uninsured, American Indian/Alaskan)**
* **PRIVATE (DO NOT DISPENSE VFC)**
 |  |  |  |
|  | * **Engerix-B®**
* **Recombivax HB ®**
* **nirsevimab LOT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXP: \_\_\_\_\_\_\_\_\_\_**
 |  | * **YES**
* **NO**
 | * **VFC (MEDI-CAL, uninsured, American Indian/Alaskan)**
* **PRIVATE (DO NOT DISPENSE VFC)**
 |  |  |  |
|  | * **Engerix-B®**
* **Recombivax HB ®**
* **nirsevimab LOT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXP: \_\_\_\_\_\_\_\_\_\_**
 |  | * **YES**
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* **Recombivax HB ®**
* **nirsevimab LOT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXP: \_\_\_\_\_\_\_\_\_\_**
 |  | * **YES**
* **NO**
 | * **VFC (MEDI-CAL, uninsured, American Indian/Alaskan)**
* **PRIVATE (DO NOT DISPENSE VFC)**
 |  |  |  |

**Revised: 06/14/24**