Saskatchewan

PRODUCT WASTAGE REPORT FORM

Return completed form to:
Roy Romanow Provincial Laboratory - Provincial Vaccine Depot
5 Research Drive, Regina SK S4S 0A4
FAX: 306-798-0071

DO NOT USE THIS FORM TO REPORT WASTAGE DUE TO COLD CHAIN BREAKS

USE THIS FORM TO REPORT WASTAGE FOR ALL PRODUCTS including:

- Publicly Funded Vaccines
- Tubersol™
- Tetanus Immune Globulin (TIg)
- Immune Globulin (Ig)
- Rabies Immune Globulin (RabIg)
- Penicillin G benzathine (Bicillin®, Lentocilin®)

Do not report diluent wastage.

Organization (SHA Network Number, NITHA, ISC, AHA, Pharmacy): _____

Community: _____

Facility Name: _____

Facility type: (select one):

☐ Public Health ☐ Pharmacy ☐ Physician office ☐ Primary Health Care ☐ Long-Term Care
☐ Acute Care ☐ Employee Health ☐ Other _____

Date of wastage: YYYY/MM/DD

Complete all fields in these columns					Indicate only 1 reason for wastage		
Product Brand Name & Manufacturer	**Lot Number**	**Expiry date** YYYY/MM/DD	**# of Doses[1]**	**Open or Closed Vial**	**Not Administered[2]**	**EXPIRED**	**Defective or damaged[3]**
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			
				☐ Open ☐ Closed			

[1] **Moderna SPIKEVAX®** vials: Report wasted doses based on **5 doses per vial**.
[2] **Not Administered** includes thawed COVID-19 vaccine vials (open/punctured or closed/unpunctured) that were not used within the permitted stability timeframe.
[3] **Defective/Damaged:** A Vaccine Problem Report must also be submitted.

Reporter Name (Print): _____

Phone #: _____ **Email:** _____