



State of Nevada
 Dept of Health and Human Services
 Nevada State Immunization Program
 4150 Technology Way, Ste 210
 Carson City, NV 89706
 Fax to (775) 684-8338

Nevada Cocooning for Pregnant Women
2014-2015 SEASON
Influenza Vaccine Inventory Accountability Form

Facility Name:	PIN:
Contact:	
Direct Phone Line:	

Use this form to report influenza vaccine usage monthly. Complete and submit this form with your regular NSIP monthly paperwork. Use the "Nevada Cocooning for Pregnant Women Flu Vaccine Request Form" to order more influenza vaccine as needed.

COCOONING FLU VACCINE REPORTING			Reporting Period			
			Begin:			
PLEASE PRINT CLEARLY			End:			
			DO NOT zero fill boxes	Lot Number	Exp Date	Total Administered
Fluarix - GSK NDC 58160-0901-52						
0.5 mL syringes 36 mo + QUAD						



Vaccine Project for Pregnant Women

