

WASTED/EXPIRED INSTRUCTIONS

1) Click MANAGE TRANSFERS manage transfers 2) Click NEW TRANSFER New Transfer Click TRANSFER ALL EXPIRED Open vials should be disposed of Transfer all Expired at your facility but still reported through NCIR. 4) Note the following: Reminder: Open vials of state-supplied vaccine should be disposed of at your facility. All remaining doses of state-supplied vaccine should be returned to McKesson once the Return Packing List and Label(s) are available. Edit Transfer: Create Date 08/29/2016 Save Sending Site CARIKUBE PEDIATRICS Submit Receiving Organization VACCINE DISTRIBUTION Cancel Transfer **Expired vaccines** Send Labels by Email -Note: Only those sites which have inventory set up are displayed. **OTHER THAN** influenza appear in Expired Non-flu Vaccine the upper section. Lot Numbe NCIR Physical Exp Date Remove Trade Name **Preventive Action** NDC Count Count Bexsero 07080808 08/08/2015 46028-0114-01 N/A Short Dated vaccine -1 1 Indicates an open 10 5 Engerix-B Peds 7K344 06/30/2015 58160-0820-11 Staff will use remind -N/A multi-dose vial. Staff has been instr -IPOL 7K344 06/30/2015 49281-0860-10 1 🗖 ' 7 Y 10 10 PedvaxHIB 7K344 06/30/2015 00006-4897-00 N/A Short Dated vaccine -**Expired INFLUENZA** Expired Flu Vaccine vaccines appear in Physica Open Vial C rade Name Lot Number Exp Date NDC **Preventive Action** Remove ít Count the lower section. uMist LAIV4 07/18/2016 66019-0300-10 N/A Administrators will o 5 8668hkll luzone IIV4 2 06/30/2016 49281-0514-25 Administrators will o -321321321 N/A -Free, Ped Fluzone IIV4 2 2 321321321 06/30/2016 49281-0414-50 N/A Administrators will o -Pres-Free Choose a preventive Enter the PHYSICAL COUNT action from the drop-(the number of doses actually down for each vaccine being returned) in this column. being returned.



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5) Click SAVE to save your work

Save

6) Click SUBMIT when you are finished updating all of the information.

Submit

7) Click OK (note that doses should be removed from your storage units and prepared for return)



8) Click OK (note the email address where the labels will be sent). If it needs to be updated, make changes under MANAGE SITES.

The labels will be emailed to [caroline.helton@dhhs.nc.gov].

If this needs to be changed, please update the email located under manage sites, immediately.
Prevent this page from creating additional dialogs

9) When the return has been processed, you will receive a notification on your homepage

notifications:					
NEW	08/25/2016	~	Return 662 Ready		
NEW	08/25/2016	~	Return 357 Ready		
NEW	08/25/2016	~	Return 672 Ready		
When you	When you receive this notification, click MANAGE RETURNS				

10) When you receive this notification, click MANAGE RETURNS

manage returns

11) Look for returns with a READY status, click the link

\bigcirc	Caroline Helton	08/29/2016	READY
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12) Click PACKING LIST



13) The packing list should be PRINTED, SIGNED and INCLUDED with the return shipment of vaccines

	NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES Division of Public Health RETURN PACKINGLIST FOR VIECUS RETURN ID: 00055850						
	RETURN	PACKING LIST F	OR VTRCKS RET	URN ID: 600558	650		
Provider Name: CA	RIKUBE PEDIATR	RICS		Date Generated: 08/29/2016			
Six Digit PIN: 4747	47			VTrokS Provider	D: 47474	747	
User Completing Fi	orm: Caroline Helts	on		Phone Number: (919) 555-	1212	
*** Return Jabel(a)	were emailed to: ca	aroline.hellon@dhh:	LINC GOV				
RETURN IT	EMS						
	ould be included	d in the box for re					
VACCINE		NDC	LOT	EXPIRATION	TOTAL DOSES	RETURN REASON	
Meningococca Bexs		48028-0114-01	07080808	08/08/2015	1.0	Non-Flu Expired	
	erix-8 Peds	58160-0820-11	7K344 7K344	08/30/2015	5.0	Non-Flu Expired	
Hb-OMP Pedv	axHIB	00008-4897-00	7K344	08/30/2015	10.0	Non-Flu Expired	
		n section are included in					
Caroline Hel			8/2	9/2016			
	Speed	Pag	e 1 of 1	(2444)			

- 14) Package the vaccine so that it will not break (**IT DOES NOT NEED TO BE RETURNED ON COLD PACKS**).
- 15) Print the return mailing labels from your email. ** *If you do not receive this email from McKesson within 1-2 business day please contact the NCIR Help Desk at <u>NCIRhelp@dhhs.nc.gov</u>.*
- 16) Open the email from McKesson containing the UPS shipping label, click the RETRIEVE YOUR SHIPMENT LABEL link to print your return label. The following is an example of the email from McKesson containing the shipping label for your return.

From: McKesson Specialty Care Dist [mailto:pkginfo@ups Sent: Sunday, April 12, 2015 12:23 PM To: Mattingly, Paula (LHD-Lincoln Trail Dist) Subject: UPS Label Delivery, 122R43839096048804	.com)
UPS Returns Label Delivery	
This notice tells you that a UPS shipper has sent you	an electronic label.
You can print and use this label to include in your ou	atbound shipment, or send it to the consignee. The label will be available for 30 days.
Note: When retrieving your label below, we will pro-	vide you with both a UPS Returns Label and Commercial Invoice if the invoice was prepared by the original shipper
View UPS Returns Documentation Instructions	
Retrieve Your Shipment Label	The only link you need to know and should
Schedule a Pickup	
Get the Receipt.	use is the one that is highlighted. Do not click
Find the Closest Service Location.	on or use any of the other links in the email.
Find Out More About Returning Your Shipment.	

17) Attach the label to the box, include the vaccine and the packing list. Hand the package to your UPS driver. If you are not on a standard UPS route, please contact the NCIP to arrange a pick up for your facility.