



Policy and Procedure Template

Policy Name:	Vaccine Administration Documentation		
Effective Date:		Revision Date:	
Department(s)/Site(s):			
Document Owners:			
Approved By:			
Relevant Law/Standard:	Federal Documentation Requirements required by statute 42 US Code 300aa-25 Department of Health Care Services (DHCS) All Plan Letter 20-006, Site Reviews: Facility Site Review and Medical Record Review		

Purpose:

To correctly document vaccination administration in the Medical Record.

Definition:

Vaccination is the administration of a vaccine to help the immune system develop.

Policy:

Health care providers who administer vaccines covered by the National Childhood Vaccine Injury Act are required to ensure that the permanent medical record indicates the correct documentation.

Always provide a personal vaccination record to the patient or parent that includes the names of vaccines administered and the dates of administration. Because personal vaccination records or forms can vary between states, please [contact your state or local immunization program](#) (see Link)

Procedure:

Every time an immunization is administered the following information must be documented in the patient's record:

- Date of administration
- Vaccine manufacturer
- Vaccine lot number
- Name and title of the person who administered the vaccine and address of the facility where the permanent record will reside
- Vaccine information statement (VIS) Date printed on the VIS
- Date the VIS was given to the patient or parent/guardian

Resources:

California Immunization Registry Website: <https://cair.cdph.ca.gov/CAPRD/portalInfoManager.do>

Vaccine Administration Record for Children and Teens: <https://immunize.org/catg.d/p2022.pdf>

Vaccine Administration Record for Adults: <https://immunize.org/catg.d/p2023.pdf>

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First Name Last Name – Title	Date
_____	_____
First Name Last Name – Title	Date

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