



## Investigated Information for Transported Medications Involved in a Temperature Excursion

1. Indicate storage expectations of product:  Room Temperature  Refrigerated
2.  Confirm that medications that are being investigated for a temperature excursion have been appropriately quarantined and labeled “ Do Not Use”
3. Indicate when excursion was discovered: Date: \_\_\_\_\_ Time: \_\_\_\_\_
4.  Confirm appropriate temperature indicator was used for transport
5. Refer to Cold Temperature & Degrees Temperature Reading Guideline (CI.6010.PL.073.SD.01) to indicate excursion details, as per the temperature indicator. Describe excursion as per indicator: Brief, Moderate, Prolonged and a total time of excursion
6. Connect with sending site to determine the following information:  
 Was the indicator refrigerated at the sending site prior to use?  YES  NO  
 What time did the courier pick up the package? \_\_\_\_\_  
 What time was the package delivered: \_\_\_\_\_
7. Are the transported medications:  
 Vaccine - if yes, fill out the form found at:  
<https://www.gov.mb.ca/health/publichealth/cdc/docs/ccf.pdf>  
 Compounded (sterile or non-sterile) – if yes, provide details of the compound (name/ concentration/ form/ diluent/ size/ date compounded):  
 \_\_\_\_\_
8. List all medications and quantities that have been exposed to the temperature excursion:

DIN	Drug Name	Strength	Size	Manufacturer	Lot #	Expiry	Quantity	Was this drug previously exposed to an excursion? (red dot) Y/N

9.  Send completed form to Site Manager or designate
10.  At the discretion of the manager, other departments are to be notified of the excursion if required
11. Safety Event Report (ORG.1810.PL.001.FORM.01) and submit to site manager/ designate.

Staff name who completed the form: \_\_\_\_\_ Date: \_\_\_\_\_