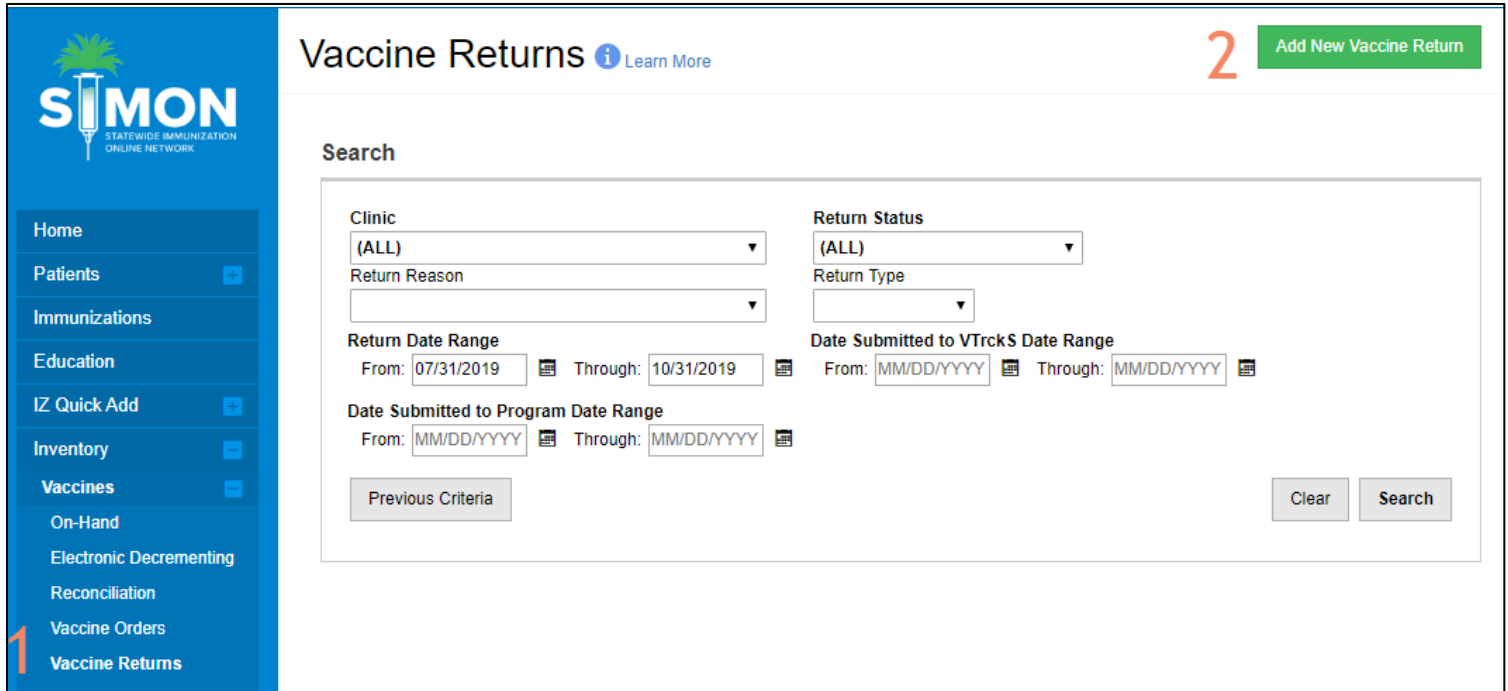
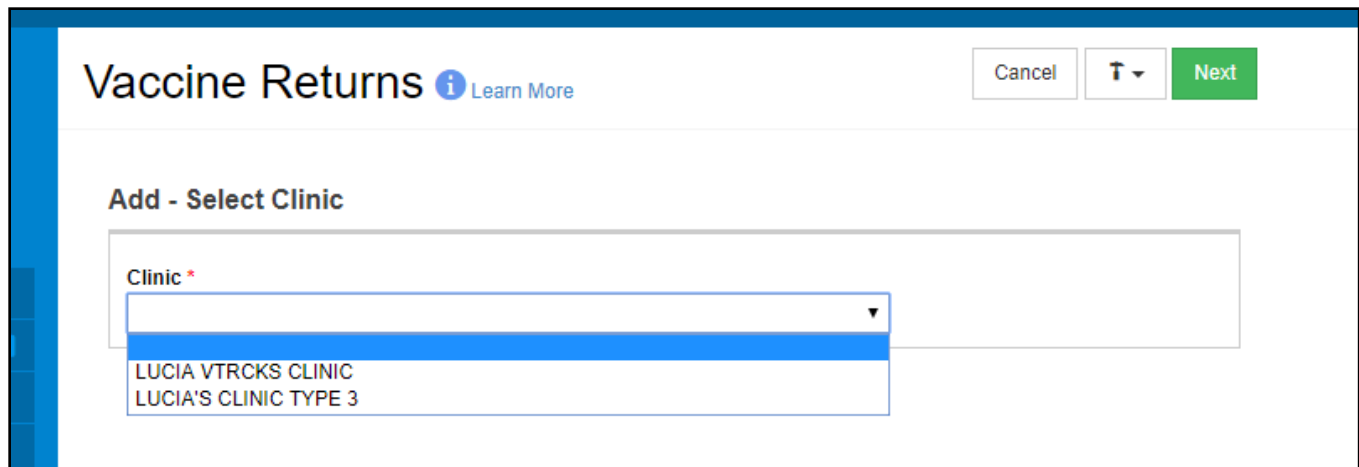


Create and Submit Vaccine Returns

1. From the main menu, select 'Inventory > Vaccines > Vaccine Returns'.



2. Click 'Add New Vaccine Return'.
3. Select your Clinic.



4. Click 'Next'.

5. Review the clinic information to confirm the primary shipping contact and shipping address are correct.
6. Confirm the delivery hours are correct.
7. If information is NOT correct, the clinic should submit change request in Clinic Tools > Clinic Information.
8. Click the check box at the bottom of the screen confirming the information is correct.
9. Click 'Next'.

Add Vaccine Return Creation Process i

Cancel
T ▾
Next

Add

Clinic: LUCIA VTRCKS CLINIC

Primary Shipping Contact

Name: JOEY ROBERTS
Phone: 303-999-9999x54321
Fax:
Email: JOEY@CLINIC.ORG

Shipping Address

7935 E PRENTICE AVE
UNIT 305-W
MANGILAO, GU 96923

Delivery Information


| | Delivery Time 1 | | Delivery Time 2 | |
|-----------|-----------------|-------|-----------------|-------|
| | From | To | From | To |
| Monday | 08:00 | 12:00 | 13:00 | 17:00 |
| Tuesday | 08:00 | 12:00 | 13:00 | 17:00 |
| Wednesday | 08:00 | 12:00 | 13:00 | 17:00 |
| Thursday | 08:00 | 12:00 | 13:00 | 17:00 |
| Friday | 08:00 | 12:00 | 13:00 | 17:00 |
| Saturday | | | | |
| Sunday | | | | |

Special Instructions: NO SPECIAL INSTRUCTIONS

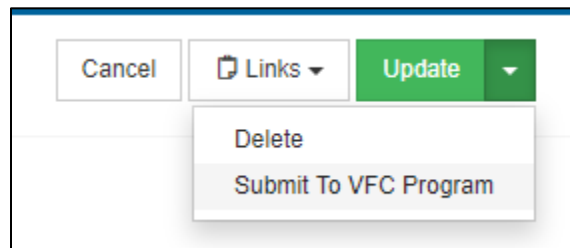
I have reviewed the above shipping information and I certify the information is correct.

Vaccine Returns [Learn More](#) Cancel ↑ Links Create

Add

| | | | |
|---|---|---|---|
| Clinic LUCIA VTRCKS CLINIC | | Last Approved Return Date 01/31/2017 | Created By |
| Return Number R1028201946543100 | Return Status IN WORK | Return Type * RETURN ONLY | Return Reason * MECHANICAL FAILURE |
| Return Created Date 10/28/2019 | Date Submitted to Program MM/DD/YYYY | Date Submitted to VTrcks MM/DD/YYYY | |
| Label Shipping Method * MAIL TO PROVIDER SHIPPING ADDRESS | Description | Number of Shipping Labels * | |
| Clinic Comments | | | |
| VFC Program Comments | | | |
| Vaccine Mfg NDC Brand/Packaging Funding Source Lot Number Expiration Date Doses Remaining BEGIN TYPING A VACCINE, MFG CODE, NDC, BRAND/PACKAGING, FUNDING SOURCE, LOT #, OR DATE HERE | | | Doses Returning <input type="text"/> |
| Vaccines To Return  There are no vaccines returned in this order | | | <input type="button" value="Add Return"/> |

10. Select 'Return Type'.
11. Select 'Return Reason'.
12. Optional: Add clinic comments to the "Clinic Comments" box
13. Search for Vaccine to return:
 - a. Begin typing vaccine name, lot number, etc. and select the item from the list.
 - b. The list displayed is based on what your clinic has on-hand.
14. Once an item is selected, enter the number of doses being returned.
15. Click 'Add Return'.
 - a. Multi-dose vials can only be returned in complete packages.
 - b. If a partially used multi-dose vial is expired, it should be adjusted as wastage instead.
16. Click 'Create'.



Cancel Links Update

Delete

Submit To VFC Program

17. Select the 'Update' dropdown and click 'Submit To VFC Program'.
 - a. When a return is submitted for approval, doses on the return are automatically adjusted out of inventory on-hand.
 - b. Clinic will receive notification when return is approved or rejected.
 - c. If the return is rejected, the clinic will need to delete the return, which will add the doses back to on-hand.
18. A green success message is displayed confirming your changes were saved.