

FROZEN MEDICAL MATERIEL SHIPMENT

PERISHABLE - KEEP FROZEN

VACCINE ———> TEMPERATURE MUST BE MAINTAINED BELOW 32° F

REQUIRED DELIVERY DATE *(Calendar date)*

THIS PACKAGE PACKED AT ORIGIN

DATE	TIME	POUNDS OF DRY ICE	BY <i>(Name)</i>

IMPORTANT

To insure delivery of this vaccine in a satisfactory condition, it is necessary that this container be re-iced with DRY ICE on or before time indicated below.

(Greenwich Meridian Time is used for overseas shipments.)

_____ POUND(S) DRY ICE WILL SAFEGUARD CONTENTS FOR _____ HOURS WHEN RE-ICING IS DONE. AT FIRST RE-ICING POINT, CROSS OUT PREVIOUS BLOCK *(Left column below)* AND ENTER NEW DATE AND TIME NEXT RE-ICING IS DUE.

MUST BE DRY RE-ICED NOT LATER THAN ↓	DRY ICE ACTUALLY ADDED			
	DATE	DATE	POUNDS	DRY ICED BY
HOUR	FIRST DRY RE-ICING →	HOUR		
DATE	DATE	POUNDS	DRY ICED BY	
HOUR	SECOND DRY RE-ICING →			HOUR

INSTRUCTIONS

Break tape on outer container and insert necessary dry ice. IMMEDIATELY re-seal outer container and RECORD this operation on the log above. DO NOT handle this vaccine or permit container to remain open longer than is necessary for DRY re-icing.

NOTE: FAILURE TO COMPLY WITH INSTRUCTIONS MAY ENDANGER LIVES.

If materiel has thawed or if shipment arrives without dry ice, refreeze immediately. Report details by fastest means to Defense Logistics Agency, Troop Support Medical, 700 Robbins Avenue, Philadelphia, PA 19111-5092. Document discrepancies in accordance with Defense Transportation Regulation (DTR) Part II, Chapter 210. DO NOT issue or destroy materiel until disposition instructions are received from DLA-TSM.