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| **Medical supplies** | | | |
| **Packed** | **Item** | **Packed** | **Item** |
|  | **Gloves (S/M/L)** |  | **Syringes-25G, 1”** |
|  | **Disinfecting Wipes** |  | **Syringes-25G, 5/8”** |
|  | **Bio Bags** |  | **Needle tips for pre-filled syringes** |
|  | **2 x 2 Gauze** |  | **Preparation trays for syringes** |
|  | **Bandaids (100/box)** |  |  |
|  | **Hand Sanitizer (8oz pump)** |  |  |
|  | **Alcohol pads (200/box)** |  |  |
|  | **Sharps Container(s)** |  |  |
|  | **1st Aid Kit w/ EPI** |  |  |
|  | **Kleenex** |  |  |
|  | **Diluent** |  |  |

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| **Office Supplies** | |
| **Packed** | **Item** |
|  | Clipboards |
|  | Pens (12/box) |
|  | Paperclips ( 1 box) |
|  | Markers (7/bx) |
|  | Stapler / Staples (1 box) |
|  | Garbage bags |
|  | Sticky Notes |
|  | Duct Tape/Masking Tape |
|  | Battery - AA |

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| **Paperwork** | | | |
| **Packed** | ***SELF PACK*** |  | ***PRE-PACKED – ACCORDION FOLDER*** |
|  | [Patient Registration Forms (Adult)](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/CONSENT%20FORM_ADULT.docx)  [Patient Registration Forms (Child)](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/CONSENT%20FORM_CHILDHOOD.docx) | Offsite Clinic Guidelines & Forms |
| [Volunteer Sign in Sheet](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Volunteer%20Sign%20In%20Sheet.pdf) |
|  | Vaccine Information Sheets (VIS) | [SRHD Notice of Privacy Forms](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Notice%20of%20Privacy_SRHD.pdf) |
|  | [Vaccine Administered Record Forms for Patients](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Vaccine%20Administered%20Record%20for%20Patients.docx) | [Temp & Wasted Vaccine Log](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Cooler%20Temp_%20Wasted%20Vaccine%20Log.docx) |
|  | Vaccine Name Labels for Syringes | [SRHD Incident Form](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Clinical%20Incident%20Report_SRHD.doc) |
|  | Resource Binder (Supplemental Screening Information) | [Vaccine Adverse Event Reporting System](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Vaccine%20Adverse%20Event%20Reporting%20Form%20(VAERS).pdf)  [(VAERS)](http://teams/sites/DPR/Immunizations/Offsite%20Vaccination%20Clinic/Vaccine%20Adverse%20Event%20Reporting%20Form%20(VAERS).pdf) |