**SECTION 1: CONTACT INFORMATION**

Reported by: 
Date of Report: 
Contact information: 

**SECTION 2: VACCINE INFORMATION**

Vaccine (antigen): 
Brand name: 
Manufacturer: 
Format: 
Lot number: 

**SECTION 3: REPORT INFORMATION**

Nature of the problem (check ✓)

- Delayed or incomplete delivery
- Cold chain breach
- Product damaged in delivery
- Short expiry date
- Other

Details of problem: Please provide details of the problem experienced; including when experienced and frequency/extent of problem. Attach additional page if necessary.

Was the problem satisfactorily resolved? ✓ Yes  ☐ No

How was the problem resolved?

Additional comments:

**SECTION 4: PROVINCIAL REVIEW**

To be completed by NB OCMOH

Contract Number: 
Supplier: 
Reviewed by: 
Date: 
Date sent to VSWG: 

**FOR YOUR INFORMATION: PURPOSE OF THE VACCINE SUPPLY PROBLEM REPORT**

The Vaccine Supply Problem Report is intended to allow for the central collection of information on problems experienced in the procurement and/or use of vaccines, even if the problem has been satisfactorily resolved by the supplier.

Vaccine Supply Problem Reports from all F/P/T jurisdictions are collated and are available to the Vaccine Supply Working Group member representing New Brunswick.