



**SC VFC Program
Family Planning Clinic Log
Unaccompanied Minor without Insurance Information**

Clinic name:

Person completing this log:

Phone number of person completing this log:

Log for: Month _____ Year _____

Patient	Date VFC vaccine was administered	Tdap	Td	MCV	HPV	Hep. B	MMR	VAR	IPV	Flu	PPSV23	Total number of VFC vaccines administered to this patient
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												
11.												
12.												
13.												
14.												
15.												
16.												
17.												
18.												
19.												
20.												
Total number of VFC vaccines, by type, administered this month:												

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

SC VFC Program Family Planning Clinic Log

Instructions for Completing

Purpose:

The purpose of the Family Planning Clinic Log is to document the administration of VFC vaccine to unaccompanied minors (<19 years of age) who present to a family planning clinic without insurance information.

CDC defines a family planning clinic as a clinic or provider whose purpose is to prescribe contraceptives and/or treat sexually transmitted diseases. School-based clinics or any VFC-enrolled provider whose main services are primary or acute care services do not meet CDC's definition of a family planning clinic and cannot use this VFC eligibility category.

Provision of VFC vaccine to unaccompanied minors without insurance status in family planning clinics must be in compliance with medical consent laws of South Carolina as they pertain to minors.

Item-By-Item Instructions:

The Family Planning Clinic Log must be completed and submitted to the SC VFC Program on a monthly basis, as applicable.

1. Family Planning Clinic (FPC) will enter identifying information including clinic name, name and phone number of person completing log.
2. Enter month/year for which log is being submitted.
3. For each patient, enter the date VFC vaccine was administered.
4. Place a check in the box associated with each vaccine administered.
5. Enter the total number of VFC vaccines administered to this patient.
6. Enter the total number of each VFC vaccine administered during the month, by type, in the associated box(es).

Office Mechanics and Filing:

Family Planning Clinic will submit the completed form to the SC VFC Program on a monthly basis, as applicable, and both will retain the original form/copy for (3) three years.