



Frequently Asked Questions

Miranda Baumgartner, Vaccines for Children QI Coordinator



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How to Use Today's Presentation

1. A question commonly asked of the Immunization Program will be presented
2. Answer choices will be shown
3. A poll will appear on your screen
4. Discuss the question amongst your group and select an answer
 - All participants will have 1 minute to answer.
5. The correct answer and the results will be shown after 1 minute
 - Individual responses will not be displayed.



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Which COVID-19 vaccines can be stored in a conventional freezer?



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- A. Pfizer 12+
- B. Moderna 12+ Spikevax®
- C. Moderna 6m -11 years
- D. All of the above
- E. B and C

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- D. All of the above
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COVID-19 Vaccine Storage and Handling CONT.

- Pfizer 12+ Comirnaty® single-dose syringes
 - Will ship at refrigerator temperatures
 - Stored in the refrigerator at 2° to 8°C (36° to 46°F)
 - Can be used until the expiration date printed on the box
 - DO NOT FREEZE
 - Can be kept at room temperature for 12 hours

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COVID-19 Vaccine Storage and Handling CONT.

- Moderna 6m-11 years and Moderna 12+ Spikevax®
 - Will ship at frozen temperatures
 - Should be stored frozen -50° to -5°C (-58° to 5°F)
 - Use until the expiration date printed on the box
 - Once refrigerated 2° to 8°C (36° to 46°F)
 - Can be stored for 60 days or the expiration date printed on the box, whichever comes first

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COVID-19 Vaccine Storage and Handling CONT.

- Moderna 6m-11 years and Moderna 12+ Spikevax®
 - Thawing directions

	Thaw in Refrigerator 2°C to 8°C (36°F to 46°F)	Thaw at Room Temperature 15°C to 25°C (59°F to 77°F)
Carton of 10 syringes	Thaw for 2 hours and 40 minutes	Thaw for 1 hour and 20 minutes
Carton of 2 syringes	Thaw for 1 hour and 40 minutes	Thaw for 40 minutes
One syringe (removed from carton)	Thaw for 1 hour and 40 minutes	Thaw for 40 minutes

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COVID-19 Vaccine Storage and Handling CONT.

- Moderna 65+ mNexspike®
 - Will ship at frozen temperature
 - Should be stored frozen -50° to -5°C (-58° to 5°F)
 - Use until the expiration date printed on the box
 - Once refrigerated 2° to 8°C (36° to 46°F)
 - Can be stored for 90 days or the expiration date printed on the box, whichever comes first

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COVID-19 Vaccine Storage and Handling CONT.

- Moderna 65+ mNexspike®

- Thawing directions

	Thaw in Refrigerator 2°C to 8°C (36°F to 46°F)	Thaw at Room Temperature 15°C to 25°C (59°F to 77°F)
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Carton of 2 syringes	Thaw for 1 hour and 40 minutes	Thaw for 40 minutes
Carton of 1 syringe	Thaw for 1 hour and 40 minutes	Thaw for 40 minutes
One syringe (removed from carton)	Thaw for 1 hour and 40 minutes	Thaw for 40 minutes

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COVID-19 Vaccine Storage and Handling CONT.

- Novavax 12+ Nuvaxoid

- Will ship at refrigerator temperatures
- Stored in the refrigerator at 2° to 8°C (36° to 46°F)
- Can be used until the expiration date printed on the box
- DO NOT FREEZE

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**How many routine
VFC/VFA vaccine
orders can a provider
place per month?**

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How many routine VFC/VFA vaccine orders can a provider place per month?

- A. As many orders as a provider needs so they do not run out of vaccine
- B. 1
- C. 2
- D. 3

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How many routine VFC/VFA vaccine orders can a provider place per month?

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- B. 1
- C. 2
- D. 3

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VFC/VFA Vaccine Orders

- Enrolled providers are able to order routine vaccines once per calendar month.
- Providers are allowed a three-month supply of vaccine on hand.
 - The NDIIS order minimum is a one-month supply.
 - The NDIIS order maximum is a three-month supply.
- Providers are able to order over the suggested order maximum.
 - A detailed comment as to why the doses are needed is required in the NDIIS.

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VFC/VFA Vaccine Orders CONT.

- If providers place a second order in a calendar month, the second order will count as next month's order.
- If providers run low on vaccine, contact the Immunization Unit at vaccine@nd.gov prior to placing another vaccine order.
- Providers should allow 2-3 weeks for vaccine deliveries.
 - Refrigerated vaccine will ship for delivery Tuesday, Wednesday or Thursday
 - Frozen vaccine will ship for delivery any day of the work week

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**How long can a vial of
IPV be used after the
vial is opened/entered?**

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**How long can a vial of IPV be used after the
vial is opened/entered?**

- Once the vial of IPV is open you have 28 days before the vial must be discarded
- The open vial of IPV is good until the expiration date on the vial
- The vial must be used within 2 months of opening

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- B. The open vial of IPV is good until the expiration date on the vial
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Open Multidose Vials

- Vaccines in multidose vials, that do not require reconstitution, can be used through the expiration date printed on the label as long as the vaccine is not contaminated or unless otherwise indicated by the manufacturer.
- IPV in a multidose vial can be used through the expiration date on the vial.



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Open Multidose Vials CONT.

- For some vaccines, the manufacturer specifies that once the multidose vial has been entered or the rubber stopper punctured, the vaccine must be used within a certain number of days.
- This is commonly referred to as the "beyond-use date" (BUD). Any vaccine not used within the BUD should be discarded.
 - Specific information regarding the BUD can be found in the product information.

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Which of the following immunizations need to be returned to McKesson once expired?

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Which of the following immunizations need to be returned to McKesson once expired?

- A. Open multidose vial of IPV
- B. Open, partially used box of vaccine
- C. Unopened multidose vials of vaccine
- D. All of the above can be returned to McKesson
- E. A and C
- F. B and C

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NDIIS Return vs Wastage Definition

- Definition of Vaccine Return:** Nonviable vaccine that needs to be returned to McKesson because it was expired, was spoiled because of a temperature excursion or because of a vaccine recall. Multi-dose vials (MDV) can only be returned if no doses have been drawn from the vial. Partially used MDVs must be documented as wasted vaccine.

- Definition of Vaccine Wastage:** Nonviable vaccine that is not able to be returned to McKesson. This includes broken vaccine vials or syringes, vaccine drawn into a syringe but not administered, lost or unaccounted for vaccine, and partially used multi-dose vials. **Vaccine being returned to McKesson must be entered as a vaccine return and should not be entered in this section.**

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Returns and Wastages

- When submitting returns and wastages in NDIIS it is no longer required to submit separate returns and wastages when using different reasons. More than one return or wastage reason can be used per transaction

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Returns vs Wastages

Return	Wastage
Any unopened MDV vaccine	Open IPV, MDV influenza, MDV COVID vaccine
Partially used/open boxes of vaccine	Broken syringe/vial
Full unopened boxes of vaccine	Vaccine drawn up and not administered
Partially use or full unopened boxes of Nirsevimab and Clesrovimab	Pandemic vaccine

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What are the current recommended alarm time settings for digital data loggers?

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What are the current recommended alarm time settings for digital data loggers?

A. High alarm limit set at 1 hour and low alarm limit set at 30 minutes
B. High alarm limit set at 30 minutes and low alarm limit set at 30 minutes
C. High alarm limit set at 30 minutes and low alarm limit set at 15 minutes
D. High alarm limit set at 1 hour and low alarm limit set at 1 hour

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D. High alarm limit set at 1 hour and low alarm limit set at 1 hour

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Temperature Alarm Limits

- As of January 1, 2026 all digital data logger alarm triggers should be set at 30 minutes outside of the acceptable temperature range, whether it be warm or cold.
 - Email vaccine@nd.gov for assistance in resetting data loggers or to find out if your data logger can be reset.

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Vaccine Storage and Handling

- All vaccines, except varicella, MMR®II, and MMRV must be stored in the refrigerator at **36°F - 46°F (2 - 8°C)**.
 - Optimal refrigerator temperatures are **39°F - 42°F (4 - 6°C)**.
- MMRV and varicella vaccine must be stored in the freezer at **-58°F to 5°F (-50°C to -15°C)**.
 - Optimal freezer temperatures are **3°F or colder (≤ -17°C)**
- MMR®II can be stored in the refrigerator or freezer
 - Priorix® vaccine **MUST** be stored in the refrigerator only.



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If your clinic submitted temperature logs today and the NDIIS does not show that they have been submitted, what should you do?

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If your clinic submitted temperature logs today and the NDIIS does not show that they have been submitted, what should you do?

- A. Email vaccine@nd.gov to make sure they have been received
- B. Resend the email again
- C. Be patient the indicator will be updated shortly
- D. Email ndiis@nd.gov to make sure they have been received

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If your clinic submitted temperature logs today and the NDIIS does not show that they have been submitted, what should you do?

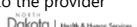
- A. Email vaccine@nd.gov to make sure they have been received
- B. Resend the email again
- C. Be patient the indicator will be updated shortly
- D. Email ndiis@nd.gov to make sure they have been received

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NDIIS Documentation

- Data logger temperature logs must be emailed to the Immunization Unit at dohtemplogs@nd.gov monthly.
- Submitted temperature logs are documented in the NDIIS by Immunization Unit staff.
 - Documenting temperature logs in the NDIIS is a manual process for our staff. We try to enter them in a timely manner but it can take 2-3 business days after they are submitted before the NDIIS is updated.
- Providers may still place vaccine orders if there is a warning message stating temperature logs are missing.
 - The vaccine order will not be approved and will be returned to the provider only if temperature logs have not been submitted.

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For orders that show a “Failed” status in the NDIIS, do providers need to reorder their vaccine?

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For orders that show a “Failed” status in the NDIIS, do providers need to reorder their vaccine?

A. Yes, the order did not process and will need to be resubmitted
B. No, the Immunization Unit will reprocess the vaccine order
C. Yes, but you should contact the Immunization Unit first to see why the order failed

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Vaccine Orders, Returns and Wastages

- Provider vaccine orders are submitted to CDC in real time once the Immunization Unit staff have approved the order.
- For a short time, you may see an order status of "Pending CDC Response" while the system is waiting for the automated process to complete.
- Once the order has been successfully processed by CDC's system, the order status will show as "Accepted by CDC".

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Vaccine Orders, Returns and Wastages CONT

- Provider vaccine returns and wastages are submitted to CDC in real time as soon as the provider clicks the "Complete Return" or "Complete Wastage" button in the NDIIS.
- Within a few minutes of completing a vaccine return, providers will be notified that they have a packing slip ready to print in the NDIIS and should have received the return shipping label.
- Please wait 1-2 business days after completing a vaccine return before contacting vaccine@nd.gov for the shipping label or packing slip.

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CDC VTrckS System

- There are times when the interface to CDC's system is unresponsive or not working correctly. Providers may see other order, return, and wastage statuses displayed in the NDIIS.
 - Failed – the CDC system is not working or is experiencing downtime
 - Rejected – there was a processing error
- Immunization Unit staff monitor vaccine orders, returns, and wastages closely
 - Immunization Unit staff will resubmit anything that has a "Failed" status once the interface is working again.
 - Immunization Unit staff will correct the error and resubmit the order, return, or wastage.
 - If needed, Immunization Unit staff will return an order/return/wastage to the provider and will work with the provider to make necessary corrections.

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Does an NDIIS Site Administrator have to have their own NDIIS login?



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A. Yes
B. No



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B. No



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Site Administrator

1. Be the sole authority to authorize new NDIS users for their Provider Site.
2. Remove user access to the NDIS within one week after a user's employment at the Site terminates or the Site no longer authorizes the user's access to NDIS.
3. Ensure that each user at the Site has his or her own username and password, so that login information is not shared between users.
4. Be the point of contact for account verifications, system alerts and policy changes.
5. Be responsible for ensuring that users comply with all applicable laws, regulations and NDIS policies.
6. Ensure users have appropriate training on the proper use of the NDIS.
7. Regularly audit their Site's active users.
8. Maintain their own unique, active login for the NDIS to ensure continued access to approve, regularly audit, and remove access for users for their Provider Site.
9. Notify the NDIS team via email at NDIS@nd.gov at least one week in advance of resigning Site Administrator duties to allow for the transition to a new NDIS Site Administrator.
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Site Administrator

- All providers with users logging in to the NDIS must have a current provider site agreement with a designated Site Administrator.
- Site Administrators must review their Provider Site Agreement annually and acknowledge that the information is still correct.
 - Sites that do not have a Site Administrator with an active NDIS login will not be able to complete this annual review/acknowledgement and lose their site's access to the NDIS.
- Starting next week, new NDIS users will need an email invitation from their facility's Site Administrator in order to create an NDIS login.
 - Only users with Provider Admin-level access will have the ability to trigger a new user invitation from the NDIS.
 - Users will not be able to create a new account from the NDIS login page unless they have navigated to the login/create account page from the email invitation.

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Authorized Representative

- They must be familiar with the staff and their roles and must be able to serve as a back-up contact for the Site Administrator
- The Authorized Representative must be someone responsible for oversight at the Provider Site:
 - Managing Physician
 - CEO
 - Director
 - Principal
 - Superintendent



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Given the recent CDC immunization schedule changes, should we continue to offer all immunizations?

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Given the recent CDC immunization schedule changes, should we continue to offer all immunizations?

A. No, the updated immunization schedule should be followed as is and immunizations that are no longer considered routinely recommended are not to be administered
 B. Yes, but only if children meet certain high-risk conditions
 C. Yes, all immunizations remain recommended – either routinely or through shared clinical decision-making – and providers should continue discussing all vaccines with parents and caregivers

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If our facility gives vaccines that are now considered “shared clinical decision making” will insurance cover without additional documentation?

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If our facility gives vaccines that are now considered “shared clinical decision making” will insurance cover without additional documentation?

A. No, without the immunization being included on the routine schedule some insurance plans may deny covering the cost
 B. Yes, these immunizations will be covered with no out-of-pocket cost by ACA-regulated private insurance plans, federal coverage programs such as Medicaid, and the VFC program
 C. Yes, but the facility will need to document a related high-risk condition
 D. No, immunizations that are no longer included in the updated routine immunization schedule should no longer be administered

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Will the NDIIS still forecast for immunizations that are now categorized on the CDC immunization schedule as "shared clinical decision-making"?

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Will the NDIIS still forecast for immunizations that are now categorized on the CDC immunization schedule as "shared clinical decision-making"?

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A. No, the NDIIS forecaster is currently being changed to reflect only those immunizations listed as routine on the CDC immunization schedule

B. Yes, the NDIIS forecaster will continue to forecast for all immunizations, including those that are now on the CDC immunization schedule as "shared clinical decision-making"

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Can birthing facilities still administer hepatitis B vaccine to all newborns?

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Can birthing facilities still administer hepatitis B vaccine to all newborns?

A. Yes, birthing facilities can still offer the birth dose of hepatitis B vaccine to all newborns
B. Yes, but additional screening is required so fewer infants may be receiving hepatitis B vaccine at birth
C. No, the birth dose of hepatitis B is no longer recommended unless the mother tests positive for hepatitis B virus

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Mark your calendars!

Immunization Conference June 23rd - 24th 2026 in Bismarck.

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Post-Test

- Post-test
- Nurses interested in continuing education credit, visit Successfully complete the five-question post-test to receive your certificate: https://ndhealth.co1.qualtrics.com/jfe/form/SV_8B3Ljr0l3YV4OeW
- Credit for this session will be available until February 11, 2026.
- This presentation will be posted to our website: www.hhs.nd.gov/immunizations

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Immunization Unit Staff Members

For general immunization questions: vaccine@nd.gov For NDIIIS-specific questions: NDIIIS@nd.gov

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Jenny Gallbraith Adult Immunization Manager	Phone: 701-328-2335 Email: jgallbraith@nd.gov	Lynde Monson CDC Public Health Advisor	Phone: Email: lyndemonson@nd.gov
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