FORM SA\_1 (10.71) SUBMIT IN TRIPLICATE

## STATE OF HAWAII RECORDS DISPOSITION AUTHORIZATION

State Archives Iolani Palace Grounds, Honolulu, Hawaii 96813

Attention: State Archivist

ITEM NO.	FORM NO.	the numbered record items listed below. X Authorization	YEARS OR P	FRIOD	
***************************************	TORM NO.	DESCRIPTION	FROM	THROUGH	RETENTION
		DEPARTMENT OF HEALTH			
		[4] 마스테이스 (14:10) 11 (14:10) 12 (14:10) 12 (14:10) 12 (14:10) 13 (14:10) 13 (14:10) 14			
		Disease Outbreak Control Division			
		Immunization Branch			
		[편집] [12] : [12] [12] [12] [12] [12] [12] [12] [12]			
		See attached list of 13 items.			
			and the		
	# 3 V=33				
		[19] [19] [19] [19] [19] [19] [19] [19]			
<b>开</b> 电电					
		Sterly 15 Aug 18			
		10 Hug 10			
		Sarah Y. Jark, MD, Chief			
		Disease Outbreak Control Division			
Record items	s Nos.				
	***************************************	will be preserved on microfilm in ac-	cordance with Section	92-31 Hawaii Re	evised Statutes.
is requested th	hat Record item	6 Nos.	er and a succession of a succession of such		January American Systems of the State of the
***************************************	······································				
			be trai	nsferred to the	State Archives.
			ordinari mi. t. Amona da meruna amona m		
$\bigcirc$					
Rus	MO D	Department of Health		10 1	
Ray		Department of Health	Srul SIGNATURE	LAnde E OF HEAD OF DEPA	LIEN.
Ray	NATURE OF RECOR Rachel T. Makin	D9 OFFICER AGENCY		Anderson, Ph.D.	CACA THENT
	Rachel T. Makir	OB OFFICER AGENCY amdam	Bruce	S. Anderson, Ph.D.	further preserva-
I hereby cert	Rachel T. Makin	D9 OFFICER AGENCY	Bruce	S. Anderson, Ph.D.	further preserva-
I hereby cert	Rachel T. Makin	ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
	Rachel T. Makin	ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby certion. Exceptions:	Rachel T. Makin	ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby cert	Rachel T. Makin	andam  AGENCY  amdam  ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby certion. Exceptions:	Rachel T. Makin	ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	Bruce nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby certion. Exceptions:	Rachel T. Makin	andam  AGENCY  amdam  ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	Bruce nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby cert on. Exceptions:  ecord items No	Rachel T. Makin	ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi	Bruce nistrative, or research pur	S. Anderson, Ph.D.	further preserva-
I hereby cert on. Exceptions: ecord items No	Rachel T. Makin	andam  AGENCY  andam  ords as listed, unless exceptions are listed below, do not appear to be of sufficient value for legal, admi  \[ \lambda \rightarrow \lambda \rightarrow \]  to be transferred to \[ \begin{array}{c} State Archives \\ \tag{AGENCY} \end{array}	Bruce nistrative, or research pur	S. Anderson, Ph.D.	further preserva-

Immunization Branch, Disease Outbreak Control Division, DOH

**Retention and Disposition Schedule** 

Item No.	Series Name	Retention	Disposition
1	Immunization Records Requests	3 years.	Destroy after cited retention.
2	Vaccine Adverse Events Reporting System (VAERS) Reports.	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
3	Vaccine Administration Forms	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
4	Stop Flue at School Clinic Summary Forms and Stop Flu at School Sign-in Sheet for Non-Vaccinating Clinic Staff	3 years.	Destroy after cited retention.
5	School-located Influenza Vaccination Program Incident/Adverse Event Reports	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
6	Stop Flu at School Immunization Records	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
7	HIR (Hawaii Immunization Registry) Facility User Agreement/Enrollment, HIR Confidentiality and Security Statement, and Training Documentation	3 years.	Destroy after cited retention.
8	HIR (Hawaii Immunization Registry) Opt-Out Form and HIR Reauthorization Form	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
9	EPI 12A and EPI 12B	3 years.	Destroy after cited retention.
10	Yellow Fever Enrollment Documents. Yellow Fever Vaccination Logs/Supplemental Application Logs.	3 years.	Destroy after cited retention.
11	Medical Records from VPD (Vaccine Preventable Disease) Investigation, Lab reports for VPD Investigations.	Use GRS 10.1a. Adults: 25 years after date of last entry. Minors: 25 years after age of majority.	Destroy after cited retention.
12	Hawaii Vaccines for Children (VFC) Program Forms	3 years.	Destroy after cited retention.
13	Vaccine Accountability Forms	3 years.	Destroy after cited retention.