

2015-2016

**MINIMUM DOSES OF IMMUNIZATIONS REQUIRED FOR SCHOOL ATTENDANCE
REFERENCE SHEET FOR PARENTS AND SCHOOL STAFF**

Washington State Law (RCW 28A.210.060-170) requires that all children have a completed Certificate of Immunization Status (CIS) on file at the school they attend AT THE TIME OF REGISTRATION.

The law requires proof of one of the following:

1. The initiation of and compliance with a schedule of immunization documented on the Certificate of Immunization Status (CIS) and signed by the parent/guardian.
2. A Certificate of Immunization Status (CIS) indicating blood test showing proof of immunity - must have health care provider's signature AND attached lab report(s).
3. A Certificate of Exemption (COE) completed and signed by the parent/guardian and the health care provider for personal/philosophical or religious exemption and for medical exemption.
4. A Certificate of Exemption (COE) completed and signed by the parent/guardian indicating membership in a church or religious body whose beliefs or teachings do not allow for medical treatment by a health care provider.

The exact date (month/day/year) each vaccine dose was given is required.

PRESCHOOL STUDENTS

- *3 Hep B** (Hepatitis B) given at recommended intervals with dose #3 given on or after 24 weeks of age
- **4 DTaP or DT** (Diphtheria, Tetanus, Pertussis)
- 4 Hib** (Haemophilus influenzae type b), but considered complete if one of the following requirements is met:
 3 doses required if 2 doses given before 12 months of age with third dose given on or after 12 months of age
 3 doses required if all three doses of PedvaxHIB were given
 2 doses required if one dose given before 12 months of age and dose two given on or after 15 months of age
 1 dose required IF the only dose was given on or after 15 months of age
 NOT given after 5 years of age
- 4 PCV7 or PCV13** (Pneumococcal conjugate), but considered complete if:
 3 doses required if 2 doses were given before 12 months of age with third dose given on or after 12 months of age
 2 doses required if both doses were given between 12-24 months of age, at least eight weeks apart
 1 dose required IF the only dose was given on or after 24 months of age
 NOT given after 5 years of age
- ***3 IPV or OPV** (Polio)
- ****1 MMR or MMRV** (Measles, Mumps, Rubella) received on or after the 1st birthday
- *****1 VAR or MMRV** (Varicella/Chickenpox) received on or after the 1st birthday OR signed verification of disease from health care provider

KINDERGARTEN THROUGH FOURTH GRADE STUDENTS

- *3 Hep B** (Hepatitis B) given at recommended intervals with dose #3 given on or after 24 weeks of age
- **5 DTaP or DT** (Diphtheria, Tetanus, Pertussis) if dose 5 given on or after 4th birthday. If dose 4 was given on or after 4th birthday, dose 5 is not required.
- ***4 IPV or OPV** (Polio) with final dose given on or after 4th birthday, after 8/7/09, AND with a minimum interval of 6 months from previous dose. If dose 3 was given on or after 4th birthday, dose 4 is not required.
- ****2 MMR or MMRV** (Measles, Mumps, Rubella) received on or after the 1st birthday and at least 28 days apart
- *****2 VAR or MMRV** (Varicella/Chickenpox) received on or after the 1st birthday and at least 28 days apart OR signed verification of disease from health care provider

FIFTH GRADE STUDENTS

- *3 Hep B** (Hepatitis B) given at recommended intervals with dose #3 given on or after 24 weeks of age
- **5 DTaP, DT, or Td** (Diphtheria, Tetanus, Pertussis)
- ***4 IPV or OPV** (Polio) If dose 3 was given on or after 4th birthday, dose 4 is not required.
- ****2 MMR or MMRV** (Measles, Mumps, Rubella)
- *****2 VAR or MMRV** (Varicella/Chickenpox) received on or after the 1st birthday and at least 28 days apart OR signed verification of disease from health care provider

SIXTH THROUGH EIGHTH GRADE STUDENTS

- *3 Hep B** (Hepatitis B) given at recommended intervals with dose #3 given on or after 24 weeks of age (*If student receives 2 doses of the adult vaccine, Recombivax HB®, between ages 11 and 15 with doses separated by 4 months, the student is considered complete.*)
- **5 DTaP, DT, or Td** (Diphtheria, Tetanus, Pertussis)
- **1 Tdap** on or after 11th birthday
- ***4 IPV or OPV** (Polio) If dose 3 was given on or after 4th birthday, dose 4 is not required.
- ****2 MMR or MMRV** (Measles, Mumps, Rubella)
- ****2 VAR or MMRV** (Varicella/Chickenpox) received on or after the 1st birthday and at least 28 days apart OR signed verification of disease from health care provider

NINTH THROUGH TWELFTH GRADE STUDENTS

- *3 Hep B** (Hepatitis B) given at recommended intervals (*If student receives 2 doses of the adult vaccine, Recombivax HB®, between ages 11 and 15 with doses separated by 4 months, the student is considered complete.*)
- **5 DTaP, DT, or Td** (Diphtheria, Tetanus, Pertussis)
- **1 Tdap** on or after 11th birthday
- ***4 IPV or OPV** (Polio) If dose 3 was given on or after 4th birthday, dose 4 is not required.
- ****2 MMR or MMRV** (Measles, Mumps, Rubella)
- ****0 VAR or MMRV** (Varicella/Chickenpox) (2 doses recommended but not required)

There is no maximum interval between doses. Even if the recommended interval is not met, the series does not need to be restarted. Vaccine doses given within four days before the minimum age or interval are valid, **except** for the intervals between MMR doses and Varicella doses.

***Hep B** (Hepatitis B)

The minimum age for dose #1 is birth and minimum interval between dose #1 and dose #2 is 4 weeks.

The minimum age for dose #2 is 4 weeks and minimum interval between dose #2 and dose #3 is 8 weeks.

The minimum age for dose #3 is 24 weeks (Pre-8th) and 4 months (9th-12th).

The minimum interval between dose #1 and dose #3 is 16 weeks (Pre-8th) and 12 weeks (9th-12th).

****5 doses DTaP/DT/DTP/Td** (Diphtheria/Tetanus/Pertussis) **with last dose on or after the 4th birthday required except**

4 doses if the last dose was given on or after the 4th birthday.

3 doses diphtheria and tetanus containing vaccines may complete the series for a child 7 years or older.

Tdap – recommended for children after age 11 and required for entry into sixth through twelfth grade if student is at least 11 years old.

*****4 Doses IPV or OPV** (Polio) **with last dose on or after 4th birthday required except**

If all 4 doses given before the 4th birthday and prior to 8/7/09 – acceptable for fifth through twelfth grade.

If final dose given on or after 8/7/09, must be given on or after 4th birthday AND with a minimum interval of 6 months from the previous dose.

If dose 3 given on or after 4th birthday, dose 4 is not required.

Not required for students 18 years and older.

******MMR** (Measles/Mumps/Rubella) **or MMRV** (Measles/Mumps/Rubella/Varicella)

Dose 1 must be given on or after the 1st birthday.

Dose 2 must be given at least 28 days after Dose 1.

The **MMR** and varicella vaccines must be given either on the same day OR separated by at least 28 days before or after each other.

The **MMRV** contains measles, mumps, rubella, **and** varicella in one vaccine.

The four day grace period applies to all vaccines **except** the intervals between MMR doses and Varicella doses.

*******VAR** (Varicella) **or MMRV** (Measles/Mumps/Rubella/Varicella)

Dose 1 must be given on or after the 1st birthday.

Dose 2 must be given at least 28 days after Dose 1 with a recommended interval of three months between doses.

The **MMR** and varicella vaccines must be given either on the same day OR separated by at least 28 days before or after each other.

The **MMRV** contains measles, mumps, rubella, **and** varicella in one vaccine.

The four day grace period applies to all vaccines **except** the intervals between MMR doses and Varicella doses.

Parents: Please keep your own records of your student's immunizations. It is likely that you will need to refer to these records in the future. A copy of official immunization records is frequently required for college admission and employment.