



**LOS ANGELES UNIFIED SCHOOL DISTRICT
POLICY BULLETIN**

TITLE: Immunization Guidelines For School Admission

NUMBER: BUL-1660.2

ISSUER: Rowena Lagrosa, Deputy Superintendent
Educational Services

DATE: July 21, 2005

POLICY: Children must have required immunizations before they can attend school in California. Parent/Guardian must present their child’s Immunization Record to school staff as proof of immunization prior to admission.

MAJOR CHANGES: This bulletin replaces Bulletin No. Z-4, “Immunization Guidelines for School Admission,” dated June 1, 2001 and Bulletin – 1660.1 of the same dated May 5, 2005. The content has been updated to reflect current immunization requirements.

GUIDELINES: The following guidelines apply.

ROUTING
Local District
Superintendents
Administrators
School Nurses
SAA’s

REQUIREMENTS FOR SCHOOL ENTRY

The California Health and Safety Code Section, Division 105, Part 2, Chapter 1, Sections 120325-120380 and the California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 8, Sections 6000-6075 requires the following immunizations prior to school entry.

1. All children entering a California school at pre-school or kindergarten level (or first grade if kindergarten was skipped) require immunization against polio, diphtheria, pertussis, tetanus, measles, mumps, rubella (MMR), hepatitis B and varicella. Students enrolled in a California school before July 1, 2001 are exempt from the varicella requirement. Acceptable varicella documentation includes either the immunization or documentation by a medical provider that the child has had the varicella (chickenpox disease).
2. In addition to these immunizations, all children below the age of four years, six months, require Haemophilus influenza type B immunization (see Attachment E).
3. Children seven years of age and older require immunization against polio, diphtheria, tetanus, measles and rubella but are not required to be immunized against pertussis and mumps. All children under 18 years of age from out of state or country who enter *a California school for the first time* after July 1, 2001 require immunization against varicella or acceptable documentation by a physician’s office or clinic that the child has had the varicella (chickenpox) disease.



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4. All children entering or repeating 7th grade must be immunized against Hepatitis B. In addition, these students are required to have two doses of a measles-containing vaccine, at least one of which must be MMR.
5. Refer to Attachments for specific requirements. These Attachments can be photocopied and used as quick references during registration.

Exemptions to the immunization requirement are provided for medical or personal reasons. (See California Administrative Code, Title 17, Division 1, Chapter 4, Section 6051.)

A medical exemption requires a written statement from a licensed physician to the effect that the physical condition of the pupil or medical circumstances relating to the pupil are such that immunization is not indicated. This statement will be attached to the California School Immunization Record (CSIR).

A personal belief exemption is that the immunization(s) is contrary to the parent/guardian beliefs. The fact of the personal beliefs exemption shall be recorded on the CSIR. The Personal Beliefs Affidavit to be signed by the parent or guardian is located on the reverse side of the California School Immunization Record (CSIR).

The California Administrative Code charges the administrator of each school with enforcing these immunization requirements. The school nurse is available to assist with this responsibility. Since verification of immunization must be shown at the time of enrollment, office personnel who register new students must be familiar with the requirements.

Parents/Guardians who do not have a written immunization record for their child are to be referred to their physician or the health department to obtain the required immunizations and/or written immunization verification for their child prior to enrollment. No grace period is allowed.

For exceptions refer to Bulletin 787: July 1, 2004 "Guidelines for School Enrollment of Students in Out of Home Placement," and Bulletin 1570: Feb. 8, 2005 "Enrollment of Homeless Children and Youth in Schools."

FIRST ADMISSION TO SCHOOL

Children entering school for the first time must possess a written immunization record showing receipt of each required dose of vaccine (see Attachment A). This record must show the date (at least the month and year) of each dose. Measles, mumps, rubella (MMR) records must have the month, day, and year if administered in the month of the first birthday.

Unconditional Admission (K-12). Granted to students who have:

1. Met all immunization requirements.



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2. Filed a medical exemption signed by a physician (if the need ceases to exist, the student must then meet immunization requirements).
3. A statement of personal belief against immunizations signed by parent or guardian.
4. Reached 18 years of age or older.

Conditional Admission (Pre-K). Granted to students who have:

1. Completed all age-appropriate immunizations required to date (see Attachment E). All pre-kindergarten students are admitted *conditionally* since immunization schedules cannot be completed because of age.
2. Haemophilus influenza type B immunization is required for first school entry for all students below the age of four years, six months.

Conditional Admission (K-12). Granted to students who have been partially immunized and succeeding vaccine doses are not yet due (see Attachment E).

Note: If the maximum time interval between doses has already been exceeded, the next required doses must be received before admission. Remaining required doses must be received according to the vaccine schedule.

A primary immunization series does not have to be restarted if the interval between doses is prolonged.

Follow-up of Conditional Admission

Students who have been admitted conditionally must have their immunization records reviewed every 30 days until all required immunizations are completed.

Parents are to be notified of the date the immunization is due. At this time, they are also to be notified of the date the student must be excluded if the immunization is not received within 10 school days. (See sample letter, Attachment C).

ADMISSION OF TRANSFERRING STUDENTS

Parents or guardians of students transferring within LAUSD must present a written immunization record prior to enrollment.

LAUSD sending schools should give the parent/guardian a copy of the California School Immunization Record (CSIR) card to take to the receiving school.

Receiving schools must request immunization documents directly from the parent to determine admission status and follow-up as indicated. In unusual circumstances



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only, a fax or telephone confirmation that immunizations are complete to date may be accepted from another LAUSD school for enrollment purposes, pending receipt of records. Follow-up must be done to assure that records are received and meet State requirements.

Students from other countries must meet the same requirements as any student entering school for the first time.

EXCLUSION

A student who was admitted conditionally and fails to obtain the required immunizations within the time periods specified in Attachment E, Item 3 (Conditional Admission), must be excluded until he/she receives another dose of each vaccine required at that time.

The school administrator is charged by the California Administrative Code and Board Rule 2313 to exclude a student who does not meet the immunization requirements within the specified time periods when the following conditions are met:

1. Parent/Guardian has been informed of public sources of immunization administration.
2. Parent/Guardian has been notified at least 10 school days before the date of exclusion.

When a student, who has not been completely immunized against a particular communicable disease, is believed to have been exposed to that disease, the school administrator must report this information immediately by telephone to the Director of Student Medical Services.

The Director of Student Medical Services and the County Health Officer will determine whether the student is at risk of developing the disease, and, if so, may require exclusion of the student until the completion of the incubation period and the period of communicability of the disease.

RECORD KEEPING

Written personal immunization record

1. The physician or health agency performing the immunizations must give a written record to the student or parent/guardian containing the following information:
 - Name of child
 - Birth date of child
 - Type of vaccine(s) administered
 - Date of each immunization (month/year) or



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- Physician's written indication that the child had the disease or lab report indicating that the child has immunity for the disease
 - Name of physician or health agency administering vaccine(s)
2. A variety of written records may be used for this purpose but the Immunization Record, printed by the California State Department of Health Services, is most often used (see Attachment A).
 3. At the time of enrollment, school personnel should make a photocopy of the written record. The copy should be kept with the student's health card. *School personnel will enter immunization data along with other enrollment information in the computer and on the student's health card.*

California School Immunization Record (CSIR) [PM 286 (1/02)]

1. It is mandatory that each new kindergarten student has his/her immunizations recorded by *school personnel* on the California School Immunization Record (CSIR) card. This card is part of the student's permanent record and must be filled with the Student's Cumulative Record file (see Attachment B).

The CSIR card is also required for each new admission at other grade levels through grade 12 for whom no previous permanent record exists.

The requirement for immunization records on a CSIR card refers also to students in the Early Education Program and pre-school age children participating in school-based programs.

LAUSD policy requires that school personnel review the CSIR card and certify the accuracy of the document information at school entrance and before entrance to 7th grade.

2. If a student was admitted conditionally, all immunizations received after the conditional admission must be entered on the student's CSIR card.
3. When an exemption on the basis of personal beliefs is claimed, the parent/guardian must sign the affidavit on the back of the CSIR card.
4. When a medical exemption is claimed, a signed physician's statement to this effect is required and must be attached to the CSIR card. The following information must be included:
 - Type of immunization(s) from which the student is medically exempt.
 - Reason(s) immunization(s) cannot be given.
 - Probable duration of medical condition or circumstances contraindicating the immunization(s).



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Reporting to the State of California Department of Health Services

1. The administrator of each school must ensure that a report is properly filed with District Nursing Services on the immunization status of new kindergarten entrants and all students entering or repeating 7th grade at the beginning of each school year. A District report will be compiled and sent to the State of California Department of Health Services and County of Los Angeles-Department of Health Services.
2. The County of Los Angeles Department of Health Services may request additional reports on the immunization status of students at any time.
3. A few schools will be selected at random annually by the State of California Department of Health Services, for monitoring of immunization record keeping, reporting, and follow-up procedures.

AUTHORITY: This is a policy of the California Health and Safety Code Section, the California Code of Regulations, the LAUSD Board of Education to require immunizations prior to school entry.

RELATED RESOURCES:

- California Immunization Handbook for School and Child Care Programs, 7th Edition, July 2003.
- Health and Safety Code, Division 105, Part 2, Chapter 1, Sections 120325-120380 (formerly Sections 3380-3390).
- California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 8, Sections 6000-6075.
- LAUSD Board Rule 2313

ASSISTANCE: For assistance or further information please contact Kimberly Uyeda, MD, Director, Student Medical Services, at (213) 763-8342; or Karen Maiorca, Director, District Nursing Services at (213) 763-8374.

CALIFORNIA SCHOOL IMMUNIZATION RECORD

This record is part of the student's permanent record (cumulative folder) as defined in Section 49068 of the Education Code and shall transfer with that record. Local health departments shall have access to this record in schools, child care facilities, and family day care homes.

This record must be completed by school and child care personnel from an immunization record provided by parent or guardian. See reverse side for instructions.

Student Name _____ Sex: M F Birthdate _____ Place of Birth _____

Name of Parent or Guardian _____ Race/Ethnicity: Address _____

Telephone _____ Daytime _____ Nighttime _____ City _____ ZIP _____

- Race/Ethnicity:
 White, not Hispanic
 Hispanic
 Black
 Other: _____

VACCINE	DATE EACH DOSE WAS GIVEN					
	1st	2nd	3rd	4th	5th	Booster
POLIO (OPV or IPV)						
DTP/DTaP/DT/Td (Diphtheria, tetanus and [acellular] pertussis OR tetanus and diphtheria only)						
MMR (Measles, mumps, and rubella)						
HIB (Required only for child care and preschool)						
HEPATITIS B						
VARICELLA (Chickenpox)						
HEPATITIS A (Not required)						

I. DOCUMENTATION

I certify that I reviewed a record of this child's immunizations and transcribed it accurately:
 Date _____
 Staff Signature _____

Record Presented was:
 Yellow California Immunization Record
 Out-of-state school record
 Other immunization record
 Specify: _____

II. STATUS OF REQUIREMENTS

A. All Requirements are met.
 Date _____ / _____ / _____

B. Currently up-to-date, but more doses are due later. Needs follow-up.

Exemption was granted for:
 C. Medical Reasons—Permanent
 D. Medical Reasons—Temporary
 E. Personal Beliefs

III. 7th GRADE ENTRY

A. All Requirements are met.
 Name _____ Date _____

B. Currently up-to-date, but more doses are due later. Needs follow-up.
 Name _____ Date _____

TB SKIN TESTS	Type*	Date given	Date read	mm indur	Impression	CHEST X-RAY (Necessary if skin test positive)	
						Film date: _____	Impression: <input type="checkbox"/> normal <input type="checkbox"/> abnormal
	<input type="checkbox"/> PPD-Mantoux <input type="checkbox"/> Other				<input type="checkbox"/> Pos <input type="checkbox"/> Neg		
	<input type="checkbox"/> PPD-Mantoux <input type="checkbox"/> Other				<input type="checkbox"/> Pos <input type="checkbox"/> Neg		

*If required for school entry, must be Mantoux unless exception granted by local health department.

Person is free of communicable tuberculosis: yes no

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 May 10, 2005
 SAMPLE OF CALIFORNIA SCHOOL IMMUNIZATION RECORD
 Attachment B

LOS ANGELES UNIFIED SCHOOL DISTRICT
 Student Health and Human Services

INSTRUCTIONS FOR SCHOOL OR CHILD CARE STAFF

1. Complete child's name and address information section, or ask parent or guardian to complete this section only. (This form is not to be sent home or given to parents to complete.)
2. School or child care personnel then fill in date (month/day/year) of each immunization the student has received from the Immunization Record presented by the parent or guardian. (If the date consists only of month and year for some doses, fill in month/xx/year; however, if either measles, rubella or mumps (or MMR) was received in the month of the first birthday, month/day/year is required.)
3. Determine if immunization requirements have been met, using the California "Immunization Requirements for Grades K-12," or "Immunization Requirements for Child Care," (available from Immunization Coordinators in local health departments), or other requirements guide.
4. Complete the Documentation and Status of Requirements box.
 - A. Fill in date and your signature as the staff member who reviewed and transcribed the immunization record presented by the parent or guardian. Check which type of record was presented.
 - B. If the child has met all immunization requirements, check box A and write in date.
 - C. If the child has not met all requirements, check box B. Child can be admitted only if up-to-date, e.g., no immunizations due currently. The child must be followed up as indicated in the "Guide to Immunization Requirements."
 - D. If a child is to be exempted for medical reasons, a doctor's written statement is required; the statement must include which immunization(s) is to be exempted and the specific nature and probable duration of the medical condition. If the medical exemption is permanent, the requirement for the designated immunization(s) is met: check box A and box C.* If the medical exemption is temporary, check box B and box D; this child must be followed up.*
 - E. If a child is to be exempted for reasons of personal beliefs, the parent or guardian must sign and date the affidavit below. No other parents should sign this affidavit. All requirements are met; check box A and box E.*

PERSONAL BELIEFS AFFIDAVIT TO BE SIGNED BY PARENT OR GUARDIAN—IMMUNIZATION

I hereby request exemption of the child, named on the front, from the immunization requirements for school/child care entry because all or some immunizations are contrary to my beliefs. I understand that in case of an outbreak of any one of these diseases, the child may be temporarily excluded from attending for his/her protection.

CREENCIAS PERSONALES: ESTA DECLARACIÓN JURADA DEBE SER FIRMADA POR EL PADRE O LA MADRE O EL GUARDIÁN

Solicito por la presente la dispensa de mi hijo, nombrado en el reverso, de los requisitos para vacunas de la entrada a la escuela/guardería ya que algunas o todas de las vacunas son opuestas a mis creencias. Comprendo que en caso de un brote en la comunidad de alguna de estas enfermedades, mi hijo puede ser excluido temporalmente de la escuela/guardería por su propia protección.

Signature (Firma) _____ Date (Fecha) _____

Applicable only in those jurisdictions where the Tuberculosis Assessment is required for school entry

Personal Beliefs Affidavit to be Signed by Parent or Guardian—Tuberculosis

I hereby request exemption of the child named on the front from the tuberculosis assessment requirement for school/child care center entry because this procedure(s) is contrary to my beliefs. I understand that should there be cause to believe that my child is infected with active tuberculosis or should there be a tuberculosis outbreak, my child may be temporarily excluded from school.

Creencias Personales: Declaración Jurada Debe ser Firmada por el Padre o la Madre o el Guardián

Solicito por la presente la dispensa de mi hijo, nombrado en el reverso, de los requisitos para la evaluación de la tuberculosis (tisis) de la entrada a la escuela ya que esta evaluación es opuesta a mis creencias. Comprendo que si hay razón para sospechar que mi hijo sufra de la tuberculosis activa o si hay un brote de la tuberculosis, mi hijo puede ser excluido de la escuela.

Signature (Firma) _____ Date (Fecha) _____

* Names of all children who are exempt should be maintained on an exempt roster for immediate identification in case of disease outbreak in the community.

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Student Health and Human Services

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Attachment C

School

Date _____

NOTIFICATION OF IMMUNIZATION(S) DUE

STUDENT'S NAME _____ ROOM _____ GRADE/TRACK _____

Dear Parent or Guardian:

This notice is a reminder that your child's immunization series is incomplete. Additional immunizations are now due. The California Administrative Code requires that your child received these immunizations in order to remain enrolled in school. The purpose of this law is to protect all students against serious childhood diseases.

Immunizations may be given by a private physician or are available without cost from the local County Health Department. For more information, please call 1-800-427-8700 for the location of free immunization clinics.

You must present written evidence from your physician or clinic that your child has received the necessary immunizations by the dates given below or your child will be **EXCLUDED FROM SCHOOL ATTENDANCE** beginning _____.

TAKE THIS NOTICE AND YOUR CHILD'S IMMUNIZATION
RECORDS TO YOUR PHYSICIAN OR CLINIC

According to school records your child needs the immunization checked below:

Polio/IPV:	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>	#3 <input type="checkbox"/>	#4 <input type="checkbox"/>	
DTaP/DT/Td:	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>	#3 <input type="checkbox"/>	#4 <input type="checkbox"/>	#5 <input type="checkbox"/>
Measles, Mumps, Rubella:	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>			
Hepatitis B:	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>	#3 <input type="checkbox"/>		
Hib:(applies to children under 4 years 6 months)	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>	#3 <input type="checkbox"/>	#4 <input type="checkbox"/>	
Varicella	#1 <input type="checkbox"/>	#2 <input type="checkbox"/>			

If you have any questions, please contact the school nurse.

Principal

School Nurse

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Attachment C

Escuela

Fecha _____

**NOTIFICACIÓN DE LA FECHA LIMITE PARA TENER
LAS VACUNAS AL CORRIENTE**

NOMBRE DEL ESTUDIANTE _____ SALÓN/GRADO _____ CICLO _____

Estimado Padre or Tutor:

Esta notificación es un recordatorio de que se ha vencido la fecha límite para tener al corriente las vacunas de su hijo/a en el momento de inscribirlo en la escuela. El Código Administrativo de California exige que a su hijo/a se le administren estas vacunas para que siga inscrito en la escuela. El propósito de esta ley es proteger a todos los estudiantes en contra de enfermedades infantiles graves.

Las vacunas las puede administrar un médico particular o están disponible sin costo a través del Departamento de Salubridad del Condado. Para mayor información, por favor llame al 1-800-427-8700 para que le indiquen cuáles son las clínicas que administran vacunas gratuitamente.

Usted debe presentar una prueba por escrito de su médico o de la clínica que le han administrado a su hijo/a las vacunas necesarias para las fechas que se dan a continuación, de lo contrario a su hijo **SE LE EXCLUIRA DE LA ESCUELA a partir de** _____.

LLEVE ESTA NOTIFICACIÓN Y EL REGISTRO DE LAS VACUNAS DE SU HIJO/A
A SU MÉDICO O CLÍNICA

De acuerdo con los registros de la escuela, su hijo/a necesita las vacunas que se indican a continuación:

- Polio: #1 #2 #3 #4
- DTaP/DT/Td: #1 #2 #3 #4 #5
- Sarampión, Paperas,
Rubeola: #1 #2
- Hepatitis B: #1 #2 #3
- Hib: (se administra a los menores de 4 años 6 meses) #1 #2 #3 #4
- Varicela #1 #2

Si tiene alguna pregunta, por favor comuníquese con la enfermera de la escuela.

Director(a)

Enfermera de la Escuela

LOS ANGELES UNIFIED SCHOOL DISTRICT
Student Health and Human Services

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May 10, 2005

ATTACHMENT D

OFFICE GUIDE FOR IMMUNIZATIONS

Instructions: Post in area where students are registered.

1. Parent/Guardian signature is no longer acceptable for immunization verification of children enrolling in school. A written record from a physician or the health department must be presented.
2. All pre-school and children center students must be immunized as per schedule. (See Attachment E, item 2)
3. A student for whom a personal belief or medical exemption is signed (see back of CSIR Attachment B, Page 2) is admitted unconditionally. (See Page 1, Requirements for School Entry)
4. All children entering a California school for the first time require immunization against varicella or acceptable documentation by a medical provider that the child has had the varicella (chickenpox) disease [children already in school at kindergarten level or above before 7-1-01 are exempt].
5. Children in kindergarten and those under age 7 must be immunized against polio, diphtheria, tetanus, measles, rubella, mumps, pertussis and hepatitis B. Age 18 or over are exempt from immunizations. (See Page 2, First Admission to School, Unconditional Admission K-12).
6. All children entering or repeating 7th grade must be immunized against hepatitis B. In addition these students will be required to have two doses of measles containing vaccine, at least one of which must be MMR. Students in ungraded classes must be immunized against hepatitis B and second dose of measles containing vaccine by age 12 years.
7. Children under the age of four years, six months require Haemophilus influenza B (HIB) immunization on first school entry.
8. If the student is partially immunized, he/she must follow the required immunization schedule and present written documentation of receiving the required vaccine(s). (See Attachment E)
9. Administrators must exclude students from school attendance if immunization requirements are not met. Parent/Guardian must be notified at least 10 school days in advance of immunizations which are due and the date the students is to be excluded. (See Page 4, Exclusion and Attachments C and D)
10. The CSIR card is the official, permanent immunization record, which is prepared by school personnel and kept with the cumulative record. Immunizations are also recorded on the Health Record card. (See Page 5, California School Immunization Record)

11. Grade K-12 students:

VACCINE**Polio****Diphtheria, Tetanus and Pertussis**

Age 6 years and under (Pertussis is required)
DTP, DTaP or any combination of DTP or,
DTaP with DT (diphtheria and tetanus)

Age 7 years and older (Pertussis is not required)
Td, DT or DTP, DTaP or any combination
of these

Measles, Mumps, Rubella (MMR)

Kindergarten
7th grade
Grades 1-6 and 8-12

Hepatitis B

Kindergarten
7th grade

Varicella

Kindergarten
Out-of-state entrants (grades 1-12)

REQUIRED DOSES

4 doses at any age, but ...3 doses meet the requirement for ages 4-6 years if at least one was given on or after the 4th birthday¹; 3 doses meet the requirement for ages 7-17 years if at least one was given on or after the 2nd birthday.¹

5 doses at any age but ...4 doses meet requirements for ages 4-6 years if at least one was on or after the 4th birthday.¹

4 doses at any age but ...3 doses meet the requirement for ages 7-17 years if at least one was on or after the 2nd birthday.¹ If the last dose was given before the 2nd birthday, one more (Td) dose is required.

2 doses² both on or after 1st birthday.¹

2 doses² both on or after the 1st birthday.¹

1 dose must be on or after the 1st birthday.¹

3 doses at any age

3 doses³ at any age

1 dose⁴

1 dose for children under 13 years; 2 doses are needed if immunized on or after 13th birthday.⁴

Tuberculosis examination requirement for new entering students is addressed in the most recent version of Student Health Services Bulletin No. 1659.

¹ Receipt of the dose up to (and including) 4 days before the birthday will satisfy the school entry immunization requirement.

² Two doses of measles-containing vaccine required. One dose of mumps and rubella-containing vaccine required; mumps vaccine is not required for children 7 years of age and older.

³ Two doses of the 2-dose hepatitis B vaccine formulation along with provider documentation that the 2-dose hepatitis B vaccine formulation was used for both doses and both doses were received at age 11-15 years will also fulfill this requirement.

⁴ Physician-documented varicella (chickenpox) disease history or immunity meets the varicella requirement.

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Student Health and Human Services

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ATTACHMENT E

GUIDE TO THE REQUIREMENTS OF THE CALIFORNIA SCHOOL IMMUNIZATION LAW

REFERENCE Health and Safety Code, Division 105, Part 2, Chapter 1, Sections 120325-120380; California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 8, Sections 6000-6075

BACKGROUND Children must have required immunizations before they can attend school or child care in California. Parents must present their child's Immunization Record to school or child care staff as proof of immunization prior to admission. Health care providers are required to give or update the parents' copy of the child's Immunization Record whenever these immunizations are administered. Children who have not completed all immunizations will be admitted if they are up-to-date (no doses currently due), provided they obtain the next vaccine when they are due.

- 1. REQUIREMENT FOR SCHOOL ENTRY (K-12)**
- Polio** **4 doses at any age**, but 3 doses are enough if at least one was given on or after:
 -the 4th birthday¹ for children aged 4-6 years entering kindergarten
 -the 2nd birthday¹ for children aged 7 years and older.
- DTP/DTaP/DT/Td** **5 doses at any age**, but 4 doses are enough for first entry of children 4-6 years old if at least one dose was given on or after the 4th birthday.¹
After the 7th birthday, 4 doses at any age, but 3 doses are enough if at least one dose was given on or after the 2nd birthday.¹
- *Note: The change from "2nd birthday" to "4th birthday" for kindergartners aged 4-6 years, for both polio and DTP, is to align California requirements more closely to AAP/ACIP recommendations.*
- MMR** **2 doses²**, both given on or after 1st birthday¹, for kindergarten entry.
 2 doses², both given on or after 1st birthday¹, for 7th grade entry.
 1 dose, on or after 1st birthday¹, for grades 1-6, 8-12. A second dose is recommended.
- Hepatitis B** **3 doses** for kindergarten entry.
 3 doses³ for 7th grade entry or 2 doses 10 mcg Recombivax HB (11-15 years)
- Varicella** **1 dose⁴** for ages 5 to 12 years
 2 doses for ages 13 to 18 years **Ⓞ**
-

2. REQUIREMENTS FOR CHILD CARE ENTRY

Age of Child	Number of Doses Required
Under 2 months.....	None required
2-3 months	1 each of Polio, DTaP/DT, Hib, Hepatitis B
4-5 months	2 each of Polio, DTaP/DT, Hib, Hepatitis B
6-14 months	2 each of Polio, Hib, Hepatitis B 3 DtaP
15-17 months	3 each of Polio, DTaP/DT 2 Hepatitis B 1 MMR, on or after the first birthday ¹ 1 Hib on or after the first birthday ¹ , regardless of any Hib doses given before the first birthday
18 months-5 years	3 Polio 4 DtaP 3 Hepatitis B 1 MMR, on or after the first birthday ¹ 1 Hib on or after the first birthday ¹ , regardless of any Hib doses given before the first birthday 1 Varicella (chickenpox)

- The Hib requirement applies only to children under age 4 years and 6 months.
 - **All children 18 months and older who are entering or already in childcare are required to be immunized against Varicella or health care provider documented disease or immunity statement.**
-

3. **CONDITIONAL ADMISSION** Children lacking one or more required vaccine doses but not currently due for a dose may be admitted on condition that they receive the remaining doses when due, according to the schedule below. If the maximum time interval has passed, the child must be excluded until the next immunization is obtained.

VACCINE**TIME INTERVALS BETWEEN DOSES****Polio**

2nd dose: 6-10 weeks after 1st dose
3rd dose: 6 weeks to 12 months after 2nd dose

DTP, DTaP, DT, Td
Under 7 years (DTP, DTaP, DT)

2nd dose: 4-8 weeks after 1st dose
3rd dose: 4-8 weeks after 2nd dose
4th dose: 6-12 months after 3rd dose

Age 7 years and old (Td)*

2nd dose: 4-8 weeks after 1st dose
3rd dose: 6-12 months after 2nd dose

MMR

2nd dose: 1-3 months after 1st dose

Hepatitis B
For 3-dose formulation

2nd dose: 1-2 months after 1st dose
3rd dose: 2-6 months after 2nd dose
and at least 4 months after 1st dose

For 2-dose formulation
(7th grade entry for child age: 11 through
15 years old)

2nd dose 4 to 8 months after 1st dose

Varicella
(Unimmunized out-of-state entrants
≥ 13 years old)

2 doses 4 weeks to 3 months after 1st dose
or health care provided documentation of disease or
immunity statement.

*Note: DTP, DTaP, DT doses received previously are counted toward meeting the 3-dose tetanus-diphtheria immunization requirement for this age group.

- EXEMPTIONS** The law allows (a) parents/guardians to elect exemptions to immunization requirements based on their personal beliefs, and (b) physicians of children to elect medical exemptions. The law does not allow parents/guardians to elect an exemption simply because of inconvenience (a record is lost or incomplete and it is too much trouble to get to a physician or clinic to correct the problem.) See the back of the blue California School Immunization Record (PM 286) for instructions and the affidavit to be signed by parents/guardians electing the personal beliefs exemption. For children with medical exemptions, the physician's written statement should be stapled to the CSIR. Schools should maintain an up-to-date list of pupils with exemptions, so they can be excluded quickly if an outbreak occurs.

¹ Receipt of the dose up to (and including) 4 days before the birthday will satisfy the school entry immunization requirement.

² Two doses of measles-containing vaccine required. One dose of mumps and rubella-containing vaccine required; mumps vaccine is not required for children 7 years of age and older.

³ Two doses of the 2-dose hepatitis B vaccine formulation along with provider documentation that the 2-dose hepatitis B vaccine formulation was used for both doses and both doses were received at age 11-15 years will also fulfill this requirement.

⁴ Physician-documented varicella (chickenpox) disease history or immunity meets the varicella requirement.