



# VACCINES REQUIRED FOR SCHOOL ATTENDANCE, GRADES K-12<sup>1</sup>

**July 1, 2009 – June 30, 2010**

Month, Day & Year are required documentation of all vaccines.

VACCINE <sup>2</sup>	Kindergarten	1 <sup>st</sup> Grade	2 <sup>nd</sup> -3 <sup>rd</sup> Grades	4 <sup>th</sup> -5 <sup>th</sup> Grades	6 <sup>th</sup> Grade	7 <sup>th</sup> -8 <sup>th</sup> Grades	9 <sup>th</sup> -12 <sup>th</sup> Grades
<b>HEPATITIS B</b> <ul style="list-style-type: none"> <li>Series must <b>NOT</b> be completed in less than 4 months. Series should be completed within 9 months of starting school.</li> </ul>	<p style="text-align: center;"><b>3 doses</b></p> <p style="text-align: center;">2<sup>nd</sup> dose can be given at least 1 month (24 days) after the 1<sup>st</sup> dose.            3<sup>rd</sup> dose must be given at or after 6 months (24 weeks) of age.            3<sup>rd</sup> dose must be given at least 2 months after the 2<sup>nd</sup> dose.            3<sup>rd</sup> dose must be given at least 4 months after the 1<sup>st</sup> dose.</p> <p style="text-align: center;">If the student receives 2 doses of an adolescent formulation of Recombivax HB between ages 11 and 15, separated by 4 months, the student's immunization status is "complete."</p>						
<b>DTaP/DT/Td/Tdap</b> <ul style="list-style-type: none"> <li>Those older than 7 should not receive DTaP.</li> <li>After the 7<sup>th</sup> birthday, children should receive Td or Tdap.</li> </ul>	<b>4 doses DTaP</b> <b>IF</b> the last dose is given on or after the 4 <sup>th</sup> birthday.	<b>3 doses DTaP, DT or Td</b> <b>IF</b> the last dose is given on or after the 4 <sup>th</sup> birthday.			<b>3 doses DTaP, DT or Td</b> <b>IF</b> the last dose is given on or after the 4 <sup>th</sup> birthday <b>AND</b> <b>1 dose Tdap</b> <b>IF</b> student is 11 years old and <b>IF</b> it has been at least 5 years since the last DTaP, DT or Td.	<b>3 doses DTaP, DT or Td</b> <b>IF</b> the last dose is given on or after the 4 <sup>th</sup> birthday. <b>Tdap</b> may substitute for 1 of the 3 doses.	
<b>POLIO (IPV or OPV)</b> <ul style="list-style-type: none"> <li>Students 18 years and older are not required to have IPV or OPV.</li> </ul>	<p style="text-align: center;"><b>4 doses</b> <b>IF</b> all doses are given before the 4<sup>th</sup> birthday.  <b>3 doses</b> <b>IF</b> the last dose is given on or after the 4<sup>th</sup> birthday.</p>						
<b>MMR</b> <ul style="list-style-type: none"> <li>Blood test (titer) showing immunity to measles, mumps or rubella is acceptable.</li> </ul>	<p style="text-align: center;"><b>2 doses</b></p> <p style="text-align: center;">1<sup>st</sup> dose must be given on or after the 1<sup>st</sup> birthday (4 day grace applies).            2<sup>nd</sup> dose must be given at least 28 days after the 1<sup>st</sup> dose (4 day grace <b>DOES NOT</b> apply).</p>						
<b>VARICELLA</b> <ul style="list-style-type: none"> <li>Varicella must be received the same day as MMR <b>OR</b> at least 28 days apart (4 day grace <b>DOES NOT</b> apply).</li> <li>The minimum interval between varicella doses for children &lt; 13 years of age is 28 days (recommended interval is 3 mos).</li> <li>Blood test (titer) showing immunity to varicella and/or provider diagnosis/verification of disease is acceptable.</li> </ul>	<p style="text-align: center;"><b>2 doses</b></p> <p style="text-align: center;">Must be given on or after the 1<sup>st</sup> birthday (4 day grace applies).            Parent-reported history of disease <b>NOT</b> acceptable.</p>	<p style="text-align: center;"><b>1 dose</b></p> <p style="text-align: center;">Must be given on or after the 1<sup>st</sup> birthday (4 day grace applies). Parent reported history of disease is acceptable.</p>	<p><b>Recommended, but not required</b></p>		<p style="text-align: center;"><b>1 dose</b></p> <p style="text-align: center;">Must be given on or after the 1<sup>st</sup> birthday (4 day grace applies).            Parent reported history of disease is acceptable.</p>	<p><b>Recommended, but not required</b></p>	

<sup>1</sup> To attend public/private school or licensed child care in WA State, each child must present a signed **Certificate of Immunization Status form** showing proof of 1) full immunization per the 2007 Recommended Childhood Immunization Schedule (see <http://www.doh.wa.gov/cfh/Immunize/schools/vaccine.htm>), 2) an initiation of a schedule of immunization, 3) a medical exemption (with health care provider signature), **OR** 4) personal or religious exemption (with a parent/guardian signature).

<sup>2</sup> 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 ≤ 4 days before the minimum interval or age are valid, except for the intervals between MMR doses, varicella doses and MMR and varicella doses.



# VACCINES REQUIRED FOR CHILD CARE/PRESCHOOL ATTENDANCE<sup>1</sup>

July 1, 2009 – June 30, 2010

Month, Day & Year are required for documentation of all vaccines.

**NOTE:** The shaded boxes indicate that no new doses are required from the preceding box.

Ages	By 3 Months (on or before last day of mo 2)	By 5 Months (on or before last day of mo 4)	By 7 Months (on or before last day of mo 6)	By 16 Months (on or before last day of mo 15)	By 19 Months (on or before last day of mo 18)	By 24 Months (on or before last day of mo 23)	By 7 Years (on or before last day of year 6) or by K entry <sup>2</sup>	
Vaccine <sup>3</sup>	2 doses Hep B May get 1 <sup>st</sup> at birth	2 doses Hep B			3 doses Hep B May get as early as 6 months	3 doses Hep B May complete series as early as 6 months		
	1 dose DTaP	2 doses DTaP	3 doses DTaP	3 doses DTaP	4 doses DTaP May get dose #4 as early as 12 months as long as there are 6 mos. between dose #3 & dose #4	4 doses DTaP	5 doses DTaP If dose #4 is received before the 4 <sup>th</sup> bday, dose #5 required by the 7 <sup>th</sup> bday or school entry	
	1 dose Hib	2 doses Hib	3 doses Hib	4 doses Hib	4 doses Hib Full immunization is 4 doses by 16 mos, but: <ul style="list-style-type: none"> <li>• Three doses required if only 2 doses given before 12 months; or</li> <li>• Two doses required if both received between 12-15 months; or</li> <li>• One dose required IF the only dose has been given on or after 15 mos of age.</li> </ul>		Hib is not given after 5 years of age	
	1 dose Polio	2 doses Polio	2 doses Polio		3 doses Polio	3 doses Polio	4 doses Polio	
	1 dose PCV	2 doses PCV	3 doses PCV	4 doses PCV	4 doses PCV Full immunization is 4 doses by 16 mos, but: <ul style="list-style-type: none"> <li>• Three doses required if only 2 doses given before 12 months; or</li> <li>• Two doses required if both received between 12-24 months; or</li> <li>• One dose required IF the only dose has been given on or after 24 mos of age.</li> </ul>		PCV is not given after 5 years of age	
	MMR is not given before 12 months of age				1 dose MMR	1 dose MMR		2 doses MMR
	Varicella is not given before 12 months of age				1 dose Varicella	1 dose Varicella		2 doses Varicella

<sup>1</sup> To attend public/private school or licensed child care in WA State, each child must present a signed **Certificate of Immunization Status form** showing proof of 1) full immunization per the 2007 Recommended Childhood Immunization Schedule (<http://www.doh.wa.gov/cfh/immunize/schools/vaccine.htm>), 2) an initiation of a schedule of immunization, 3) a medical exemption (with health care provider signature), OR 4) personal or religious exemption (with a parent/guardian signature).

<sup>2</sup> School-aged children in before- and after-school programs must meet the immunization requirements for their grade in school.

<sup>3</sup> There is not maximum interval between doses. Even if the recommended interval is not met, the series does not have to be restarted.