Immunization Requirements for School Entry - Ohio

Kindergarten through 12th Grade

Andrew Heffron
Cuyahoga County Board of Health
This information will help your school better understand...

- Immunization entry requirements in Ohio schools
- School immunization summary reports required by the Ohio Revised Code (ORC)
- School immunization requirements for 2017 and recommended immunization schedules
Topics to be discussed

1. Why are school immunization requirements needed?
2. What are Ohio’s school immunization requirements?
3. How is your school required to report immunization levels?
4. What are the Fall 2017 requirements?
5. Where can you find helpful resources?
Why are school immunization requirements needed?

1. School immunization requirements assure children are protected against vaccine-preventable diseases.

   • Ohio schools first allowed to require smallpox vaccine in 1872
   • In 1959, Ohio added a detailed requirement for smallpox, polio and DTP vaccines
Why are school immunization requirements needed?

2. Severe negative health effects can be prevented in children when vaccines are used effectively.

- Polio can cause paralysis
- Measles can cause swelling in the brain and death
- Pertussis can cause pneumonia and death
Why are school immunization requirements needed?

3. Some vaccine preventable diseases continue to circulate among susceptible children and adults.
Mumps Outbreaks Continue

In 2014, several outbreaks affiliated with universities were reported from multiple states, including one community outbreak in Ohio linked to a university that involved over 400 people, and an outbreak affecting the National Hockey League.

Source: CDC
Mumps Outbreaks Continue

Over 40 cases of mumps have been reported in Ohio since January 1, 2017

Source: CDC
Pertussis Outbreaks Continue

- 1,667 cases of pertussis (whooping cough) were reported in Ohio during 2013
- 1,310 cases of pertussis were reported in Ohio during 2014

Source: ODH
Why are school immunization requirements needed?

4. Schools with lower rates of immunization compliance become susceptible to outbreaks of vaccine-preventable diseases.
Kindergarten Vaccination Coverage
United States & Ohio - 2015

MMR: 94.6% National, 92.1% Ohio
DTaP: 94.2% National, 92.1% Ohio
Varicella: 94.3% National, 91.5% Ohio
Hep B: 95.8% National, 95.1% Ohio

Healthy People 2020 Goal: 95%

Source: MMWR / CDC
What are Ohio’s school immunization requirements?
Ohio School Immunization Requirements

Found in two Ohio Revised Code (ORC) sections under Title 33: Education – Libraries

• Section 3313.67
• Section 3313.671
ORC 3313.67
Immunization of Pupils

“(A)(1)...the board of education of each city, exempted village, or local school district may make and enforce rules to secure the immunization of, and to prevent the spread of communicable diseases among the pupils attending or eligible to attend... as in its opinion the safety and interest of the public require.”

“(A)(2) A board of education shall not adopt rules under division (A)(1) of this section that are inconsistent with... section 3313.671 of the Revised Code.”
“(C) The board of education shall keep an immunization record for each pupil, available in writing to the pupil’s parent or guardian upon request.”

“(D) Annually by the fifteenth day of October, the board shall report a summary, by school, of the immunization records of all initial entry pupils in the district to the director of health, on forms prescribed by the director.”
“(A)(1) ...no pupil, at the time of initial entry or at the beginning of each school year... for which the state board of education prescribes minimum standards... shall be permitted to remain in school for more than fourteen days, unless the pupil...has been immunized by a method of immunization approved by the department of health...”
Students are to be fully immunized against the following diseases:

- Diphtheria, Tetanus, and Pertussis
- Polio
- Measles, Mumps, Rubella
- Hepatitis B
- Varicella (Chickenpox)
- Meningococcal (A, C, W, Y)
A student is not compliant with ORC 3313.671 after 15 days if:

☑ An immunization record is not on file
☑ The student is not up-to-date and has no exemptions
☑ The student is not “in process” of obtaining the minimum number of doses
A student is considered in-process with ORC 3313.671 after 15 days if:

- The student has to wait the minimum spacing for a second dose of a vaccine against measles, mumps, rubella (MMR), varicella (chickenpox) or meningococcal disease.

- The student received a dose of vaccine for a series of DTaP, polio and/or hepatitis B, and now has to wait the required minimum spacing for another dose of DTaP/DT, polio and/or hepatitis B.
Where can I find the minimum spacing between doses for students in-process?

The Advisory Committee on Immunization Practices (ACIP) schedule provides recommended ages, minimum ages, recommended intervals and minimum intervals.
Where can I find the minimum spacing between doses for students in-process?

Immunization Summary for School Attendance

Updated by ODH
What immunization exemptions are allowed?

2 types of exemptions:

1. Medical exemption
   • A licensed physician must certify this

2. Reason of conscience including religious convictions
   • Written statement from the pupil's parent or guardian must state a reason
How is your school required to report immunization levels?
Immunization Summary Reports

All Ohio schools, public and private, for which the state board of education prescribes minimum standards are required to report immunization summaries to ODH by October 15th of each calendar year.

Reports are to be submitted for these grades:

- Kindergarten
- 7th grade
- 12th grade
- ‘New pupils’
Immunization Summary Reports

1. ODH mails a letter signed by ODE and ODH to all Ohio schools in August with instructions about the immunization summary reports

2. Schools submit immunization summary reports to ODH through a web-based reporting process
Immunization Summary Reports

Each school or portion of school that has its own IRN must submit a separate summary report for each category applicable.
4 Immunization Summary Reports

- Kindergarten Summary = All Kindergarteners
- Grade 7 Summary = All 7th Graders
- Grade 12 Summary = All 12th Graders
- New Enterers for Grades 1-6 & 8-11 Summary
Immunization Summary Reports

**Example 1:** If your school is a high school (grades 9-12), you will submit separate summary reports for 12th grade and new pupils (a total of 2 summary reports).

**Example 2:** If your school is an elementary school (grades K-6), you will submit separate summary reports for kindergarten and new pupils grades 1-6 (a total of 2 summary reports).
Immunization Summary Reports

To protect student confidentiality, all data reported to ODH is aggregated at the school level

No student information is reported to ODH
What is reported?

You will report the following demographic information for each summary report:

- School name
- IRN
- School address
- Contact information
- School type
What is reported?

You will report the following data:

- Total Number of Pupils Enrolled in Assessed Grade
  - Number of Pupils with All Required Immunizations (Up-to-date or UTD)
  - Number of Pupils who have a Medical Contraindication (Medical exemptions)*
  - Number of Pupils who have a Reason of Conscience or Religious Objection ("Good-cause" exemptions)*
  - Number of Pupils Incomplete (without exemption)
  - Record Indicates Need for at least one of the Required Immunizations*
  - Record not on File

*You will also report vaccine specific totals
Who is a ‘new pupil’?
All new pupils or transfer students entering your school(s) must be reviewed for immunization compliance at the time of initial entry (and throughout the school year if new)

New to the district/system examples:
• Pupil changed from a private system to a public school district (even if in the same geographic area)
• Pupil moved from a public district to a private system
• Pupil moved from one private system to another private system (even if in the same city or geographic area)
• Pupil moved from one public district to another public district
Do foreign exchange students have to meet the minimum requirements?

Yes.

Even if the student is only going to be in the U.S. for part of the school year, the requirements apply.

Helpful resource: ‘Quick Chart of Vaccine-Preventable Disease Terms in Multiple Languages’
## Create a plan for your school

| Spring-Summer | • Prepare for incoming students, communicate with parents/guardians of immunization requirements  
|              | • Encourage parents not to wait to get their child up-to-date so they can avoid the ‘back-to-school rush’  
|              | • Provide information for clinics that administer vaccines in your community  
|              | • Contact your local health department to identify providers or ‘back-to-school’ clinics in your community  
|              | • Some local health departments may offer to schedule ‘back-to-school’ clinics - they may even schedule these clinics at your school |
Create a plan for your school

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<tr>
<th>Start of School</th>
<th>Items</th>
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<td>• Review immunization records</td>
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<td>• Identify students who have no records or missing at least one dose of required vaccines</td>
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<td>• For non-compliant students use Ohio’s Statewide Immunization Record System (ImpactSIIS) to look-up records</td>
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<td>• Send communication to parents/guardians of non-compliant students and clearly state what the student needs</td>
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<td>• Compile a list of students who have exemptions on file so you can easily identify them in the event of a ‘disease outbreak’</td>
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<td>• Exclude students who do not meet the state minimum requirements by the 15th day of school</td>
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## Create a plan for your school

**By October 15**
- Mark your calendar because immunization summary reports are due by Oct 15
- Contact the ODH Immunization Program if you have questions on how to report your school’s summary
- Complete and submit the immunization summary to ODH online

**During the school year**
- Review and follow-up as needed with transfer students
- Report incidents of reportable infectious diseases to the local health department
- If a ‘disease outbreak’ is confirmed identify students who should be excluded from school during the outbreak
### Immunization Summary for School Attendance, Fall 2017

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<td>Three (3) or more doses of IPV or OPV. If the third dose of either series was received prior to the fourth birthday, a fourth (4) dose is required. If a combination of OPV and IPV was received, four (4) doses of either vaccine are required.</td>
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<td>Two (2) doses. Dose 1 must be administered on or after the first birthday. The second dose should be administered at least three (3) months after dose one (1); however, if the second dose is administered at least 28 days after first dose, it is considered valid.</td>
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**Notes:**

*Four (4) or more of DTaP or DT, or any combination. If all four doses were given before the 4th birthday, a fifth (5) dose is required. If the fourth dose was administered at least six months after the third dose, and on or after the 4th birthday, a fifth (5) dose is not required. Recommended DTaP or DT minimum intervals for kindergarten students four (4) weeks between doses 1-2 and 2-3; six (6) month minimum intervals between doses 3-4 and 4-5. If a fifth dose is administered prior to the 4th birthday, a sixth dose is recommended but not required.*

**Pupils who received one dose of Tdap as part of the initial series are not required to receive another dose. Tdap can be given regardless of the interval since the last Tetanus or diphtheria-tetanus containing vaccine. DTaP given to patients age 7 or older can be counted as valid for the one-time Tdap dose.***

***The final polio dose in the IPV series must be administered at age 4 or older with at least six months between the final and previous dose.***

****Recommended MCV4 minimum interval of at least eight (8) weeks between dose one (1) and dose two (2). If the first (1st) dose of MCV4 was administered on or after the 16th birthday, a second (2nd) dose is not required. If a pupil is in 12th grade and is 15 years of age or younger, only 1 dose is required. Currently there are no school entry requirements for meningococcal B vaccine.
**Diphtheria, Tetanus, and Pertussis**  
**DTaP/DT Tdap/Td**

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### Kindergarten

- 4 or more doses
- Any combination of DTaP or DT
- 5th dose is required for **kindergarten only** when the 4th dose was given before age 4
- If the 4th dose was administered at least 6 months after the 3rd dose, and on or after the 4th birthday, a 5th dose is not required
- Recommended DTaP or DT minimum intervals of 4 weeks between doses 1-2 and 2-3; 6 month minimum intervals between doses 3-4 and 4-5
- If a fifth dose is administered prior to the 4th birthday, a sixth dose is recommended but not required
Diphtheria, Tetanus, and Pertussis
DTaP/DT Tdap/Td

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<td>One (1) dose of Tdap**</td>
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Grades 1-12

- 4 or more DTaP/DT required
- For students age 7 or older, if the third dose is Td or Tdap, a fourth dose is not required
  - **1 dose of Tdap prior to entry in 7th grade**
- Pupils who received one dose of Tdap as part of the initial series are not required to receive another dose
- DTaP given to patients age 7 or older (accidentally) can be counted as valid for the one-time Tdap dose
- Tdap can be given regardless of the interval since the last tetanus or diphtheria toxoid-containing vaccine
## Polio

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<tr>
<td>Three (3) or more doses of IPV. The FINAL dose must be administered on or after the 4th birthday regardless of the number of previous doses.***</td>
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- For **Kindergarten** through **7th** grade
  - 3 or more doses of IPV
  - The **final** dose must be **on or after the 4th birthday** with at least 6 months between the final and previous dose
- For **8th** through **12th** grade
  - 3 doses or more of IPV or OPV
  - If the 3rd dose of either IPV or OPV was given before the 4th birthday, a 4th dose is required
  - If the student has a combo of OPV and IPV, 4 doses of either vaccine are required
Measles, Mumps and Rubella (MMR)

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Two (2) doses. Dose 1 must be administered on or after the first birthday. The second dose must be administered at least 28 days after dose 1.

- For **Kindergarten** through 12th grade
  - 2 doses
  - Dose 1 must be administered **on or after the first birthday**
  - The 2nd dose must be administered at least **28 days** after dose 1
  - **CDC recommends first dose at 12 months and second at 4-6 years**
Hepatitis B (Hep B)

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Three (3) doses. The second dose must be administered at least 28 days after the first dose. The third dose must be given at least 16 weeks after the first dose and at least 8 weeks after the second dose. The last dose in the series (third or fourth dose), must not be administered before age 24 weeks.

- **Kindergarten** through 12th grade
  - 3 doses with correct spacing
  - The minimum age for the third dose is **24 weeks** of age

*Pay close attention to spacing between doses*
# Chickenpox (Varicella)

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<td><strong>Two (2) doses. Dose 1 must be administered on or after the first birthday. The second dose should be administered at least three (3) months after dose one (1); however, if the second dose is administered at least 28 days after first dose, it is considered valid.</strong></td>
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One (1) dose of varicella vaccine must be administered on or after the first birthday.

- **Kindergarten through 7th grade**
  - 2 doses
  - 1st dose must be **on or after** the 1st birthday
  - 2nd dose should be at least 3 months after the 1st dose, but valid if administered at least 28 day after the 1st dose
- **For 8th through 11th grade**
  - 1 dose
  - Must be on or after the 1st birthday
Meningococcal (MCV4)

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- **7th- 8th grade**
  - 1 dose (should be on or after age of 10)

- **12th grade**
  - 2 doses; the 2nd dose must be on or after the 16th birthday
  - If the 1st dose was administered after the 16th birthday, a 2nd dose is **not** required
  - Minimum interval of 8 weeks between dose 1 and dose 2

Minimum interval of 8 weeks between dose 1 and dose 2
Four Day Grace Period

For any doses given too early, a 4 day ‘grace’ period can apply:

- Considered *valid* if ≤4 days before the minimum age or interval between doses
- *Not valid* if >4 days before the minimum age or interval between doses

Important Notes:

If 2 LIVE virus vaccines (MMR and Varicella) were *not* given on the *same day* they must be separated by 28 days with no grace period

If an *invalid* dose was given, administer the next dose after waiting the minimum interval from the *invalid dose* and after reaching the minimum age requirement
Where can you find helpful resources?
Resources to determine if a student is compliant
The Director’s Journal

Purpose:

• Reviews approved methods of immunization against the diseases specified in ORC for the purpose of carrying to the provisions
• Detailed information
• Updated when new requirements

Information included:

• Vaccine dose requirements for grade entry
• Spacing of doses
• Graduated requirements

Immunization Summary for School Attendance

Provides high level summary of requirements for all grades

Shows current school year with important notes

Created by ODH Immunization Program

Updated annually

Each year, the Advisory Committee on Immunization Practices (ACIP) approves immunization schedules for persons living in the United States.

The immunization schedule for children and adolescents aged 18 years or younger provides a summary of ACIP recommendations on the use of routinely recommended vaccines.

Provides information on recommended age, minimum age, recommended interval and minimum interval.
How it all fits together...

What: Ohio Revised Code (Ohio Law)
Who: Legislator
Why: Mandates Reporting and Coverage

What: Director’s Journal
Who: Ohio Department of Health (ODH)
Why: Details methods of immunization

What: Immunization Summary for School Attendance
Who: ODH Immunization Program
Why: Helpful Summary of Requirements
Documentation Requirements

Student immunizations must be documented with the specific **month**, **day**, and **year** of vaccine administration for each dose of each vaccine received.

- Blanket statements that all immunizations are “up-to-date” or “valid” **do not meet** state documentation requirements.
- “At hospital” or “at birth” is **not** acceptable for Hep B birth dose.

A parent, guardian or doctor’s written statement that a child has already had the disease is acceptable in place of vaccination for **measles**, **mumps** and **varicella** only.

For **rubella**, only a record of actual vaccination or laboratory test result showing evidence of immunity is acceptable.
What is the difference between CDC *recommendations* and Ohio school *requirements*?

**CDC recommended immunizations**
- Developed by Advisory Committee on Immunization Practices (ACIP)
- Comprehensive recommendations for routine vaccination
- Based on age
- National standards of practices

**Ohio required immunizations for school**
- State law for required vaccines need to attend school (K-12th grades)
- Based on grade level
What if a student can’t afford to get vaccinated?

Vaccines for Children Program
- Federal entitlement program that provides vaccines at no cost for eligible children through VFC-enrolled doctors

A child is eligible for the VFC Program if he or she is younger than 19 years of age and is one of the following:
- Medicaid-eligible
- Uninsured
- Underinsured (example: insurance does not cover vaccinations)
- American Indian or Alaska Native
Where can I look for missing immunization records?

Ohio’s Statewide Immunization Information System (Impact SIIS)

- Developed and maintained by the Ohio Department of Health (ODH) Immunization Program within the Bureau of Infectious Diseases (BID)

- Secure online system that maintains consolidated and comprehensive immunization records for Ohio children, adolescents and adults

- To become a registered user or to learn more, visit the Ohio Department of Health webpage
CUYAHOGA COUNTY BOARD OF HEALTH & CLEVELAND DEPARTMENT OF PUBLIC HEALTH

As your local health department, we can offer the following resources to the community and your school

REFER TO CLINIC FLYERS
Other Resources:

ODH Immunization Program

- 1-800-282-0546
- www.odh.ohio.gov, key word Immunizations

Centers for Disease Control and Prevention

- https://www.cdc.gov/vaccines/index.html

Immunization Action Coalition

- http://www.immunize.org/
CONTACT: CLEVELAND DEPARTMENT OF PUBLIC HEALTH
Annette Perhay, BSN,RN
75 Erieview Plaza, 3rd Floor
Cleveland, Ohio 44114
Phone 216-664-4120
Fax-216-664-6159
aperhay@city.cleveland.oh.us
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