

Immunization Requirements for School Entry - Ohio

Kindergarten through 12th Grade
2018 - 2019



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This information will help your school better understand...

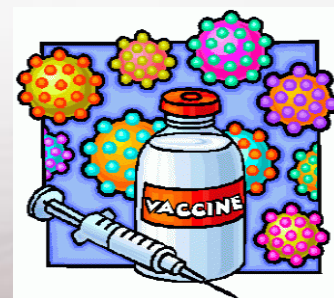
- ✓ Immunization entry requirements in Ohio schools
- ✓ School immunization summary reports required by the Ohio Revised Code (ORC)
- ✓ School immunization requirements for 2018 and 2019 and recommended immunization schedules

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 2019 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 required 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
 - Paralysis from polio disease is prevented
 - Swelling of the brain and death from measles disease is prevented
 - Pneumonia and death from pertussis disease is prevented

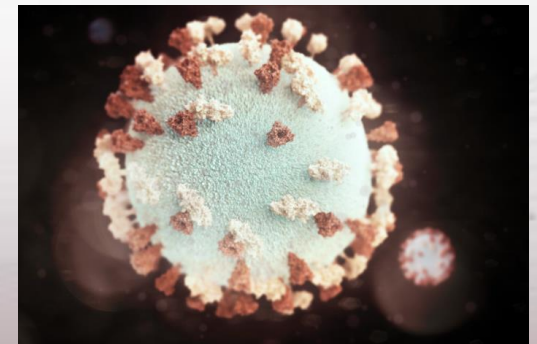
Why are school immunization requirements needed?

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

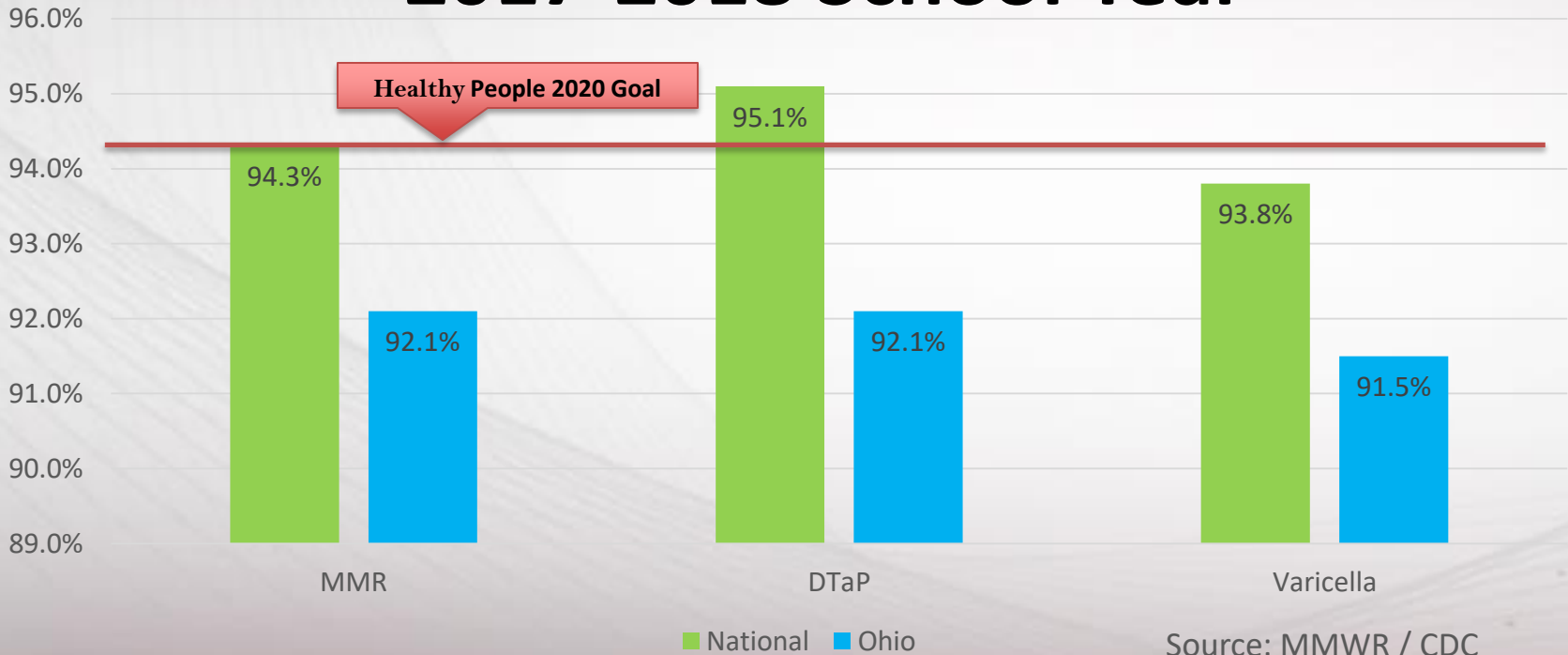


Why are school immunization requirements needed?

4. Schools with lower rates of immunization compliance are more susceptible to outbreaks of vaccine-preventable diseases



Kindergarten Vaccination Coverage United States & Ohio 2017-2018 School Year



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.”

ORC 3313.67

Immunization Record & Summary

“(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.”

ORC 3313.671

Proof of Required Immunizations

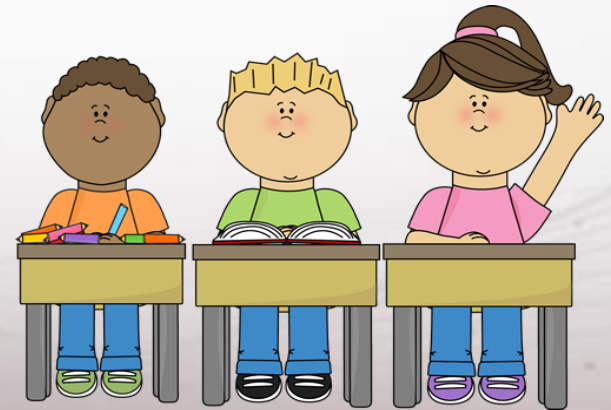
“(A)(1) ...no pupil, at the time of initial entry or at the beginning of each school year... for which the state board of education prescribes minimum standards... shall be permitted to remain in school for more than fourteen days, unless the pupil...has been immunized by a method of immunization approved by the department of health...”

ORC 3313.671

Proof of Required Immunizations

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

FIGURE 2. Catch-up immunization schedule for persons aged 4 months–18 years who start late or who are more than 1 month behind—United States, 2018.
The figure below provides catch-up and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age. Always use this table in conjunction with Figure 1 and the footnotes that follow.

Vaccine	Minimum Age for Dose 1	Children age 4 months through 6 years			
		Dose 1 to Dose 2	Minimum Interval Between Doses		Dose 4 to Dose 5
Hepatitis B ¹	Birth	4 weeks	8 weeks and at least 16 weeks after first dose. Minimum age for the final dose is 24 weeks.		
Rotavirus ²	6 weeks Maximum age for first dose is 14 weeks, 6 days	4 weeks	4 weeks ² Maximum age for final dose is 8 months, 0 days.		
Diphtheria, tetanus, and acellular pertussis ³	6 weeks	4 weeks	4 weeks		6 months
Haemophilus influenzae type b ⁴	6 weeks	4 weeks if first dose was administered before the 1 st birthday. 8 weeks (as final dose) if first dose was administered at age 12 through 14 months. No further doses needed if first dose was administered at age 15 months or older.	4 weeks ⁴ if current age is younger than 12 months and first dose was administered at younger than age 7 months, and at least 1 previous dose was PRP-T (ActHib, Pentacel, Hibexis) or unknown. 8 weeks and age 12 through 59 months (as final dose) ⁴ • if current age is younger than 12 months and first dose was administered at age 7 through 11 months; DT • if current age is 12 through 59 months and first dose was administered before the 1 st birthday, and second dose administered at younger than 15 months; DT • if both doses were PRP-OMP (PedvaxHIB; Comvac) and were administered before the 1 st birthday. No further doses needed if previous dose was administered at age 15 months or older.		8 weeks (as final dose) This dose only necessary for children age 12 through 59 months who received 3 doses before the 1 st birthday.
Pneumococcal conjugate ⁵	6 weeks	4 weeks if first dose administered before the 1 st birthday. 8 weeks (as final dose for healthy children) if first dose was administered at the 1 st birthday or after. No further doses needed for healthy children if first dose was administered at age 24 months or older.	4 weeks if current age is younger than 12 months and previous dose given at <7 months old. 8 weeks (as final dose for healthy children) if previous dose given between 7–11 months (wait until at least 12 months old); DT if current age is 12 months or older and at least 1 dose was given before age 12 months. No further doses needed for healthy children if previous dose administered at age 24 months or older.		8 weeks (as final dose) This dose only necessary for children aged 12 through 59 months who received 3 doses before age 12 months or for children at high risk who received 3 doses at any age.
Inactivated poliovirus ⁶	6 weeks	4 weeks ⁶	4 weeks ⁶ if current age is < 4 years 6 months (as final dose) if current age is 4 years or older		6 months ⁶ (minimum age 4 years for final dose).
Measles, mumps, rubella ⁷	12 months	4 weeks			
Varicella ⁸	12 months	3 months			
Hepatitis A ⁹	12 months	6 months			
Meningococcal ¹⁰ (MenACWY-D ≥9 mos; MenACWY-CRM ≥2 mos)	6 weeks	8 weeks ¹⁰	See footnote 11		See footnote 11
Children and adolescents age 7 through 18 years					
Meningococcal ¹¹ (MenACWY-D ≥9 mos; MenACWY-CRM ≥2 mos)	Not Applicable (N/A)	8 weeks ¹¹			
Tetanus, diphtheria, tetanus, diphtheria, and acellular pertussis ¹²	7 years ¹²	4 weeks	4 weeks if first dose of DTaP/DT was administered before the 1 st birthday. 6 months (as final dose) if first dose of DTaP/DT or Tdap/Id was administered at or after the 1 st birthday.		6 months if first dose of DTaP/DT was administered before the 1 st birthday.
Human papillomavirus ¹³	9 years		Routine dosing intervals are recommended ¹³		
Hepatitis A ⁹	N/A	6 months			
Hepatitis B ¹	N/A	4 weeks	8 weeks and at least 16 weeks after first dose.		
Inactivated poliovirus ⁶	N/A	4 weeks	4 weeks ⁶ A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least 6 months after the previous dose.		A fourth dose of IPV is indicated if all previous doses were administered at <4 years or if the third dose was administered <6 months after the second dose.
Measles, mumps, rubella ⁷	N/A	4 weeks			
Varicella ⁸	N/A	3 months if younger than age 13 years. 4 weeks if age 13 years or older.			

NOTE: The above recommendations must be read along with the footnotes of this schedule.

Where can I find the minimum spacing between doses for students in-process?

Immunization Summary for School Attendance

Updated by ODH

Immunization Summary for School Attendance Ohio	
FALL 2018 IMMUNIZATIONS FOR SCHOOL ATTENDANCE	
VACCINES	REQUIREMENTS
DTaP/DT Tdap/Td Diphtheria, Tetanus, Pertussis	K-5 Four (4) or more doses of DTaP or DT, or any combination. If all four doses were given before the 4 th 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 4 th birthday, a fifth (5) dose is not required. * L-12 Four (4) or more doses of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up. Grades 7-12 One (1) dose of Tdap vaccine must be administered prior to entry. **
POLIO	K-5 Three (3) or more doses of IPV. The FINAL dose must be administered on or after the 4 th birthday regardless of the number of previous doses. If a combination of OPV and IPV was received, four (4) doses of either vaccine are required. *** Grades 9-12 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.
MMR Measles, Mumps, Rubella	K-12 Two (2) doses of MMR. Dose one (1) must be administered on or after the first birthday. The second dose must be administered at least 28 days after dose one (1).
HEP B Hepatitis B	K-12 Three (3) doses of Hepatitis B. 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.
Varicella (Chickenpox)	K-5 Two (2) doses of varicella vaccine must be administered prior to entry. Dose one (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 the first dose, it is considered valid. Grades 9-12 One (1) dose of varicella vaccine must be administered on or after the first birthday.
MCV4 Meningococcal Tdap dose	Grades 7-9 One (1) dose of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry. Grade 12 Two (2) doses of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry. ****

NOTES:

- * Vaccine should be administered according to the most recent version of the *Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger or the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind*, as published by the Advisory Committee on Immunization Practices. Schedules are available for print or download at <http://www.cdc.gov/vaccines/imzinfos/index.html>
- ** Vaccine doses administered ≤ 4 days before the minimum interval or age are valid (grace period). Doses administered ≥ 5 days earlier than the minimum interval or age are not valid doses and should be repeated as age-appropriate. If MMR and Varicella are not given on the same day, the doses must be separated by at least 28 days with no grace period.
- ** For additional information please refer to the Ohio Revised Code 3313.67 and 3313.671 for School Attendance and the ODH Director's Journal Entry (available at <http://www.ohio.gov>, Immunization: Required Vaccines for Childcare and School). These documents list required and recommended immunizations and indicate exemptions to immunizations.
- ** Please contact the Ohio Department of Health Immunization Program at (800) 282-0546 or (614) 466-4643 with questions or concerns.

* 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.

ODH Immunization 11/30/2017
Imm Sum Sch Ohio 2018-2019.docx

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

- A 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?

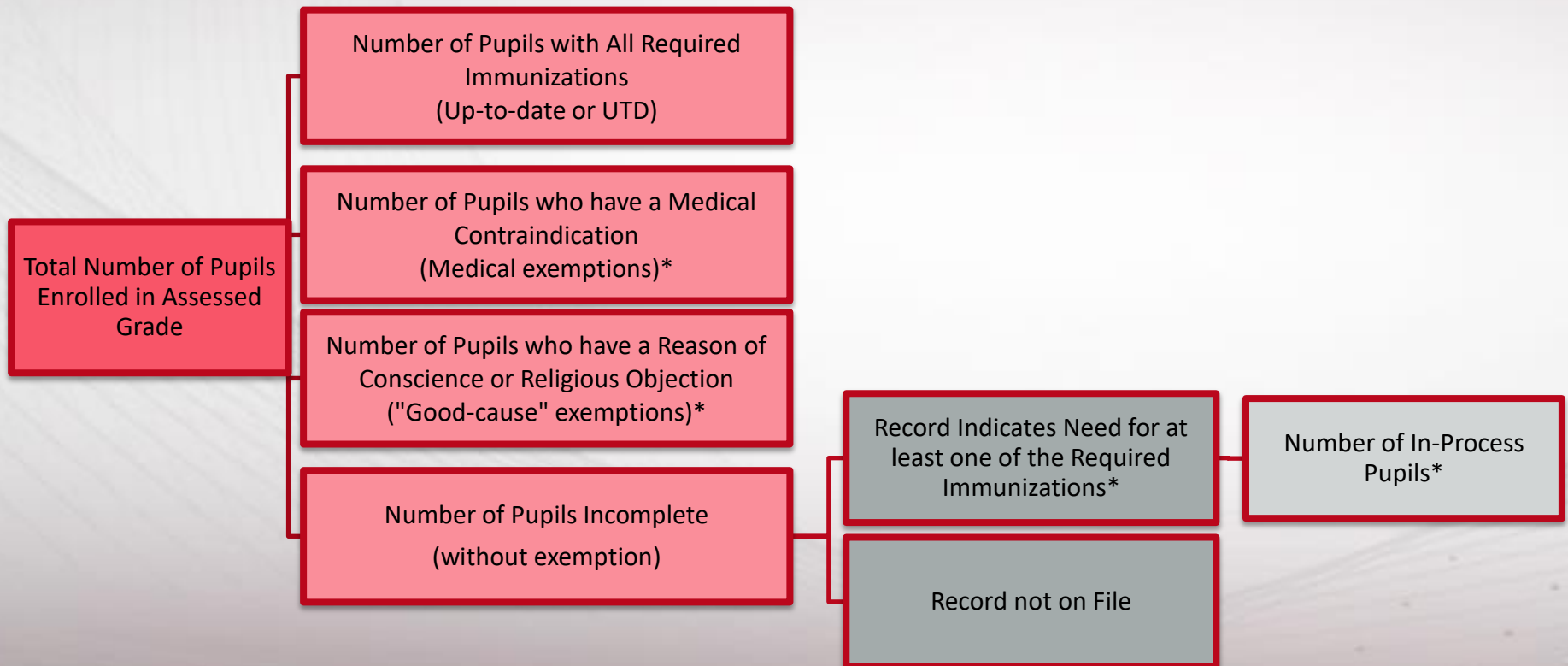
You will report the following demographic information for each summary report:

- School name
- IRN
- School address
- Contact information
- School type



What is reported?

You will report the following data:



**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'

Quick Chart of Vaccine-Preventable Disease Terms in Multiple Languages (Page 1 of 2)

Eastern European Languages									
English	Bosnian	Croatian	Polish	Romanian	Russian	Serbian	Slovak	Ukrainian	
DTaP	Detop	Detop		DT-a-P	АксД	Детоп	ДТД	ДТД	
Diphtheria	diftirija	diftirija	difteria	diftirija	дифтерия	diftirija	diftirija	difterija	
Hemophilus influenzae type B	Hemofilni na influenza tipa B	Hemofilni na influenza tipa B	hemofilni na influenza tipa B	Hemofilni na influenza tipa B	гемифильный инфлюэнза тип В	Хемифилни на инфлуэнза тип В	Хемифилни на инфлуэнза тип В	Хемифилни на инфлуэнза тип В	
Hepatitis A	hepatita A	hepatita A	hepatita A	hepatita A	гепатит А	hepatita A	hepatita A	hepatita A	
Hepatitis B	hepatita B	hepatita B	hepatita B	hepatita B	гепатит В	hepatita B	hepatita B	hepatita B	
Hepatitis C	hepatita C	hepatita C	hepatita C	hepatita C	гепатит С	hepatita C	hepatita C	hepatita C	
Hepatitis D	hepatita D	hepatita D	hepatita D	hepatita D	гепатит Д	hepatita D	hepatita D	hepatita D	
Hepatitis E	hepatita E	hepatita E	hepatita E	hepatita E	гепатит Е	hepatita E	hepatita E	hepatita E	
Poliovirus	poliovirus	poliovirus	poliovirus	poliovirus	полиовирус	poliovirus	poliovirus	poliovirus	
Rabies	rabija	rabija	rabija	rabija	рабија	rabija	rabija	rabija	
Rubella	rubela	rubela	rubela	rubela	рубелла	rubela	rubela	rubela	
Scarlet fever	scarletna groznica	scarletna groznica	skarlatina	scarletna groznica	скарлатина	scarletna groznica	skarlatina	skarlatina	
Shingles (herpes zoster)	herpes zoster	herpes zoster	herpes zoster	herpes zoster	герпес зостер	herpes zoster	herpes zoster	herpes zoster	
Smallpox	veliki bogorje	veliki bogorje	oспа	varicela, varicela	спа	veliki bogorje	oспа	oспа	
Tetanus	tetanus	tetanus	tetanus	tetanus	тетанус	tetanus	tetanus	tetanus	
Tuberculosis	tuberkuloza	tuberkuloza	tyberkujoza	tuberkuloza	туберкулез	tuberkuloza	tuberkuloza	tuberkuloza	
Varicella (chickenpox)	varicela	varicela	oспа	varicela, varicela	спа	veliki bogorje	oспа	oспа	

Immunization Action Coalition • 1573 Selby Avenue • St. Paul, MN 55106 • (651) 547-5000 • www.immunize.org • admin@immunize.org

Create a vaccine 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 vaccine plan for your school

Start of School

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

Create a vaccine plan for your school

**By October
15th**

- Mark your calendar because immunization summary reports are due by Oct 15th
- 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 on-line

**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

What are the current 2018-19 school year requirements?

Vaccine	Immunization Summary for School Attendance, Fall 2018												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
DTaP/DT Tdap/Td Diphtheria, Tetanus, and Pertussis	Four (4) or more of DTaP or DT, or any combination*												
		Four (4) or more of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up.											
									One (1) dose of Tdap**				
Polio	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.***												
										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.			
MMR Measles, Mumps, Rubella	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.												
HEP B Hepatitis B	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.												
Varicella Chickenpox	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.												
										One (1) dose of varicella vaccine must be administered on or after the first birthday.			
MCV4 Meningococcal								One (1) dose				Two (2) doses****	

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-tetoxoid 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

K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
Four (4) or more of DTaP or DT, or any combination*												

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

Vaccine	Immunization Summary for School Attendance, Fall 2018												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
DTaP/DT Tdap/Td Diphtheria, Tetanus, and Pertussis	Four (4) or more of DTaP or DT, or any combination*												
		Four (4) or more of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children											
									One (1) dose of Tdap**				

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

Vaccine	Immunization Summary for School Attendance, Fall 2018												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
Polio	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.***												
										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.			

- For **Kindergarten** through **8th** 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 **9th 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)

K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
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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*

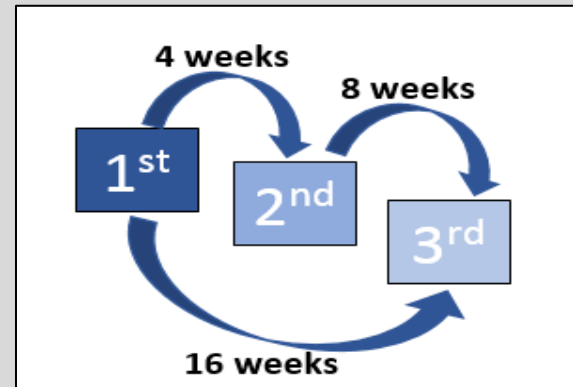
Hepatitis B (Hep B)

K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
---	-----	-----	-----	-----	-----	-----	-----	-----	-----	------	------	------

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)

Vaccine	Immunization Summary for School Attendance, Fall 2018												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
Varicella Chickenpox	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.												
										One (1) dose of varicella vaccine must be administered on or after the first birthday.			

- **Kindergarten through 8th 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 **9th through 12th grade**
 - **1 dose**
 - Must be on or after the 1st birthday

Meningococcal (MCV4)

Vaccine	Immunization Summary for School Attendance, Fall 2018												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
MCV4 Meningococcal								One (1) dose					Two (2) doses****

- **7th- 9th** 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

What are the 2019-2020 school year requirements?

Vaccine	Immunization Summary for School Attendance, Fall 2019												
	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
DTaP/DT Tdap/Td Diphtheria, Tetanus, and Pertussis	Four (4) or more of DTaP or DT, or any combination*												
		Four (4) or more of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up.											
								One (1) dose of Tdap**					
Polio	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.***												
											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		
MMR Measles, Mumps, Rubella	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.												
HEP B Hepatitis B	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.												
Varicella Chickenpox	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.												
											One (1) dose of varicella vaccine must be administered on or after the first birthday.		
MCV4 Meningococcal								One (1) dose				Two (2) doses****	

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-toxoid 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.

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
- Considered **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

OHIO DEPARTMENT OF HEALTH
 296 North High Street
 Columbus, Ohio 43215
 John R. Kaso/Governor
 614/466-3343
 www.ohio.gov
 Richard Hodges/Director of Health

In Re: Approved Means of Immunization Pursuant to Sections 3701.13 and 3313.671 of the Ohio Revised Code

Director's Journal Entry

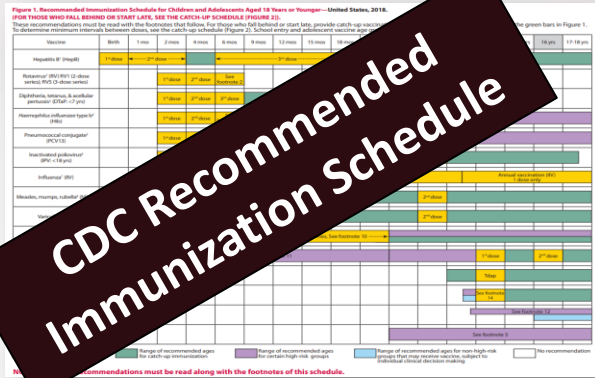
Richard Hodges, Director, Ohio Department of Health (ODH), pursuant to Section 3701.13 of the Ohio Revised Code, hereby approves the following methods of immunization against the diseases specified in Section 3313.671 of the Revised Code for the purpose of carrying out the provisions of that section.

1) Vaccine doses should be administered according to the most recent version of the **Recommended Immunization Schedule for Persons Aged 0 through 18 Years or the Catch-up Immunization Schedule for Persons Aged 4 Months through 18 Years who Start Late or who are more than 1 Month behind** as published by the Advisory Committee on Immunization Practices. Vaccine doses administered less than the minimum interval or age are considered valid. Doses of any vaccine administered earlier than the minimum interval or minimum age should not be counted as required as age-appropriate. Any live viral vaccine (measles, mumps, rubella, varicella, or rotavirus) administered on the same day must be separated by at least four hours. For example, pupils who are enrolled in kindergarten through grade 12 should receive the following:

Diphtheria, Tetanus, and Pertussis: Four (4) vaccine preparations are available for use in children and adolescents. The minimum acceptable age for administration is 6 months of age. The minimum acceptable age for administration is 11 years of age. The minimum acceptable age for administration is 11 years of age. The minimum acceptable age for administration is 11 years of age.

with the 2012-2013 school year, and each year thereafter, one dose of Tdap (Tetanus, diphtheria, and acellular pertussis) vaccine shall be required prior to entry into the seventh (7th) grade. This dose is intended to be administered as a booster dose for students who completed the required doses of the initial series of DTaP, DTaP, or Td vaccine. Children who received one dose of Tdap as part of the initial series will not be required to receive another dose. This requirement shall be enforced progressively, therefore, the requirement shall be extended to 7th- to 8th grade students in 2013, 7th- to 8th grade students in 2014,

HOA443 Rev. 9-16
 All Data Openly Available/Privacy



CDC Recommended Immunization Schedule

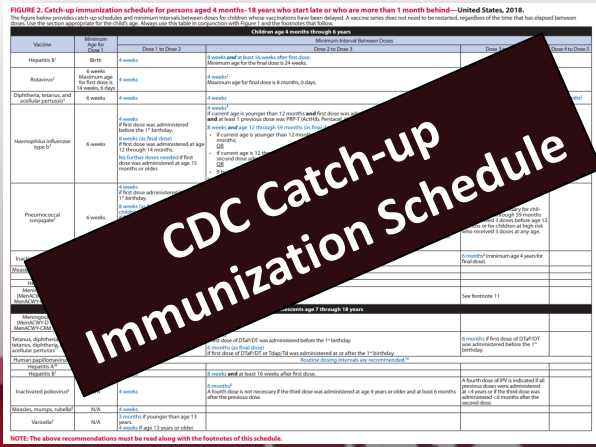
Immunization Summary for School Attendance
 Ohio

ALL 2016 IMMUNIZATIONS FOR SCHOOL ATTENDANCE

VACCINE	Minimum Age for Child	Number of Doses	Notes
DTaP/DT	6 months	4 doses	Four (4) or more of DTaP or DT, or any combination. If all four doses were given before the 4 th birthday, a fifth (5) dose is required. If the fourth dose was administered at least six months after the third dose, and one or more after the 4 th birthday, a fifth (5) dose is not required.
Tdap/Td	11 years	1 dose	Four (4) or more of Tdap or Td, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up.
Polio	12 months	4 doses	Four (4) or more doses of IPV. The IPV/OPV dose must be administered on or after the 4 th birthday, a fifth (5) dose is required. If a combination of IPV and OPV was received, five (5) doses are required.
MMR	12 months	2 doses	Two (2) or more doses of MMR. One (1) dose of MMR is required. If a combination of OPV and MMR was received, two (2) doses are required.
Hep B	Birth	3 doses	Three (3) doses of Hepatitis B. The first dose must be given within 24 hours of birth. The second dose is given at 1-2 months of age. The third dose is given at 6-18 months of age.
Varicella (Chickenpox)	12 months	2 doses	Two (2) or more doses of Varicella. One (1) dose of Varicella is required. If a combination of OPV and Varicella was received, two (2) doses are required.

Notes: *See footnote 11. **See footnote 12. ***See footnote 13. ****See footnote 14. *****See footnote 15. *****See footnote 16. *****See footnote 17. *****See footnote 18. *****See footnote 19. *****See footnote 20. *****See footnote 21. *****See footnote 22. *****See footnote 23. *****See footnote 24. *****See footnote 25. *****See footnote 26. *****See footnote 27. *****See footnote 28. *****See footnote 29. *****See footnote 30. *****See footnote 31. *****See footnote 32. *****See footnote 33. *****See footnote 34. *****See footnote 35. *****See footnote 36. *****See footnote 37. *****See footnote 38. *****See footnote 39. *****See footnote 40. *****See footnote 41. *****See footnote 42. *****See footnote 43. *****See footnote 44. *****See footnote 45. *****See footnote 46. *****See footnote 47. *****See footnote 48. *****See footnote 49. *****See footnote 50. *****See footnote 51. *****See footnote 52. *****See footnote 53. *****See footnote 54. *****See footnote 55. *****See footnote 56. *****See footnote 57. *****See footnote 58. *****See footnote 59. *****See footnote 60. *****See footnote 61. *****See footnote 62. *****See footnote 63. *****See footnote 64. *****See footnote 65. *****See footnote 66. *****See footnote 67. *****See footnote 68. *****See footnote 69. *****See footnote 70. *****See footnote 71. *****See footnote 72. *****See footnote 73. *****See footnote 74. *****See footnote 75. *****See footnote 76. *****See footnote 77. *****See footnote 78. *****See footnote 79. *****See footnote 80. *****See footnote 81. *****See footnote 82. *****See footnote 83. *****See footnote 84. *****See footnote 85. *****See footnote 86. *****See footnote 87. *****See footnote 88. *****See footnote 89. *****See footnote 90. *****See footnote 91. *****See footnote 92. *****See footnote 93. *****See footnote 94. *****See footnote 95. *****See footnote 96. *****See footnote 97. *****See footnote 98. *****See footnote 99. *****See footnote 100.

Immunization Summary for School Attendance



CDC Catch-up Immunization Schedule


The Director's Journal

Purpose:

- Reviews ODH 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



OHIO DEPARTMENT OF HEALTH
246 North High Street
Columbus, Ohio 43215
John R. Kasich/Governor

614/466-3543
www.odh.ohio.gov
Richard Hodges/Director of Health

In Re: Approved Means of Immunization Pursuant to Sections 3701.13 and 3313.671 of the Ohio Revised Code

Director's Journal Entry

I, Richard Hodges, Director, Ohio Department of Health (ODH), pursuant to Section 3701.13 of the Ohio Revised Code, hereby approve the following methods of immunization against the diseases specified in Section 3313.671 of the Revised Code for the purpose of carrying out the provisions of that section.

1) Vaccine doses should be administered according to the most recent version of the *Recommended Immunization Schedule for Persons Aged 0 through 18 Years or the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More than 1 Month Behind*, as published by the Advisory Committee on Immunization Practices. Vaccine doses administered 4 days or less before the minimum interval or age are considered valid. Doses of any vaccine administered ≥5 days earlier than the minimum interval or minimum age should not be counted as valid doses and should be repeated as age-appropriate. Any live virus vaccines (measles, mumps, rubella and varicella vaccines) not administered on the same day must be separated by at least four (4) weeks (28 days). Unless otherwise exempt, pupils who are enrolled in kindergarten through grade 12 shall have:

Diphtheria, Tetanus, and Pertussis:
Four (4) vaccine preparations are available and the child's healthcare provider shall decide which preparation is appropriate. The vaccines are DTaP (diphtheria, tetanus, and acellular pertussis), DT (diphtheria and tetanus), Td (tetanus and diphtheria), and Tdap (tetanus, diphtheria, and acellular pertussis). DTP (diphtheria, tetanus, and pertussis) was available until 2002, but is no longer offered in the United States. Four or more doses of DTaP, DTP or DT (pediatric) vaccine, or any combination thereof, is the minimum acceptable. Children who received all four (4) primary immunizing doses before their fourth birthday are required to receive a fifth (5th) dose of DTaP or DT prior to kindergarten (K) entry. This booster fifth (5th) dose of DTaP or DT is not required if the fourth dose in the primary series was given after the fourth birthday. A child who is age seven or older, and who received Td or Tdap vaccine as the third part of this immunization series, shall not be required to receive further diphtheria, tetanus, or pertussis vaccine. Three doses of Td, or a combination of Td and Tdap, is the minimum acceptable for children age seven (7) and up. Tdap or Td given to a child younger than 7 years of age as either dose 1, dose 2 or dose 3 is NOT valid, and another dose of DTaP should be administered. Tdap given to a child younger than 7 years of age as either dose 4 or dose 5 can be counted as valid for DTaP dose 4 or dose 5. If dose 4 was given before 7 years of age, dose 5 should be given. DTaP given to patients 7 years of age or older can be counted as valid for the one-time Tdap dose. There is no need to restart a series regardless of the time elapsed due to interruption of the schedule or delay of subsequent doses.

Effective with the 2012-2013 school year, and each year thereafter, one dose of Tdap (Tetanus, diphtheria, and acellular pertussis) vaccine shall be required prior to entry into the seventh (7th) grade. This dose is intended to be administered as a booster dose for students who completed the required doses of the initial series of DTaP, DT, or Td vaccine. Children who received one dose of Tdap as part of the initial series will not be required to receive another dose. This requirement shall be enforced progressively; therefore, the requirement shall be extended to 7th – 8th grade students in 2013, 7th – 9th grade students in 2014,

HEA 6413 (Rev. 8/14) An Equal Opportunity Employer/Provider

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

Immunization Summary for School Attendance Ohio	
FALL 2018 IMMUNIZATIONS FOR SCHOOL ATTENDANCE	
VACCINES	
DTaP/DT Tdap/Td Diphtheria, Tetanus, Pertussis	K Four (4) or more doses of DTaP or DT, or any combination. If all four doses were given before the 4 th 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 4 th birthday, a fifth (5) dose is not required. * 1-12 Four (4) or more doses of DTaP or DT, or any combination. Three doses of Td or a combination of Td and Tdap is the minimum acceptable for children age seven (7) and up. Grades 7-12 One (1) dose of Tdap vaccine must be administered prior to entry. **
POLIO	K-8 Three (3) or more doses of IPV. The FINAL dose must be administered on or after the 4 th birthday regardless of the number of previous doses. If a combination of OPV and IPV was received, four (4) doses of either vaccine are required. *** Grades 9-12 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.
MMR Measles, Mumps, Rubella	K-12 Two (2) doses of MMR. Dose one (1) must be administered on or after the first birthday. The second dose must be administered at least 28 days after dose one (1).
HEP B Hepatitis B	K-12 Three (3) doses of Hepatitis B. 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.
Varicella (Chickenpox)	K-8 Two (2) doses of varicella vaccine must be administered prior to entry. Dose one (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 the first dose, it is considered valid. Grades 9-12 One (1) dose of varicella vaccine must be administered on or after the first birthday.
MCV4 Meningococcal	Grade 7-9 One (1) dose of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry. Grade 12 Two (2) doses of meningococcal (serogroup A, C, W, and Y) vaccine must be administered prior to entry. ****

NOTES:


- * Vaccine should be administered according to the most recent version of the *Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger* or the *Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind*, as published by the Advisory Committee on Immunization Practices. Schedules are available for print or download at <http://www.cdc.gov/vaccines/schedules/index.html>
- ** Vaccine doses administered \leq 4 days before the minimum interval or age are valid (grace period). Doses administered \geq 5 days earlier than the minimum interval or age are not valid doses and should be repeated as age-appropriate. If MMR and Varicella are not given on the same day, the doses must be separated by at least 28 days with no grace period.
- *** For additional information please refer to the Ohio Revised Code 3313.67 and 3313.671 for School Attendance and the ODH Director's Journal Entry (available at <http://www.odh.ohio.gov>, Immunization: Required Vaccines for Childcare and School).
- **** Please contact the Ohio Department of Health Immunization Program at (800) 282-0546 or (614) 466-4643 with questions or concerns.

* 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- toxoid 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.


ODH Immunization 11/30/2017
Imm Sum Sch Ohio 2018-2019.docx

How it all fits together...

What Law? Ohio Revised Code (Ohio Law)
Who Creates the Law? Ohio Legislators
Why Needed? Mandates Reporting and Coverage



What Rule? Director's Journal
Who Creates the Rule? Ohio Department of Health (ODH)
Why Needed? Details methods of immunization



What Summary? Immunization Summary for School Attendance
Who Creates the Summary? ODH Immunization Program
Why Needed? 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

Ohio ImpactSIIS

Ohio's ImpactSIIS was designed to maintain a cumulative immunization record for Ohio children

Users include:

- Public Providers (e.g. Local health districts, Rural Health Centers, Federally Qualified Health Centers)
- Private Providers (e.g. hospitals, doctors offices, etc.)
- Payers
- Pharmacies
- School Nurses

The screenshot shows the Ohio Department of Health's ImpactSIIS web application. The header includes the Ohio Department of Health logo, a navigation menu with options like Main, Home, Login, Patient, Vaccinations, Scheduled Reports, Job Queue, Change Password, and Answers, and a 'Click here to chat' button. The main content area features a welcome message, a version number (5.17.5.0), a help desk contact (1-844-208-3880), and a 'NEED HELP?' section with instructions on how to use the system. A red banner at the bottom of the screenshot contains the URL 'Ohioimpactsiiis.org'.

Ohio Department of Health

Click here to chat
Online

Date: September 11, 2017

Welcome to the Ohio Impact Statewide Immunization Information System (ImpactSIIS) Web application.

This web application allows enrolled users to conveniently search for patients in the ImpactSIIS Central Registry and to view the patients' vaccination record. In addition, authorized users can add and edit patient records and vaccination records, as well as maintain facility, physician, and lot number data.

STC and Ohio Department of Health are aware of the issues relating to vaccine inventory and missing shot records. These may affect ordering, inventory, patient demographics and the availability of patient data. We are working to fix all known issues, and appreciate your patience as we continue to improve the application.

NEED HELP?
Your Username should be the same as in the old system. Your password should be available from odgateway- see the steps in this [document](#)

For instructions on how to use the Ohio Impact SIIS:

1. **GUIDES** - Click [HERE](#) for step-by-step "Quick Reference Guides" or visit the "Document Center" under the Main Menu Heading after login to Impact SIIS.
2. **ANSWER DESK** - Contact the STC Answer Desk with additional how-to questions by phone at 1-844-208-3880 between the hours of 8am - 5pm EST, Monday through Friday.
3. **ODH** - For policy and procedural questions concerning IIS use, please contact the Ohio ImpactSIIS Help Desk by phone at 1-866-349-0002 between the hours of 7:30 a.m. and 5 p.m. ET, Monday through Friday.

Ohio ImpactSIIS
Available @ Schools

Ohioimpactsiiis.org

How Can You Become a User of ImpactSIIS?

1. Complete a 'ImpactSIIS Registration Form' found on the ODH School Nursing webpage (<https://www.odh.ohio.gov/odhprograms/chss/schnurs/nurseforms.aspx>)
2. Fax or mail the complete form by to:

**Ohio Department of Health
School & Adolescent Health
School Nursing Program
246 N. High Street
Columbus Ohio 43215
Fax# 614-564-2503**

**Impact Statewide Immunization Information System
Security Agreement
Nurse in School/Head Start**

As a nurse currently licensed by the Ohio Board of Nursing and employed by or under contract with the public or nonpublic School or Head Start or school district (hereinafter "School/Head Start") indicated below for the purpose of providing nursing services (hereinafter "Nurse"), I am entering into a binding legal agreement with the Ohio Department of Health (ODH) to access the ODH immunization registry, called the Impact Statewide Immunization Information System (Impact SIIS). This Agreement must be electronically signed when I am first given login credentials for Impact SIIS and reaffirmed annually.

I am entering into a binding legal agreement with the Ohio Department of Health (ODH) to access the ODH immunization registry, called the Impact Statewide Immunization Information System (Impact SIIS).

By signing this Agreement: 1) I agree at all times to utilize best practices in safeguarding and maintaining the confidentiality of all patient data in the Impact SIIS; and 2) I agree to and am hereby bound by section 3701.17 of the Ohio Revised Code governing protected health information.

- The information contained in the Impact SIIS is the sole property of the State of Ohio and is intended for use by the medical and public health community. Any disclosure of Impact SIIS information is only for the purpose of promoting or encouraging screenings and promoting vaccination against vaccine-preventable childhood diseases, as outlined in section 3701.13 of the Ohio Revised Code.
- By logging on and utilizing the Impact SIIS I assume full responsibility for any use or dissemination of the confidential information contained therein. Any use or dissemination of confidential information in violation of this Agreement may result in the ODH, at its sole discretion, terminating all current and future access to the Impact SIIS and may subject the violator(s) to legal action.
- A patient's, parent's and/or legal guardian's (hereinafter collectively "Patient") medical, demographic, and financial information including, but not limited to government assistance programs, and private insurance is strictly confidential and may only be used for the exclusive purpose of providing health care services to the patient as described in the Ohio Revised Code. **Under no circumstances may a Patient's demographic and financial information on the Impact SIIS be copied, conveyed or disseminated.**
- Access to the Impact SIIS may not be delegated by the School/Head Start or Nurse to a non-Nurse employee or contractor either through individual login privileges or by sharing login information.
- The School/Head Start must inform each Patient that demographic, immunization and screening data may be entered into the Impact SIIS to help ensure full immunization and age and risk appropriate screenings to help detect potential problems and helping to ensure follow-up treatment.
- If the School/Head Start finds a breach of security, the School/Head Start shall notify the Key Master and ODH immediately (see attached Key Master Roles and Responsibilities fact sheet). ODH will cancel any compromised log-in name and password and may, at its sole discretion, require the Signatory to establish a new log-in name and password for the Nurse(s).
- Registration in the Impact SIIS will expire at the end of a twelve month period and will not be renewed for a Nurse until a new electronic copy of this School/Head Start Nurse Agreement has been signed.
- Initial documentation of a current Ohio Nursing License for Key Masters must be maintained by ODH Nursing, and with the Key Masters for additional users at a school or Head Start or in a school district.

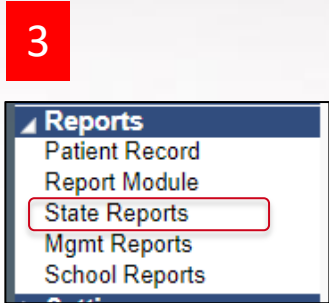
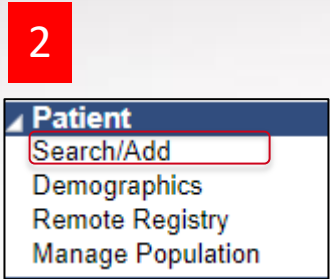
I have read, agree to and will abide by the terms of this Security Agreement.

Signature: _____ Date: ____/____/____
Print Signatory's Name: _____
Ohio Nursing License Number: _____ Expiration Date: ____/____/____
District/Diocese/School/Head Start: _____ IRN: _____
Address: _____, OH _____
Telephone Number: (____) _____-_____
Email Address: _____@_____

Please fax or mail to:
**Ohio Department of Health
School & Adolescent Health
School Nursing Program
246 N. High Street
Columbus, Ohio 43215
Fax# 614-564-2503**

How to Search for an Immunization Record in ImpactSIIS

1. Log into ImpactSIIS
2. Search for the student
3. On the left hand menu, click Reports, click State Reports
4. Click on the 'OH Immunization Record' link



Ohio Department of Health

ImpactSIIS Immunization Record

Last Name: TESTS First Name: PATIENT Middle Initial: Birth Date (mm/dd/yyyy): 11/01/2015 Sex:

I certify that the information provided on this form is correct and verifiable and that the doses shown are the most recent of the indicated vaccine for this patient.

Authorized Signature: _____ Date: _____ Issuing Facility: _____

Vaccine	Date MM/DD/YYYY	Date MM/DD/YYYY	Date MM/DD/YYYY	Date MM/DD/YYYY	Date MM/DD/YYYY	Date MM/DD/YYYY	Positive Titer	History
DTP, DTaP, DT, Td	01/02/2016	04/02/2016						
Tdap								
Hepatitis B	11/01/2015	01/02/2016						
Hib	01/02/2016	04/02/2016	06/02/2016	11/02/2016				
Polio	01/02/2016	04/02/2016						
Pneumo (PCV)	01/02/2016	04/02/2016	10/30/2016	12/25/2016				
Rotavirus	01/02/2016	03/02/2016						
Measles, Mumps, Rubella	11/02/2016							

Only valid vaccinations/doses will show on the immunization record

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 (VFC) 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

[Insert: Local Health Department Name]

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

- [Add in Specific information regarding LHD services]

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>

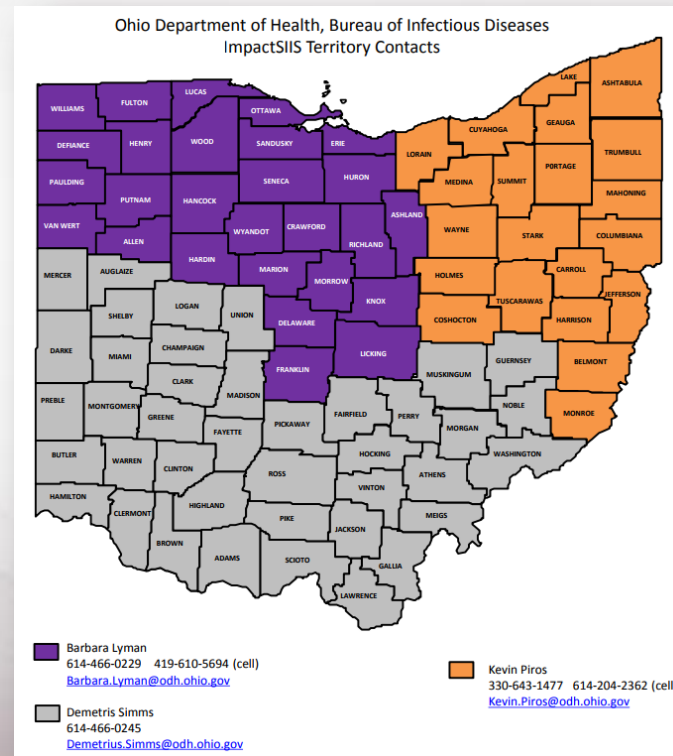
Immunization Action Coalition

- <http://www.immunize.org/>

ODH ImpactSIIS Contact Information

- **NW: Barb Lyman**
- **SW: Demetris Simms**
- **NE: Kevin Piros**

- **Call 1-866-349-0002**



Questions?

Training Wrap-Up

City of Cleveland Schools Presenter **Annette Perhay**

Outside City of Cleveland Schools Presenter **JoAnn Carothers**

Cuyahoga County Board of Health

Cleveland Department of Public Health

twaltman@ccbh.net

Fax 216 676 1319

Date of presentation 3/6/19

Please complete the following forms:

Training Verification

Training Evaluation Survey

Thank you!