



Frequently Asked Questions School and Child Care Immunization Requirements

Note: Due to new rules changes effective August 31, 2018, guidance has been updated for several of the vaccine requirements. Please see our Arizona Immunization Handbook for Schools and Child Care Programs for more detailed information.

Tdap/Td/DTaP (updated)

1. Question: At what age is a Tdap (tetanus/diphtheria/pertussis) vaccine required to attend school?

Answer: One dose of Tdap is required for all students 11 years and older, regardless of grade, unless they have received a dose of Td, Tdap or DTaP in the last 5 years. The previous requirement of 11 years of age AND entering 6th grade has been eliminated.

2. Question: Why do some 7-10 year old students already have a Tdap vaccine?

Answer: The Advisory Committee on Immunization Practice (ACIP) recommends that a person aged 7 years and older who was not fully immunized with (3-4 doses) of DTaP vaccine (before age 7) should receive Tdap as one of the doses (preferably the first) in the catch-up series. The use of DTaP in children over age 7 is not licensed, so when students are referred for an additional dose at an older age, the provider should give them a Tdap or Td vaccine. The receipt of a Tdap at age 7-10 will meet the requirement for Tdap at age 11 (and older) and does not need to be repeated. The student should receive Td booster 10 years after the last Tdap/Td dose.

3. Question: If a student receives an inadvertent dose of **DTaP** after age 7, how should we count that?

Answer: There are times when DTaP may have been mistakenly administered to a child 7 years or older (remember that DTaP is only licensed for children through 6 years of age), but the dose is considered valid according to ACIP. New Arizona school rules changes now clarify that if Tdap has not been previously given, 1 dose of Tdap is required when at least 5 years have passed since the student's last tetanus-containing vaccine was given. For example: the child received a DTaP when they were 8 years of age. They should be referred for a Tdap when they reach 13 years of age.

4. Question: Sometimes I get a record which states the child received a Td, but is the right age for a Tdap. What do I do to verify which vaccine was actually given?

Answer: If possible, contact the provider office to verify which vaccine was given. Very often, a Tdap is actually given, but the provider writes Td or puts it in a space that only has Td identified on the form. If necessary, ask the provider if they could send you an updated copy of the immunization record with the corrected information. You may also be able to identify what was actually given through the ASIIS record, or contact your county health department Immunization Program or the Arizona Department of Health Services Immunization Program Office and ask to speak to the nurse who can help you decipher which vaccine was actually administered.

5. **Question:** If the student did indeed receive a Td instead of a Tdap, should I have them get the Tdap?

Answer: According to school rules, since the child has now received a Td, they are in compliance with the school requirement of having had a dose of tetanus/diphtheria within the past 5 years. However, since Td does not contain the pertussis vaccine, it provides no protection against the disease. A School Nurse (RN) can strongly recommend the child return to the provider and receive the Tdap vaccine, which can be given at any time as there is no minimal interval requirement. If the parent chooses not to do this, then the student is to receive a Tdap when 5 years has passed since the Td dose.

Meningococcal (updated)

6. **Question:** What type of meningococcal vaccine is required for school?

Answer: All students 11 years or older must have proof of one dose of quadrivalent meningococcal ACWY vaccine, regardless of grade. The previous requirement of 11 years of age AND entering 6th grade has been eliminated. A booster dose of MenACWY is recommended at 16 years of age. Common brands or abbreviations you may see on a vaccination record include Menveo, Menactra, MCV, MCV4, MenACWY.

Some older records may show that a student received Menomune. This meningococcal polysaccharide vaccine is a quadrivalent vaccine but production of this vaccine was discontinued in February 2017. Students who have documentation of receiving this vaccine will meet the school requirements.

7. **Question:** Sometimes an immunization record will show that the student received a different meningococcal vaccine such as MenC, MenA/C, or MenB. Would any of these vaccines count for school requirements?

Answer: No. New rules changes now state that the meningococcal vaccine must be a quadrivalent MenACWY vaccine. In the U.S. only the quadrivalent vaccine is administered, but in some other countries (Canada, Great Britain, Australia, etc.) children receive single-antigen meningococcal vaccines when young. The quadrivalent MenACWY vaccine provides protection from the A, C, W and Y serotypes (strains) of the meningococcal disease. If a student record shows prior vaccination with a single or bivalent meningococcal vaccine, refer them for the required MenACWY vaccine.

Polio (updated)

8. **Question:** What is the polio requirement for Arizona students?

Answer: Four doses of polio vaccine meet the requirement for school entry in Arizona, and the final dose must be given at or after 4 years of age and at least 6 months after dose 3. Three doses meet the requirement if the 3rd dose was received after the 4th birthday and at least 6 months after the second dose. Because of new rules changes, students who received 3 or 4 doses (with 4 weeks minimum intervals between doses) PRIOR to August 7, 2009 meet the requirement. The final dose of polio administered ON or AFTER August 7, 2009 must be given at a minimum of 4 years of age AND a minimum interval of 6 months following the previous dose.

9. **Question:** Do we count IPV (inactivated polio vaccine) or OPV (oral polio vaccine) doses?

Answer: The manufacturing and administration of trivalent OPV (tOPV) was recently discontinued worldwide and moved to bivalent OPV. The U.S. does not give anything other than IPV whereas some foreign countries still give OPV. OPV given **prior to April 1, 2016** will be presumed to be trivalent and therefore **acceptable**, regardless of country of administration. Any OPV doses administered **after April 1, 2016** are presumed to be bivalent and therefore **unacceptable**. Please refer the student for appropriate doses of IPV.

MMR

10. Question: What is the MMR requirement for students K-12?

Answer: All Arizona K-12 students are required to have 2 doses of MMR (measles, mumps and rubella). There are students from other countries who may receive single antigen measles, mumps and rubella *or* a combination of 1 MMR and then a single dose of one of the three single antigens. These students will require an additional dose(s) of MMR to meet Arizona school requirements.

Parental Recall/Verbal Report of History of Disease (updated)

11. Question: What if a parent reports that their child has a history of disease for one or more of the school required vaccinations, such as chickenpox?

Answer: Verbal history or parental recall of any disease is not accepted. Students with a history of disease must submit an ADHS Medical Exemption form signed by a licensed physician or nurse practitioner. If the parent reports that the child has a history of any disease, give them the ADHS Medical Exemption form and refer them to their healthcare provider.

12. Question: For history of disease is lab evidence of immunity required?

Answer: Yes. **For measles, rubella or varicella (chickenpox), a review of laboratory evidence of immunity is required.** A copy of the lab reports should be attached to the signed Medical Exemption form and signed by a licensed physician or nurse practitioner. For a disease other than measles, rubella or varicella, the physician or nurse practitioner should review the child's medical records or laboratory evidence to determine disease history or immunity, after which a Medical Exemption is to be completed and signed.

Please understand that if a healthcare provider feels there is not enough documentation in the medical records to support a history of disease, they may choose not to sign the Medical Exemption form. The provider may suggest a blood test or titer (serology) be drawn which could then prove immunity. If the provider does not sign a Medical Exemption Form, and the parent declines to have a titer drawn or to have their child vaccinated, then the final option would be for the parent to sign a Personal (K-12) or Religious (Child Care) Exemption form. The use of these non-medical exemption forms should be reserved as a last resort.

Immunization Schedule and Documentation (updated)

13. Question: Is the Arizona School Immunization Record (ASIR 109) required? Are both the ASIR and facility software immunization record required?

Answer: If your child care or school/health office software program can collect and store student immunization information, and can also provide a print-out which contains vaccination information as outlined in R9-6-704 (A2), then you do not need to also complete the ASIR. The child care or school software print-out should include facility information and contact name and signature. It will be an individual facility/district option to continue to use the ASIR in conjunction with the facility vaccination information system.

If your school/health office does not have a software program or vaccination information system which can collect and store vaccination data or print out a record, then you must use the ASIR, either the hard copy or the online fillable version.

14. Question: Do we need to place a copy of the ASIR or facility vaccination information system print-out in the individual student health file?

Answer: For childcare and schools who are using the hard copy of the ASIR, then it makes sense to keep that record in the student's health file. If using the online fillable ASIR or a facility vaccination information system, then a copy may be kept on the facility computer system. It will be an individual facility/district option to continue to use the ASIR in conjunction with the facility vaccination information system.

When deciding this, it is important to note that ADHS is not responsible for any facility computer and/or software system failure and schools should consider how to access these records in the event of computer failure or destruction. Access to records must be available to state and county health departments upon request.

NOTE: At a minimum, the original immunization records received from the parent should be maintained in the student health file.

15. Question: What is the difference between the ACIP **recommended** immunization schedule and the Arizona School **required** immunizations?

Answer: The **recommended** immunization schedule is the optimum schedule approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), and the American College of Obstetricians and Gynecologists (ACOG). This recommended schedule is considered the standard of practice when immunizing children against vaccine preventable disease.

The Arizona school **required** immunizations are the legislatively mandated immunizations required for attendance in Arizona schools and child care centers.

16. Question: Sometimes there is confusion as to which schedule to follow, the ACIP Recommended Schedule or the Arizona School and Child Care Requirements. Which immunization schedule should Arizona schools and child care facilities follow?

Answer: Follow the Arizona School and Child Care Immunization Requirements set forth by the Arizona Department of Health Services Immunization Program Office. These requirements are legislatively mandated. The Centers for Disease Control and Prevention (CDC) does not provide guidance to individual states regarding what immunizations are to be mandated for schools. It should be said that if physicians follow the ACIP schedule, students attending schools will be in compliance with all school required vaccines.

The statutes and rules governing school immunization requirements are Arizona Revised Statutes 15-871-874 and Arizona Administrative Code, R9-6-701-708.

17. Question: What is the grace period (or extension time) for students to have their immunization records submitted to the school for grades K-12?

Answer: For K-12 schools, there is no grace period/extension time established by the state statutes or codes. The rules state that a pupil shall not be allowed to attend school without submitting documentary proof of all required immunizations, meeting conditional admission requirements, or submitting a signed and valid exemption.

For child care facilities, a child who is missing vaccines can start child care but must get a dose of each vaccine due within 15 days of enrollment and submit a copy of the immunization record to the child care facility. After 15 days, the child may not attend child care without documentation that the child has received the required vaccinations or parents have submitted a valid ADHS medical or religious beliefs exemption. Child

care facilities should not offer the religious beliefs exemption form for convenience reasons or situations. These exemptions should only be used when a parent claims a religious opposition to immunization.

18. Question: If a child's immunizations were not given on schedule, how do I know if the doses are valid and when the next doses are required?

Answer: You may refer to Table 7.2 in the Rules, Immunization Schedule for a Child Who Has Not Completed the Vaccine Series Required in Table 1. The CDC recommended minimum ages and intervals for valid vaccine doses can be found at <http://www.immunize.org/catg.d/p2010.pdf>.

19. Question: When administering vaccines, or checking administration dates, what is the grace period or acceptable dates for vaccines that are given earlier than the required age or interval?

Answer: Most vaccine doses administered within 4 days of the recommended minimum age or interval are counted as valid by ACIP. However, ACIP does **not** allow a 4-day grace period between doses of varicella and MMR vaccines. These live vaccines must be administered on the same day, or at least 28 days apart. The Arizona Immunization Program Office (AIPO) considers vaccine doses given within the ACIP-approved grace period as valid for child care and school entry. The 4-day grace period includes the first MMR, which may be counted if it was administered no sooner than 4 days before the child's first birthday and the final hepatitis B dose, which may be counted if it was administered no sooner than 4 days before 24 weeks of age.

20. Question: There are times when an immunization record does not include the complete date of vaccine administration. If a full date is not available, what is the "default date" for recording a vaccine in the record?

Answer: Guidance provided from the Arizona Immunization Handbook for Schools and Child Care Programs at <http://azdhs.gov/phs/immunization/school-childcare/requirements.htm>, in accordance with the Arizona Revised Statutes 15-871 and the Arizona Administrative Code R9-6-701 through 708, states: "To meet Arizona requirements for immunization records, the dates of all vaccine doses must contain the month, day and year the vaccine was administered."

The MMR dose in particular, must have a month, day, and year to be considered a valid and acceptable dose. This is because we must be sure that the minimum 28 day interval has been met. If the day the vaccine was administered is not noted, reasonable attempts should be made to obtain the exact day. If this information is not available/located, the dose **SHOULD NOT BE COUNTED**. The student should either have a lab titer drawn to see if they have antibodies or they should have the dose repeated.

21. Question: If a dose of vaccine other than MMR or Varicella does not have the day documented, what is the default date?

Answer: Providers have been required for several years now to enter the full date of administration on vaccine records. It is not likely that a school will come across this situation. However, there may be times when you see an older record and the state rules say that "To meet Arizona requirements for immunization records, the dates of all vaccine doses must contain the month, day and year the vaccine was administered." If the day the vaccine was administered is not noted, reasonable attempts should be made to obtain the exact day. If this information is not available/located, the dose should not be counted. The student should either have a lab titer drawn to see if they have antibodies or they should have the dose repeated.

22. Question: I have questions about an individual child's immunization record. How can I get the record reviewed?

Answer: You may contact your local county health department immunization program or call the ADHS Immunization Program Office at 602-364-3630 and ask for a nurse or assessment specialist.

23. Question: Where can I find exemption forms?

Answer: The Medical Exemption form, the SCHOOL Personal Beliefs Exemption form (for students in K-12 grades) and the CHILD CARE Religious Beliefs Exemption form (for students in preschool, child care and Head Start programs) are posted at <http://azdhs.gov/phs/immunization/school-childcare/requirements.htm>.

Please note that these are the only valid and acceptable forms of exemption. The ADHS form should not be altered. Child care facilities and schools should not accept any exemption form that is not the ADHS format or that appears to be altered.

24. Question: Where can I get more of the Arizona School Immunization Record (ASIR 109R) cards?

Answer: Complete the forms request form at <http://azdhs.gov/documents/preparedness/epidemiology-disease-control/immunization/forms-request.pdf>.

There is a fillable 109R form that can be used in schools which can be found at <http://azdhs.gov/phs/immunization/school-childcare/requirements.htm>.

25. Question: Where can I get a copy of the Emergency Information and Immunization Record Card for preschool and child care use?

Answer: It is available through the ADHS Bureau of Child Care Licensing at http://azdhs.gov/documents/licensing/childcare-facilities/providers/forms/emergency_info_immunization_card.pdf.

26. Question: When is the Immunization Data Report (IDR) due?

Answer: Immunization Data Reports are due from schools and child care centers no later than November 15 each year using the on-line application found on the Immunization Program Office website, <http://azdhs.gov/phs/immunization/school-childcare/data-reports.htm>. Schools submit reports on kindergarten and sixth grade students and child care facilities will use the web application process to submit their child care data for children 18 months through 5 years of age. Child care programs that ONLY provide before- and after-school care do not need to submit an IDR.

Maintaining Relationships:

The Arizona Immunization Program Office is aware of the problems that can occur when physicians do not immunize according to the Arizona School Immunization Requirements. The goal is to protect students from disease and to preserve the relationships between physicians, parents and schools.

It is our hope that there can be a harmonizing of the ACIP and Arizona School Immunization Requirements in the future so that obstacles and conflicts are avoided. The process of presenting before the Arizona Legislature is rigorous and any changes to the existing school immunization requirements will take time.

If you have questions or concerns, please contact the Arizona Immunization Program Office at 602-364-3630. AIPO is available to assist you in addressing issues that can arise in response to the two immunization schedules.