

**Spring Branch Independent School District
HEALTH SERVICES
Request for Immunization Records Requirements for Pre-Kindergarten**

Student Name	Birthdate	Date of Request
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All enrolling students must meet immunization requirements before being permitted to enroll. The following records are required and may be submitted from the previous school(s) attended, a licensed physician, or public health clinic, or this form may be completed by a licensed physician and returned to the school listed below.

DPT/DtaP/DT/Td: o#1 _____ o#2 _____ o#3 _____ o#4 _____
 o#5 _____ Last DT date on file _____ Last polio date on file _____

Polio: o#1 _____ o#2 _____ o#3 _____ o#4 _____

Hib: o#1 _____ o#2 _____ o#3 _____ o#4 _____

Hepatitis B: o#1 _____ o#2 _____ o#3 _____

Measles: o#1 _____ o#2 _____ Rubella: o _____

MMR: o#1 _____ o#2 _____ Mumps: o _____

Varicella: o#1 _____ o Date of Varicella (chickenpox) disease: _____

Hepatitis A: o#1 _____ o#2 _____

Pneumococcal Conjugate Vaccine (PCV7): o#1 _____ o#2 _____ o#3 _____ o#4 _____

Physician's Name (Please Print)	Physician's Signature	Telephone
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Diphtheria/Pertussis/Tetanus – Four (4) doses of DTaP/DTP are required for children 19 months through 4 years of age. At age 5 or upon entry into kindergarten, five (5) doses of vaccine in any combination are required unless the fourth dose was received on or after the fourth birthday in which case only four (4) doses are required

Polio – By age 4 years, three (3) doses are required. At age 5, or upon entry into kindergarten, four (4) doses are required, one of which must have been received on or after the fourth birthday. **If the 3rd dose was administered on or after the fourth birthday, only three (3) doses are required.** If a proven combination of four (4) doses of OPV and IPV was received before four years of age, no additional dose is required. However, if the series is comprised of all IPV or all OPV, then a booster dose is required.

Measles* (Rubeola) – One (1) dose of measles-containing vaccine is required. The first dose shall be administered on or after the first birthday. A second dose is due by age 5, or upon entry into kindergarten.

Rubella* and Mumps* -One (1) dose each of rubella and one (1) dose of mumps vaccine received on or after the first birthday is required. (May be given in MMR combination vaccine.)

Haemophilus influenzae (type b conjugate) – **One (1) dose** for children 15 months but not yet 5 years of age unless a schedule for a primary series and booster was met prior to or at 15 months. History of Hib disease since age 2 through age 4 is accepted by written statement from a physician licensed to practice medicine in the United States.

Hepatitis B* – Three (3) doses are required. (4 wks. between dose 1 – 2; 8 wks between dose 2 – 3, and 16 wks after first dose)

Varicella* – One (1) dose of varicella vaccine received on or after the first birthday is required. Reliable parent history or physician validation of varicella illness may meet requirement.

Hepatitis A – Two (2) doses given 6 – 18 months apart for children 2 years – 4 years of age.
(Effective January 2007: first dose required on/after 12 months.)

Pneumococcal Conjugate Vaccine (PCV7) – Ages: 2–6 Months – 3 doses + booster on or after 12 months; 7-11 Months – 2 doses + booster on or after 12 months; 12-23 Months – 2 doses, no additional booster; 24-59 Months – 1 dose on or after 24 months or completed series and booster (if indicated) by 23 months. Age 5 and older not required.

**Serologic confirmation of illness will meet requirement for Measles, Rubella, Mumps, Varicella, and Hepatitis B
 Vaccine doses administered less than or equal to four (4) days before the minimum interval or age shall count as valid.*

Immunization records must be received prior to enrollment or the student will not be allowed to enroll. If student is currently in school, required updates must be received by the date shown below or student will be excluded from school.

School Nurse/Nurse Assistant	School	Date Records Due
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