1. Where can I find more information pertaining to the school immunization requirements for the state of Indiana?
The Immunization Division at the IN State Department of Health posts information pertaining to the school immunization requirements on the homepage for the Immunization Division on the Indiana State Department of Health website. In addition, the resources and information is available to you in the Document Center of the Children and Hoosier Immunization Registry Program (CHIRP). You do not need a user login and password to access these documents from CHIRP. To access these documents:
1. Go to the CHIRP homepage: [https://chirp.in.gov](https://chirp.in.gov)
2. Click on the link in the center of the page for the Document Center
3. Click on the link to 2014-2015 Indiana School Immunization Requirements

2. Are there any new required immunizations for the 2014-2015 school year?
Yes. Two appropriately administered doses of Hepatitis A vaccine are required for kindergarten entry and a meningococcal booster dose is required for students entering grade 12. The meningococcal booster dose is not required for students entering grade 12 who received dose #1 on or after their 16th birthday.

3. Are there any recommended immunizations that are not required for school entry for the 2014 - 2015 school year?
Yes. There are several vaccinations included on the routine immunization schedules that are not required for school entry this year. These include two doses of Hepatitis A vaccine (for grades 1-12) and three doses of Human Papillomavirus (HPV) vaccine for all adolescents and teens.

4. What information must be included on the physician’s statement to document immunization?
The statement must include the student’s name and date of birth, the vaccine given and date (month/day/year) of each immunization.

5. Is lab evidence of immunity acceptable for ALL school required immunizations?
No. Lab evidence is NOT acceptable for Diphtheria, Pertussis, or Tetanus. Laboratory evidence of immunity may be used in place of immunization requirements for the following school required immunizations:

<table>
<thead>
<tr>
<th>Measles</th>
<th>Mumps</th>
<th>Rubella</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chickenpox</td>
<td>Hepatitis A &amp; B</td>
<td>Polio</td>
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Serology testing for chickenpox can only be used to document history of disease.

6. What is the four-day grace period and when can it be used?
The CDC and ACIP allow a 4-day grace period. If a vaccine is given up to 4 days before the minimum recommended age or interval for administration of the vaccine, it can be counted as valid and it will meet school requirements. The four-day grace period does not apply to the minimum 28-day interval between 2 live virus vaccines (MMR, LAIV and Varicella). This also does not change the recommended schedule for routine vaccine administration.

7. Why is there a minimum 28 day interval between doses of live virus vaccines?
The presence of circulating antibody to a vaccine antigen may reduce or eliminate the immune response to a live virus vaccine, because live virus vaccines must replicate in the body in order to
elicit an immune response. This 28 day interval is intended to reduce or eliminate interference from the live vaccine given first on the vaccine given later. If doses of MMR, varicella, or LAIV are not administered on the same day, but are separated by less than 28 days, the vaccine given second should be repeated. This dose should be repeated no earlier than 4 weeks following the invalid dose. The second dose may be confirmed to have been effective by serologic testing; however, serologic testing cannot be performed following vaccination with varicella or LAIV.

8. What is the minimum age for MMR and varicella vaccines to be counted as valid doses?
Doses of MMR and varicella given up to 4 days prior to the first birthday are considered valid. Doses given 5 or more days prior to the first birthday must be repeated in order for the child to meet school entry requirements, even if several years have elapsed since the doses were administered.

9. When will a student need an additional dose of Polio vaccine?
For students in grades kindergarten through 4th grade, the final dose of Polio must be administered on or after the 4th birthday, and be administered at least 6 months after the previous dose.

10. What are the minimum intervals and ages for Hepatitis B vaccine?
The minimum intervals between vaccine doses are as follows:
- Dose 1 and 2 is 4 weeks (28 days)
- Dose 2 and 3 is 8 weeks (56 days)
- Dose 1 and 3 is 16 weeks (112 days)

Note: The minimum age for the 3rd dose of Hepatitis B vaccine is 24 weeks (164 days). The minimum age for second dose is 4 weeks of age. Doses of Hep B that are given prior to the minimum age or intervals must be repeated.

11. If a child received a dose of vaccine before the recommended minimum interval or age, can I provide a note stating the dose is valid in my medical opinion?
No. School immunization requirements in the state of Indiana follow the recommendations made by the Advisory Committee on Immunization Practices (ACIP) that are adopted by the CDC. Invalid doses will be marked in CHIRP with a red “X”, and the parent/guardian will need to provide evidence of immunity in order for their child to attend school. Evidence of immunity includes documentation of a valid dose(s) of vaccine, a positive IgG titer (if acceptable for the vaccine dose in question), or acceptable documentation of history of disease. Students may be excluded from school until a dose of vaccine is repeated.

12. May a chiropractor give a medical exemption for vaccination?
No. Only a licensed physician (M.D. or D.O.) can provide a medical exemption. A nurse practitioner or a physician assistant under a physician’s supervision can also give a medical exemption.

13. What must a medical exemption contain?
A medical exemption is a physician’s certification that a particular immunization may be detrimental to the child’s health. It must state in writing that the child has a medical contraindication to receiving a vaccine. The IN State Dept of Health has a medical exemption form available on CHIRP that providers should use to document medical exemptions. This form is available on CHIRP in the Document Center. Many contraindications to vaccination are not permanent; therefore, a medical exemption should be obtained for the student each school year. As true medical contraindications to immunization are vaccine-specific, medical exemptions must be written for each vaccine that is contraindicated.

Link to Medical Exemption form on CHIRP: https://myshare.in.gov/ISDH/LHRDresource/Immunizations/School%20Nurse%20Documents/Vaccine%20Medical%20Exemption%20Form.pdf
14. If a child receives one dose of MCV4 vaccine at age 10 or older and another dose at age less than 16, will they still need a booster dose at age 16?

No. As long as the first dose was given after the 10th birthday and the 2 doses are separated by a minimum of 8 weeks. However, the child’s healthcare provider should offer a booster dose before a student graduates from high school if the student plans to attend college.

15. Is a doctor’s statement required as proof of chickenpox disease?

- For children entering preschool through 6th grade, a signed statement by a healthcare provider, documenting a diagnosis of varicella or verifying the history of disease, including date (MM/YY) is required. A child does not need to see their healthcare provider at the time of illness in order to request a verification of disease history. More information on assessing disease history is available at: http://www.cdc.gov/chickenpox/hcp/immunity.html

- For children entering grades 7-12, documentation from a parent is sufficient. A written statement should include date of disease, a parent’s signature, and date of signature. (Example: If a parent cannot recall exact dates, something as simple as stating that disease occurred in the spring of 2000 is acceptable)

16. I have a patient who will be only 10 when he enters 6th grade. Should he receive the MCV4 and Tdap before 6th grade like the other students, or wait until he is 11?

The student should receive the Tdap and MCV4 prior to entering 6th grade. Indiana’s school immunization requirements are grade-based and not age based. A dose of Tdap and MCV4 will count towards the adolescent requirements if given at age 10 or older.

17. My office is not currently using the immunization registry to the fullest capacity. Where can I get more information about the new CHIRP legislation?

On May 7, 2013 Governor Pence signed Senate Enrolled Act 0415. This legislation mandates that all providers enter a complete immunization record for persons under the age of 19 into CHIRP beginning July 1, 2015. If your clinic location is currently using an electronic medical record (EMR), you may easily be able to meet this new mandate by establishing an import into CHIRP. You do not need to wait until 2015 to establish this import. Offices that do not utilize an EMR can choose to enter records directly into CHIRP.

For questions pertaining to the school immunization requirements or immunization schedules, please contact the Immunization Division at (800) 701-0704 or email immunize@isdh.in.gov.

CHIRP helpdesk: (888)-227-4439 or email chirp@isdh.in.gov

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