2015-2016 Texas Minimum State Vaccine Requirements for Students Grades K-12

This chart summarizes the vaccine requirements incorporated in the Texas Administrative Code (TAC), Title 25 Health Services, Sections 97.61 to 97.72. This chart is not intended as a substitute for consulting the TAC, which has other provisions and details. <u>Click here for complete TAC language</u>.



The Department of State Health Services (DSHS) is granted authority to set immunization requirements by the Texas Education Code, Chapter 38, Health & Safety, Subchapter A, General Provisions.

IMMUNIZATION REQUIREMENTS

A student shall show acceptable evidence of vaccination prior to entry, attendance, or transfer to a child-care facility or public or private elementary or secondary school in Texas.

| Vaccine Required | Minimum Number | r of Doses Requir | ed by Grade Level | NOTES | | | |
|--|-----------------------|---|--|--|--|--|--|
| (Attention to notes and footnotes) | $K-6^{th}$ | 7 th | $8^{th} - 12^{th}$ | NOTES | | | |
| Diphtheria/Tetanus/Pertussis (DTaP/DTP/DT/Td/Tdap) ¹ | 5 doses or 4 doses | 3 dose primary series and 1 Tdap/Td booster within last 5 years | 3 dose primary series and 1 Tdap/Td booster within last 10 years | For $K - 6^{th}$ grade: 5 doses of diphtheria-tetanus-pertussis vaccine; 1 dose must have been received on or after the 4 th birthday. However, 4 doses meet the requirement if the 4 th dose was received on or after the 4 th birthday. For students aged 7 years and older, 3 doses meet the requirement if 1 dose was received on or after the 4 th birthday. For 7 th grade: 1 dose of Tdap is required if at least 5 years have passed since the last dose of tetanus-containing vaccine. For 8 th – 12 th grade: 1 dose of Tdap is required when 10 years have passed since the last dose of tetanus-containing vaccine. Td is acceptable in place of Tdap if a medical contraindication to pertussis exists. | | | |
| Polio ¹ | 4 doses or 3 doses | | | For $K - 12^{th}$ grade: 4 doses of polio; 1 dose must be received on or after the birthday. However, 3 doses meet the requirement if the 3rd dose was received or after the 4th birthday. | | | |
| Measles, Mumps, and Rubella ^{1,2} (MMR) | 2 doses of MMR | | es and 1 dose each mumps vaccine | The 1 st dose of MMR must be received on or after the 1 st birthday. For $\mathbf{K} - 6^{\text{th}}$ grade: 2 doses of MMR are required. | | | |
| Hepatitis B ² | 3 doses | | | For students aged $11 - 15$ years, 2 doses meet the requirement if adult hepatitis vaccine (Recombivax [®]) was received. Dosage ($10 \text{ mcg}/1.0 \text{ mL}$) and type of vaccine (Recombivax [®]) must be clearly documented. If Recombivax [®] was not the vaccine received, a 3-dose series is required. | | | |
| Varicella ^{1,2,3} | 2 doses | | | The 1^{st} dose of varicella must be received on or after the 1^{st} birthday. For K – 12^{th} grade: 2 doses are required. | | | |
| Meningococcal ¹ | | 1 dose | | For 7th – 12th grade , 1 dose of meningococcal vaccine is required upon enrollment. For students 11 – 12 years of age entering 7 th grade, 1 dose of meningococcal vaccine is required. | | | |
| Hepatitis A ^{1,2} | 2 doses | | | The 1 st dose of hepatitis A must be received on or after the 1 st birthday. For K – 6^{th} grade: 2 doses are required. Special note: a child will not be considered delinquent in this series until 18 months have elapsed since receiving the 1 st dose. | | | |

¹ Receipt of the dose up to (and including) 4 days before the birthday will satisfy the school entry immunization requirement.

² Serologic evidence of infection or serologic confirmation of immunity to measles, mumps, rubella, hepatitis B, hepatitis A, or varicella is acceptable in place of vaccine.

³ Previous illness may be documented with a written statement from a physician, school nurse, or the child's parent or guardian containing wording such as: "This is to verify that (name of student) had varicella disease (chickenpox) on or about (date) and does not need varicella vaccine." This written statement will be acceptable in place of any and all varicella vaccine doses required.

Exemptions

Texas law allows (a) physicians to write medical exemption statements that the vaccine(s) required would be medically harmful or injurious to the health and wellbeing of the child or household member, and (b) parents/guardians to choose an exemption from immunization requirements for reasons of conscience, including a religious belief. The law does not allow parents/guardians to elect an exemption simply because of inconvenience (for example, a record is lost or incomplete and it is too much trouble to go to a physician or clinic to correct the problem). Schools and child-care facilities should maintain an up-to-date list of students with exemptions, so they may be excluded in times of emergency or epidemic declared by the commissioner of public health.

Instructions for requesting the official exemption affidavit that must be signed by parents/guardians choosing the exemption for reasons of conscience, including a religious belief, can be found at <u>www.ImmunizeTexas.com</u> under "School & Child-Care." Original Exemption Affidavit must be completed and submitted to the school or child-care facility.

For children claiming medical exemptions, a written statement by the physician must be submitted to the school or child-care facility. Unless it is written in the statement that a lifelong condition exists, the exemption statement is valid for only one year from the date signed by the physician.

Provisional Enrollment

All immunizations should be completed by the first date of attendance. The law requires that students be fully vaccinated against the specified diseases. A student may be enrolled provisionally if the student has an immunization record that indicates the student has received at least one dose of each specified age-appropriate vaccine required by this rule. To remain enrolled, the student must complete the required subsequent doses in each vaccine series on schedule and as rapidly as is medically feasible and provide acceptable evidence of vaccination to the school. A school nurse or school administrator shall review the immunization status of a provisionally enrolled student every 30 days to ensure continued compliance in completing the required doses of vaccination. If, at the end of the 30-day period, a student has not received a subsequent dose of vaccine, the student is not in compliance and the school shall exclude the student from school attendance until the required dose is administered.

Additional guidelines for provisional enrollment of students transferring from one Texas public or private school to another, students who are dependents of active duty military, and students who are homeless can be found in the TAC, Title 25 Health Services, Sections <u>97.66</u> and <u>97.69</u>.

Documentation

Since many types of personal immunization records are in use, any document will be acceptable provided a physician or public health personnel has validated it. The month, day, and year that the vaccination was received must be recorded on all school immunization records created or updated after September 1, 1991.



2015-2016 Texas Minimum State Vaccine Requirements for Child-Care Facilities



This chart summarizes the vaccine requirements incorporated in Title 25 Health Services, §§97.61-97.72 of the Texas Administrative Code (TAC). This chart is not intended as a substitute for consulting the TAC, which has other provisions and details. The Department of State Health Services is granted authority to set immunization requirements by the Human Resources Code, Chapter 42.

| Age at which child must have vaccines to be in compliance: | Minimum Number of Doses Required of Each Vaccine | | | | | | | | |
|--|--|---------|---------|-----------|------------|---------|-----------|----------|--|
| | DTaP | Polio | НерВ | Hib | PCV | MMR | Varicella | НерА | |
| 0 through 2 months | None | None | None | None | None | None | None | None | |
| By 3 months | 1 Dose | 1 Dose | 1 Dose | 1 Dose | 1 Dose | None | None | None | |
| By 5 months | 2 Doses | 2 Doses | 2 Doses | 2 Doses | 2 Doses | None | None | None | |
| By 7 months | 3 Doses | 2 Doses | 2 Doses | 2 Doses** | 3 Doses*** | None | None | None | |
| By 16 months | 3 Doses | 2 Doses | 2 Doses | 3 Doses** | 4 Doses*** | 1 Dose* | 1 Dose* | None | |
| By 19 months | 4 Doses | 3 Doses | 3 Doses | 3 Doses** | 4 Doses*** | 1 Dose* | 1 Dose* | None | |
| By 25 months | 4 Doses | 3 Doses | 3 Doses | 3 Doses** | 4 Doses*** | 1 Dose* | 1 Dose* | 1 Dose* | |
| By 43 months | 4 Doses | 3 Doses | 3 Doses | 3 Doses** | 4 Doses*** | 1 Dose* | 1 Dose* | 2 Doses* | |

* For MMR, Varicella, and Hepatitis A vaccines, the first dose must be given on or after the first birthday.

** A complete Hib series is two doses **plus** a booster dose on or after 12 months of age (three doses total). If a child receives the first dose of Hib vaccine at 12-14 months of age, only one additional dose is required (two doses total). Any child who has received a single dose of Hib vaccine on or after 15 months of age is in compliance with these specified vaccine requirements.



2015-2016 Texas Minimum State Vaccine Requirements for Child-Care Facilities

- *** If the PCV series is started when a child is seven months of age or older or the child is delinquent in the series, then all four doses may not be required. Please reference the information below to assist with compliance:
 - For children seven through 11 months of age, two doses are required.
 - For children 12-23 months of age: if three doses have been received prior to 12 months of age, then an additional dose is required (total of four doses) on or after 12 months of age. If one or two doses were received prior to 12 months of age, then a total of three doses are required with at least one dose on or after 12 months of age. If zero doses have been received, then two doses are required with both doses on or after 12 months of age.
 - Children 24 months through 59 months meet the requirement if they have at least three doses with one dose on or after 12 months of age, or two doses with both doses on or after 12 months of age, or one dose on or after 24 months of age. Otherwise, one additional dose is required.

Vaccines:

DTaP: Diphtheria, tetanus, and pertussis (whooping cough); record may show DT or DTP IPV: Inactivated Polio virus Hib: *Haemophilus influenzae* type b vaccine MMR: Measles, mumps, and rubella vaccines combined HepB: Hepatitis B vaccine HepA: Hepatitis A vaccine Varicella: Chickenpox vaccine PCV: Pneumococcal conjugate vaccine



Requisitos de vacunación mínimos estatales de Texas de 2015-2016 para guarderías



Este gráfico resume los requisitos de vacunación incorporados en el título 25, Servicios de Salud, §§97.61-97.72, del Código Administrativo de Texas (o TAC). El gráfico no tiene como propósito sustituir las consultas al TAC, el cual contempla otras disposiciones y detalles. El Código de Recursos Humanos, capítulo 42, concede la autoridad de establecer requisitos de inmunización al Departamento Estatal de Servicios de Salud de Texas.

| Edad en la que el niño debe vacunarse para estar en cumplimiento a los requisitos: | Número mínimo de dosis requeridas de cada vacuna | | | | | | | | |
|--|--|---------|---------|-----------|------------|----------|----------|----------|--|
| | DTaP | Polio | НерВ | Hib | PCV | MMR | Varicela | НерА | |
| 0 a 2 meses | Ninguno | Ninguno | Ninguno | Ninguno | Ninguno | Ninguno | Ninguno | Ninguno | |
| Antes de los 3 meses | 1 dosis | 1 dosis | 1 dosis | 1 dosis | 1 dosis | Ninguno | Ninguno | Ninguno | |
| Antes de los 5 meses | 2 dosis | 2 dosis | 2 dosis | 2 dosis | 2 dosis | Ninguno | Ninguno | Ninguno | |
| Antes de los 7 meses | 3 dosis | 2 dosis | 2 dosis | 2 dosis** | 3 dosis*** | Ninguno | Ninguno | Ninguno | |
| Antes de los 16 meses | 3 dosis | 2 dosis | 2 dosis | 3 dosis** | 4 dosis*** | 1 dosis* | 1 dosis* | Ninguno | |
| Antes de los 19 meses | 4 dosis | 3 dosis | 3 dosis | 3 dosis** | 4 dosis*** | 1 dosis* | 1 dosis* | Ninguno | |
| Antes de los 25 meses | 4 dosis | 3 dosis | 3 dosis | 3 dosis** | 4 dosis*** | 1 dosis* | 1 dosis* | 1 dosis* | |
| Antes de los 43 meses | 4 dosis | 3 dosis | 3 dosis | 3 dosis** | 4 dosis*** | 1 dosis* | 1 dosis* | 2 dosis* | |

* Para las vacunas de MMR, de varicela, y de hepatitis A, debe administrarse la primera dosis en o después del primer cumpleaños.

** Una serie completa de Hib consiste en dos dosis más una dosis de refuerzo en o después de los 12 meses de edad (tres dosis en total). Si los niños reciben la primera dosis de la vacuna Hib de los 12-14 meses de edad, se requiere sólo una dosis adicional (dos dosis en total). Los niños que han recibido una dosis única de la vacuna Hib en o después de los 15 meses de edad cumplen con estos requisitos de vacunación especificados.



Requisitos de vacunación mínimos estatales de Texas de 2015-2016 para guarderías

- *** Si se empieza la serie de PCV cuando los niños tienen siete meses de edad o más o el niño no está al día en la serie, entonces todas las cuatro dosis podrían no requerirse. Consulte la información a continuación para ayudarse a estar en cumplimiento:
 - Para los niños de siete a 11 meses de edad, se requieren dos dosis.
 - Para los niños de 12-23 meses de edad: si han recibido tres dosis antes de los 12 meses de edad, se requiere una dosis adicional (un total de cuatro dosis) en o después de los 12 meses de edad. Si recibieron una o dos dosis antes de los 12 meses de edad, se requiere un total de tres dosis con al menos una dosis en o después de los 12 meses de edad. Si han recibido cero dosis, se requieren dos dosis con ambas dosis en o después de los 12 meses de edad.
 - Los niños de 24 meses a 59 meses de edad cumplen con el requisito si llevan al menos tres dosis con una dosis en o después de los 12 meses de edad, o dos dosis con ambas dosis en o después de los 12 meses de edad, o una dosis en o después de los 24 meses de edad. De lo contrario, se requiere una dosis adicional.

Vacunas:

DTaP: Difteria, tétanos y pertusis (tos ferina); el registro podría mostrar DT o DTP IPV: Virus inactivado de polio Hib: Vacuna contra la *Haemophilus influenzae* tipo b MMR: Vacunas contra el sarampión, las paperas y la rubéola combinadas Hep B: Vacuna contra la hepatitis B Hep A: Vacuna contra la hepatitis A Varicela: Vacuna contra la varicela PCV: Vacuna neumocócica conjugada

