## **YCP Immunization Policy**

Your Child's Place follows the Virginia Department of Health's <u>Minimum Immunization Requirements</u> which state that students will only be admitted when vaccines are administered within the spacing and age requirements of the harmonized schedule that the CDC (Centers for Disease Control) and AAP (American Academy of Pediatrics) have recommended. The accepted schedule for admittance can either be the current harmonized schedule or the catch-up schedule where all minimum age and interval requirements are met. See Scheduled Requirements below.

A child cannot enroll until a completed School Entrance Health Form has been submitted. Any subsequent immunizations may be in the form of an **official single printout with dates** from a medical office or on the stated Health Form. Please make sure to submit proper forms after every Physical Examination/Scheduled Immunization (including Flu shots) so that your child's records remain up to date. A School Entrance Health Form must be on file for all Transition Days. Any children enrolled in the Drop-In program may submit their medical records on an official printout.

Your Child's Place does allow children to opt out of scheduled immunizations with a Certificate of Religious Exemption. Any un-immunized children may be asked to stay out of school if an outbreak occurs at the Center or in the greater community – subject to the Director's discretion. Any vaccine delays must be explained in writing and will be reviewed by the Director and placed in your child's file.

- 1. **Diphtheria, Tetanus, & Pertussis (DTaP, DTP, or Tdap)** A minimum of 4 doses. A child must have at least one dose of DTaP or DTP vaccine on or after the fourth birthday. DT (Diphtheria, Tetanus) vaccine is required for children who are medically exempt from the pertussis containing vaccine (DTaP or DTP).
- 2. **Haemophilus Influenzae Type b (Hib) Vaccine -** This vaccine is required ONLY for children up to 60 months of age. A primary series consists of either 2 or 3 doses (depending on the manufacturer). However, the child's current age and not the number of prior doses received govern the number of doses required. Unvaccinated children between the ages of 15 and 60 months are only required to have one dose of vaccine.
- 3. **Hepatitis B Vaccine** A complete series of 3 doses of hepatitis B vaccine is required for all children.
- 4. **Measles, Mumps, & Rubella (MMR) Vaccine** A minimum of 2 measles, 2 mumps, and 1 rubella. (Most children receive 2 doses of each because the vaccine usually administered is the combination vaccine MMR). First dose must be administered at age 12 months or older. Second dose of vaccine must be administered prior to entering kindergarten but can be administered at any time after the minimum interval between dose 1 and dose 2.
- 5. **Pneumococcal (PCV) Vaccine -** This vaccine is required ONLY for children less than 60 months of age. One to four doses, dependent on age at first dose, of pneumococcal conjugate vaccine are required.
- 6. **Polio Vaccine -** A minimum of 4 doses of polio vaccine. One dose must be administered on or after the fourth birthday.
- 7. Varicella (Chickenpox) Vaccine All children born on and after January 1, 1997, shall be required to have one dose of chickenpox vaccine administered at age 12 months or older. Effective March 3, 2010, a second dose must be administered prior to entering kindergarten but can be administered at any time after the minimum interval between dose 1 and dose 2.

Hepatitis A (2 doses) and Rotavirus (3 doses) are recommended, but not required for school entry.

| Recommended Immunizations for Children from Birth - 6 Years Old |            |             |             |             |                            |              |              |                 |              |              |
|-----------------------------------------------------------------|------------|-------------|-------------|-------------|----------------------------|--------------|--------------|-----------------|--------------|--------------|
| Birth                                                           | 1<br>Month | 2<br>Months | 4<br>Months | 6<br>Months | 12<br>Months               | 15<br>Months | 18<br>Months | 19-23<br>Months | 2-3<br>Years | 4-6<br>Years |
| Hep<br>B                                                        | Нер В      |             |             | Нер В       |                            |              |              |                 |              |              |
|                                                                 |            | RV          | RV          | RV          |                            |              |              |                 |              |              |
|                                                                 |            | DTaP        | DTaP        | DTaP        |                            | DTaP         |              |                 |              | DTaP         |
|                                                                 |            | Hib         | Hib         | Hib         | Hib                        |              |              |                 |              |              |
|                                                                 |            | PCV         | PCV         | PCV         | PCV                        |              |              |                 |              |              |
|                                                                 |            | IPV         | IPV         |             | IPV                        |              |              |                 |              | IPV          |
|                                                                 |            |             |             |             | Influenza (Yearly)         |              |              |                 |              |              |
|                                                                 |            |             |             |             | MI)                        | MR           |              |                 |              | MMR          |
|                                                                 |            |             |             |             | Vari                       | cella        |              |                 |              | Varicella    |
|                                                                 |            |             |             |             | Hep A (2 doses at 6 months |              |              | apart)          |              |              |