2010-2011 STATE OF NEVADA AND SOUTHERN NEVADA HEALTH DISTRICT GUIDE TO IMMUNIZATION REQUIREMENTS AND RECOMMENDATIONS FOR CLARK COUNTY SCHOOL DISTRICT

REFERENCE

Nevada Revised Statutes (NRS) 392.435 through NRS 392.448; NRS 394.192 through NRS 394.199; NRS 439.550 through NRS 439.580; NRS 441a.150; Nevada Administrative Code (NAC) 239.511; NAC 392.105; NAC 394.070; NAC 394.190; 424.555; NAC 432A.500; and NAC 441A.755

INSTRUCTIONS

Post this guide on a wall or desktop as a quick reference to help you determine whether children seeking admission to your school meet immunization requirements. If you have any questions, please call the Immunization Coordinator at your local health department.

IMMUNIZATION REQUIREMENTS

Unless excused because of religious belief or medical condition, a child may not be enrolled in a public, private or charter school within this state unless his parents or guardian submit to the board of trustees of the school district in which the child resides a certificate stating that the child has been immunized and has received proper boosters for that immunization or is complying with the schedules established by regulation pursuant to NRS 439.550 for the diseases listed in the table below.

NEW STUDENTS

Students enrolling in a public, private or charter school for the first time in Nevada after July 1, 2002 are required to be vaccinated against Hepatitis A and Hepatitis B. Students enrolling in a public, private or charter school for the first time in Nevada after July 1, 2003 are required to be vaccinated against Varicella (Chickenpox). Students entering 7th grade after June 30, 2008 must have one dose of Bordetella pertussis (Tdap) after age 10, (unless it has been less than 5 years since their last DTaP, DT, Td, DTP, or ATD).

EXEMPTIONS

A child may be excused from the Immunization requirements because of religious belief or medical condition. See NRS 392.437, NRS 392.439, NRS 394.194 for guidance concerning these exemptions.

CONDITIONAL ENROLLMENT

A child may enter school conditionally if the parent or guardian submits a certificate from a physician or local health officer that the child is receiving the required immunizations. If a certificate from the physician or local health officer showing that the child has been fully immunized is not submitted to the appropriate school officers within 90 school days, or its equivalent in a school district operating under an alternative schedule authorized pursuant to NRS 388.090, after the child was conditionally admitted, the child must be excluded from school and may not be readmitted until the requirements for immunization have been met. A child who is excluded from school pursuant to this section is a neglected child for the purposes of NRS 432.100 to 432.130, inclusive, and chapter 432B of NRS.

If the requirements may be met with one visit to a physician or clinic, procedures for conditional enrollment do not apply.

OUTBREAKS AND UNPROTECTED CHILDREN

When it is determined that a dangerous contagious disease is present in a school attended by a child for whom immunization is claimed, NRS 392.446 and NRS 394.198 require the board of trustees of the school district to either require that the child be immunized or to require the child to remain outside of the school environment and the local health officer must be notified of the child's status.

Any parent or guardian who refuses to remove his child from the school in which he is enrolled when retention in school is prohibited under the provisions of NRS 392.435, 392.443 or 392.446 is guilty of a misdemeanor.

HOMELESS STUDENTS

Federal Law PL100-77, Subtitle B of title VII of the McKinney-Vento Homeless Assistance Act: Reauthorized January 2002 (42 U.S.C. 11431 et seq.) is amended to read as follows: Section 722 (C) (i): The school selected in accordance with this paragraph shall immediately enroll the homeless child or youth, even if the child or youth is unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation...(C)iii: If the child or youth needs to obtain immunizations, or immunization or medical records, the enrolling school shall immediately refer the parent or guardian of the child or youth to the local education agency liaison designated under paragraph (1)(J)(ii), who shall assist in obtaining necessary immunizations, or immunization or medical records, in accordance with subparagraph (D).

DOCUMENTATION

All children must present an immunization record stating that the child has been immunized and has received proper boosters for that immunization or is complying with the schedules established by regulation. An immunization record must be presented before a child may attend school. The immunization record must be included in the pupil's academic or cumulative record and transferred as part of that record upon request. Before December 31 of each year, each school district and the governing body of each charter and/or private school shall report to the Health Division of the Department of Human Resources, on a form furnished by the Division, the exact number of pupils who have completed the required immunizations.

AVAILABILITY OF CLINICS

Clinics for the immunization of children for the diseases enumerated in NRS 392.435, 394.192 and 432A.230 must be held by the county, city, town or district boards of health, as the case may be, not less than one month before the opening date of the school year in the respective counties, cities, and towns within the State.

ENFORCEMENT

Each local health officer is charged with the strict and thorough enforcement of the required immunization provisions in his jurisdiction, under the supervision and direction of the Health Division. Each local health officer, under the direction and supervision of the Health Division, shall enforce all provisions of law requiring the immunization of children in the public, charter and private schools in his jurisdiction. Each local health officer shall make reports to the Health Division of any violation coming to his notice by observation or upon complaint of any person or otherwise.

PUPILS NOT MEETING REQUIREMENTS

Refer pupils who do not meet these State requirements to their physician or to a local health department. Give families a written notice indicating which doses are lacking.

ADDITIONAL REQUIREMENTS IMPOSED AFTER ENROLLMENT

If, after a child has been enrolled in a public school and before registration for any subsequent school year additional immunization requirements are provided by law, the child's parents or guardian shall submit an additional certificate or certificates to the board of trustees or the governing body of the charter or private school in which the child is enrolled stating that the child has met the new immunization requirements.

PREGNANCY

No live vaccines, MMR, MMRV (Proquad) and/or Chickenpox are to be given during pregnancy. CDC advises pregnant patients to consult with their physicians prior to administration of Hepatitis A.

RECOMMENDED VACCINES

Menactra (MCV-4) - 11-12yrs, one dose only

HPV (Human Papillomavirus) – recommended for females between 11-12 years of age, may be given at ages 9-26 years – three doses – second dose 2 months after first, and third dose six months after first. Accelerated schedules are used only for 17-18 yrs, second dose 4 weeks after first, and third dose 12 weeks after second.

Second dose of Varicella is recommended at 4 to 6 years of age. For children 1 to 12 years of age, doses should be 3 months apart.

IMMUNIZATION REQUIREMENTS

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VACCINE	REQUIREMENTS Dose and Age	MINIMUM # OF DOSES REQUIRED	INTERVAL REQUIREMENTS
DTaP, DTP, (Diptheria, Tetanus, Pertussis) DT (Diptheria, Tetanus), Tdap (Tetanus-diphtheria- pertussis booster) Td (Tetanus- diphtheria), or ATD (Adult Tetanus- diphtheria)	Dose 1: 6wks to 2 months Dose 2: 4 months Dose 3: 6 months Dose 4: 12 to 18 months Dose 5: 4 to 6 years, or older Dose 6: Tdap dose at 10 years or older, or for children entering 7 th grade	4 (5 th dose not necessary if 4 th dose received on or after the 4 th birthday) ** Catch up schedule: 3 doses of Td for children 7 yrs or older (10 years old or older need at least one Tdap dose)	 4 weeks between first 3 doses 6 months between dose 3 and 4 6 months between 4 and 5 ** Catch up schedule: 4 weeks between dose 1 and 2 6 months between dose 2 and 3 Tdap must be given at least 5 years after the last dose of DT, Td, DTaP, DTP, or ATD
HAV (Hepatitis A)	Dose 1: 12 months or older Dose 2: 18 months or older	2	6 months between dose 1 and 2
HBV (Hepatitis B)	Dose 1: Birth or older Dose 2: 1 to 2 months or older Dose 3: 6 months or older	3	 4 weeks between dose 1 and dose 2 8 weeks between dose 2 and dose 3 and 16 weeks between dose 1 and dose 3 *** Must be at least 24 weeks old at time of dose 3
MMR (Measles, Mumps, Rubella)	Dose 1: 12 to 15 months Dose 2: 4 years or older	2	 4 weeks between dose 1 and dose 2 May accept second dose if administered after 12 months of age, and four weeks after first dose
Polio (IPV, OPV)	Dose 1: 6 weeks to 2 months Dose 2: 4 months Dose 3: 6 months Dose 4: 4-6 years old (4 yrs old-minimum age for this dose)	4 The final dose of the IPV series should be administered at age ≥ 4 yrs regardless of the number of previous doses (4 th dose not necessary if 3 rd dose received on or after the 4 th birthday)	 At least 6 weeks old at time of dose 1 4 weeks between dose 1 and dose 2 and dose 2 to dose 3 6 months between dose 3 and dose 4 whether the series is 3 or 4 doses
VZV, Varicella (Chickenpox)	Dose 1: 12 months or older ** 2 doses required one month apart for children receiving 1st dose on or after 13 years or older	1	4 w eeks between doses for children age 13 and older
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4 DAY RULE

The ACIP recommends that vaccine doses administered up to four (4) days before the recommended minimum interval or age can be counted as valid.

QUESTIONS AND ANSWERS: SCHOOL VACCINE REQUIREMENTS (08/10)

- 1. What vaccines are required for school entry? DTaP, IPV, Hepatitis A, Hepatitis B, MMR, Chickenpox. In addition Tdap is required for children entering 7th grade or age 10 years. These may be different from your previous state or school requirements.
- 2. Why is it necessary for the children to have these vaccines? Due to the high morbidity and potential mortality from these illnesses, the CDC (Centers for Disease Control and Prevention) and ACIP (Advisory Committee on Immunization Practices) have recommended the vaccines for prevention.
- 3. If currently enrolled children present themselves at a Health District clinic, will they have an opportunity to start the Hepatitis A, Hepatitis B, or Varicella vaccines? Yes, the child must present with a parent or guardian, or be accompanied by an adult with written permission by a parent or guardian. The parent may obtain a copy of the Vaccine Administration Record on our Web site; bring a completed form (with parent or guardian signature) to any Southern Nevada Health District (SNHD) location.
- 4. Is there just one shot for Hepatitis A, Hepatitis B, and Chickenpox?
 - a) Hepatitis A is a series of two shots, separated by at least 6 months.
 - b) Hepatitis B is a series of three shots
 - c) One dose of Varicella is required for all children enrolled in CCSD. If the 1st dose of Varicella is given on or after the 13th birthday, two doses are required and must be administered one month apart. For children under 13 years of age: two doses are recommended, but only the first dose is required. Under 13 years, doses are given 3 months apart.
- 5. If any of the vaccines have been started but never finished, do you start over? No, we never start immunizations over, *UNLESS* parents cannot show us proof of the immunization history. We continue with the last vaccine given in the series.

- 6. Is there a cost for the vaccines? SNHD, charges a \$16.00 administration fee per visit per client for one injection received, and \$25.00 for two or more injections. There is no extra charge for students through 18 years of age, *IF* the student meets one of the following criteria:
 - a) No health insurance
 - b) Medicaid enrolled (parents must bring Medicaid card to avoid administrative fee charges)
 - c) Having health insurance but it does not cover immunizations
 - d) Native American or Alaskan native
 - e) Nevada Check-Up (parent must bring card)
 - f) Students having health insurance that covers immunizations, the cost for the Hepatitis A vaccine is \$50.00 per dose, plus the \$16.00 administrative fee.
 - g) According to Federal Law, no person may be denied vaccine purchased with Federal immunization grant funds for failure to pay an administrative fee or failure to make a donation to the provider (Federal Register, Vol 53 No 102, May 26, 1988)
- 7. Can a student be exempt from receiving these required vaccines?
 Unless excused for a religious belief or a medical condition, the student will be required to have these vaccines. The parent can provide a statement for a religious belief. A medical exemption can only be provided by a licensed health care provider. Chiropractors may not sign medical exemptions.
- 8. What if the student has had the Hepatitis A or B disease, and/or Chickenpox? Students who have had any of these diseases are exempt from this requirement; however, the parents must provide CCSD with written verification from a licensed health care provider, and/or laboratory results indicating immune status.
- 9. What is considered a valid Immunization record?
 - A documented hand written (in ink) or typed record with the name, date and type of vaccine(s) given, stamped or signed by the health care provider who administered the vaccine(s). The child's name and date of birth needs to appear on the record. An original or unaltered photocopy is acceptable. The Nevada State Web IZ or SNHD Web IZ Immunization record printout is acceptable.
- 10. How early is too early to count a vaccine dose? The ACIP recommends that vaccine doses administered up to four (4) days before the

recommended minimum interval or age can be counted as valid. EX: If first dose of Hepatitis A administered 10/24/06, second dose given 04/20/07. This can be counted as a valid dose.

- 11. What if a child has been given a dose two weeks early, does it have to be repeated? Yes, doses administered 5 days or more, earlier than the minimum interval or age should not be counted as valid doses and should be repeated as age appropriate. EX: child had third dose of Hepatitis B given at 5 months and 3 days, dose was given too early, so the child needs a fourth dose of Hepatitis B. Vaccines administered too early will be repeated at an interval at the minimum recommended interval from the invalid dose. EX: Hepatitis A #1 administered 02/10/07, Hepatitis A #2 administered 06/15/07. Repeated dose should be administered on or after 12/15/07, and this would be Hepatitis A #3.
- 12. How do we handle complaints of parents regarding SNHD, and what are the roles of CCSD and SNHD? Immunization needs of CCSD students are met by the ongoing collaborative efforts of CCSD and SNHD, neither entity can achieve these goals independently. Therefore it is imperative that we work together and maintain open communication. CCSD seeks to maintain the health and well being of all students enrolled in their school district and follows the guidance and direction of the State and SNHD (as the local health authority). SNHD seeks to maintain the health and well being of all members of the Southern Nevada community, and as a Federally Qualified Health Center (FQHC) follows the guidance and direction of the State, CDC and ACIP as it relates to immunizations.

As a professional, if either entity receives a complaint against the other, we should offer courtesy and a resource for the parent and then we should follow the chain of command. All complaints regarding SNHD: contact Vickie Swansen 759-0876, or Veronica Morata-Nichols 759-0892. All complaints regarding CCSD: call Diana Taylor at 799-7443.

13. Where can I send parents for the required vaccinations? The Health District has four public health center locations. The addresses are listed below. They are open Monday through Friday, 8:00 am to 4:30 pm. Please ask parents to have children at clinic sites by 4:00 pm. Call 759-0850 for satellite clinic locations. An alternative for children with

health insurance is for their parents to take them to their private medical providers.

14. Why did you change the Polio rule?

The 4 dose of IPV series should continue to be administered at ages 2 months, 4 months, 6-18 months and 4-6 yrs. The final dose in the IPV series should be administered at age ≥ 4 regardless of the number of previous doses. The minimum interval from dose 3 to 4 is extended from 4 weeks to 6 months. ACIP recommends a 6 months minimum interval between the next-to-last and last dose of the polio vaccination series whether the series is 3 or 4 doses. Prior to August 7, 2009, the minimum interval between all doses of the polio vaccination series was 4 weeks. ACIP did not specifically recommend revaccination of persons who received polio vaccine doses separated by the minimum interval in effect prior to August 7, 2009. The minimum age for dose 1 remains 6 weeks.

15. Is it safe for my child to get 6 or more doses in one day?

Children are exposed to thousands of germs on a daily basis. Exposing your child to five or eight different germs in the form of vaccines is a drop in the ocean. Research has shown that a healthy infant may receive up to 10,000 vaccines at once.

16. Where can I call if I need additional information? You can call 759-0850 or visit our website: http://www.southernnevadahealthdistrict.org

Ravenholt Building, 625 Shadow Lane, Phone: 759-1000

East Las Vegas Public Health Center, 560 N. Nellis Blvd, Ste E12, Phone: 759-0900

Henderson Public Health Center, 520 E. Lake Mead Pkwy, Phone: 759-1040

Mesquite Public Health Center, 830 Hafen Lane, Phone: 759-1682 Please note immunizations are only available on Tuesday/Thursday.