

Authorized Signature:

UTAH SCHOOL IMMUNIZATION RECORD

This record is part of the student's permanent school record (cumulative folder) as defined in Section 53G-9-306 of the Utah Statutory Code. A school from which a student transfers shall provide the student's immunization record to the student's new school upon request of the student's legally responsible individual. The Utah Department of Health and local health departments shall have access to this record. This immunization record may be entered into the Utah Statewide Immunization Information System (USIIS).

| | | | Student Info | rmation | | | | | |
|---|--------------------------------------|-----------------|--------------------------------------|------------------|--------------|------------------|--|---|--|
| Student Name | | | | Gender | □ Male | ☐ Female | Date of Bi | rth | |
| Name of Parent/Guardian | | | | | | | | | |
| | | | Vaccine Info | rmation | | | | | |
| VACCINE | Record the month, day, & year each v | | h vaccine was giv 4 th | | | SCHOOL USE ONLY: | | | |
| DTaP, DTP, DT, Td, Tdap (D-Diphtheria, T-Tetanus, P-Pertussis, aP-acellular | | | | | | | 1. Exemption | was granted for: | |
| Pertussis) | | | | | | | ☐ Medical rea | son (Expires* on:) | |
| Tdap (given after 7 years of age) | | | | | | | ☐ Religious be | elief | |
| Polio (IPV or OPV) | | | | | | | ☐ Personal belief *If the medical exemption is temporary, enter date. 2. Proof of Immunity (history of disease): This student has proof of immunity for the following antigen (s): | | |
| Haemophilus influenzae type b (Hib) | | | | | | | | | |
| Pneumococcal | | | | | | | | | |
| Measles, Mumps, and Rubella (MMR) 1st dose must be received on or after the 1st birthday | | | | | | | □ MMR | | |
| | I | | | | | | ☐ Haemophi | us influenza type b (Hib) | |
| Hepatitis B (HBV) | | | | | | | ☐ Polio | ☐ Pneumococcal | |
| Variable (Chiekanney) | <u> </u> | | | | | | □ Tdap | ☐ Varicella (Chickenpox) | |
| Varicella (Chickenpox) 1st dose must be received on or after the 1st birthday. | <u> </u> | | | | | | □ DTaP | ☐ Meningococcal | |
| Hepatitis A (HAV) Must be received on or after the 1 st birthday. | | | | | | | *If the student ha | A ☐ Hepatitis B us past history of disease for any of | |
| Meningococcal | | | | | | | the vaccines, the student must submit healthcare provider documentation. If the student has past history of disease for any combination vaccines such | | |
| *If the student has immunity from the required in | | • | | | to this Reco | | | dent must submit healthcare provide | |
| Immunization record received for this | s student is | from: □ a | statewide regi | stry | | | Utah [| Department of Health | |
| □ student's former school | | | | | | | Division of Disease Control & Prevention | | |
| ☐ legally responsible individual of the student | | | | | | | Immunization Program Rev. 07/2018 www.immunize-utah.org | | |
| I have reviewed the records available and to the | best of my know | wledge, this st | udent has receiv | ed the above imr | nunizations | | (801)- | 538-9450 | |

Date:

<u>INSTRUCTIONS</u>: This form must be completed for enrollment in a school. A school is defined as any public or private, elementary or secondary school through grade 12, preschool, child care program, nursery school, or kindergarten. A student is defined as an individual who attends a school. For detailed information on the required immunizations and minimum intervals between vaccine doses, refer to the Utah Immunization Guidebook at <u>www.immunize-utah.org</u>.

Student Information: Fill in (print or type) student's name, gender, and date of birth, and name of parent/guardian.

Vaccine Information:

- a. The minimum required immunizations for school entry include (see interval table in the Utah Immunization Guidebook for required spacing of doses):
 - 5 doses of DTaP/DTP/DT/Tdap 4 doses are acceptable, if the 4th dose was given after the 4th birthday; 3 doses of Td are required, if started after age 7 years. One of the doses in the Td series should be Tdap.

Note: Any Tdap vaccine given after 7 years of age should be documented on the Tdap row which may fulfill any of the above requirements.

- 1 dose of Tdap a single dose of Tdap vaccine is required for students prior to 7th grade entry. The Tdap vaccine must be given after 7 years of age.
- 4 doses of Polio 3 doses are acceptable, if the 3rd dose was given after the 4th birthday.
- 2 doses of Measles, Mumps, and Rubella required for all students kindergarten through grade 12. The 1st dose of measles-containing vaccine must be given on or after the 1st birthday.
- 3 doses of Hepatitis B required for students prior to entering kindergarten. Required for students prior to 7th grade entry.
- 2 doses of Varicella (chickenpox) required for students prior to entering kindergarten. Required for students prior to 7th grade entry. The 1st dose must be given on or after the 1st birthday.
- 2 doses of Hepatitis A required for students prior to entering kindergarten. The 1st dose of Hepatitis A must be given on or after the 1st birthday.
- 1 dose of Meningococcal required for students prior to 7th grade entry. Only Meningococcal vaccine given on or after 10 years of age is acceptable for 7th grade school entry.
- b. Children enrolled in preschool, child care program, or nursery school must be appropriately immunized for their age for the following diseases:

 Diphtheria, Tetanus, Pertussis, Polio, Measles, Mumps, Rubella, Haemophilus influenzae type b (Hib), Hepatitis A, Hepatitis B, Pneumococcal, and Varicella (chickenpox).
- c. Transcribe the month, day, and year of each immunization received by the student into the appropriate box.

<u>Immunization Record Received For This Student</u>: Check the appropriate box. In Utah, the statewide immunization registry is called USIIS (Utah Statewide Immunization Information System). Legally responsible individual of the student is defined as the student's parent, the student's legal guardian, an adult brother or sister of a student who has no legal guardian, or the student, if the student is an adult, or is a minor who may consent to treatment under consent of minor to treatment. (Section 26-10-9)

When reviewing the immunization record of a student, ensure that information regarding each required vaccination the student has received, including the date each vaccine was administered, has been verified by a licensed healthcare provider, registered nurse, an authorized representative of a local health department, an authorized representative of the department, or a pharmacist. Written proof is required to verify the student's immunizations.

<u>Authorized Signature</u>: This is the signature of the school or health personnel who verified the Utah School Immunization record (USIR) against the source records.

School Use Only:

1. Exemption: If the student has an exemption, check the box for the type of exemption. If the medical exemption is permanent, enter NA for expiry date. If the medical exemption is temporary, enter expiration date.

Exemption Procedures:

Students claiming an exemption to the required vaccinations must have their legally responsible individual complete an online educational module at www.immunize-utah.org or in-person consultation at a local health department. A copy must be presented to the school or child care official. Completion of the online educational module or in-person consultation at a local health department must be completed for all types of exemptions. The school or child care program must attach the copy to this record.

Medical Exemption: For a medical exemption from required immunizations, the legally responsible individual of the student must provide to the school a completed vaccination exemption form and a written notice signed by a licensed healthcare provider stating that due to the physical condition of the student, administration of the vaccine would endanger the student's life or health. The statement should also indicate whether the exemption is temporary (indicate the expiration date) or permanent.

Proof of Immunity (history of disease): If the student is claiming immunity against a disease for which vaccination is required because the student previously contracted the disease, the student must submit a document signed by a healthcare provider to the school as proof of immunity. If the student has past history of disease for any combination vaccines such as MMR, the student must submit healthcare provider documentation for each antigen. The document must be attached to this record.

<u>Maintaining a List of Students' Immunization Status</u>: Utah School Immunization Law requires schools and child care facilities to maintain a *current list* of all enrolled students, including:

1) students who have a valid and complete immunization record, 2) students who are exempt from receiving the required vaccines, and 3) students who are allowed to attend school under conditional enrollment status.