



Child Care and School Immunization Rates Guide (Counting Doses/Creating Rates)

In May 2014, the Colorado General Assembly passed House Bill 14-1288 (HB-1288). Signed by Governor Hickenlooper, HB-1288 will take effect on July 1, 2014. Per HB-1288, "each school¹ shall make the immunization and exemption rates of their enrolled student population publicly available, upon request" and the Colorado Department of Public Health and Environment shall "provide assistance to schools with the analysis and interpretation of the immunization data."

The table below indicates the number of doses of vaccine a student needs based on their age. To determine if a student is considered current on all age-appropriate vaccines for the purpose of calculating an immunization rate, compare the student's current immunization record with the number and type of vaccines they should have for their current age. Denote the immunizations the student has received on the *WORKSHEET TO DETERMINE IMMUNIZATION STATUS OF STUDENTS AND CALCULATE RATES* and mark if they are current. Repeat this process for each student enrolled in your school.

Age of Student	Hep B <i>Hepatitis B</i>	DT, DTP, or DTaP, Tdap <i>Diphtheria, Tetanus, Pertussis</i>	IPV <i>Inactivated Polio Vaccine</i>	MMR <i>Measles, Mumps, Rubella</i>	Varicella <i>Chickenpox</i>	Hib <i>Haemophilus influenzae type b</i>	PCV7 or PCV13 <i>Pneumococcal Disease</i>
	Required number of doses	Required number of doses	Required number of doses	Required number of doses	Required number of doses	Required number of doses	Required number of doses
By 4 mos.	1	1	1	0	0	1	1
By 6 mos.	2	2	2	0	0	2	2
By 8 mos.	3	3	2	0	0	2	3
By 15 mos.	3	3	2	1	1	2	3
By 19 mos.	3	4	3	1	1	Refer to footnote [^]	Refer to footnote ^o
2-4 years	3	4	3	1	1	Refer to footnote [^]	Refer to footnote ^o
Kindergarten	3	4 or 5*	3 or 4+	2	2	0	0
6 th - 12 th Grade	3	Primary Series + 1 Tdap*	3 or 4+	2	2	0	0

* DT, DTP, DTaP - 5 doses are required however, if the 4th dose is given on or after the 4th birthday, the child has met the requirement.

Tdap - One dose of Tdap is required for 6th - 12th grades.

+IPV - 4 doses are required however, if the 3rd dose is given on or after the 4th birthday, the child has met the polio requirement.

[^]The number of Hib doses required depends on the child's current age and the age when the Hib vaccine was administered:

- If any dose is given at or over, 15 months, the Hib requirement is met.
- Children who begin the series before 12 months, 3 doses are required, and at least 1 dose must be at, or over, 12 months.
- If the 1st dose was given at 12 to 14 months, 2 doses are required.
- If the current age is 5 years or older, no new or additional doses are required.

^oThe number of doses of pneumococcal conjugate vaccine (PCV7 or PCV13) depends on the student's current age and the age when the 1st dose was administered.

- If the 1st dose was administered between 2 to 6 months of age, the child will receive 3 doses plus an additional dose between 12 to 15 months of age.
- If started between 7 to 11 months of age, the child will receive 2 doses plus an additional dose between 12 to 15 months of age.
- If the 1st dose was given between 12 to 23 months of age, 2 doses, 2 months are required.
- Any dose given at 24 months through 4 years of age, the PCV vaccine requirement is met.
- No doses required once the child turns 5 years of age.

¹Defined as a public, private, or parochial nursery school, day care center, child care facility, family child care home, foster care home, Head Start program, kindergarten, or elementary or secondary school through grade twelve, or a college or university. "School" does not include a public services short-term child care facility as defined in section 26-6-102 (6.7), C.R.S., a guest child care facility as defined in section 26-6-102 (5), C.R.S., a ski school as defined in section 26-6-103.5 (6), C.R.S., or college or university courses which are offered off-campus; or are offered to nontraditional adult students, as defined by the governing board of the institution; or are offered at colleges or universities which do not have residence hall facilities.

WORKSHEET TO DETERMINE IMMUNIZATION STATUS OF STUDENTS AND CALCULATE RATES

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Please note that this tool is meant to provide a very simple manual method to determine immunization and exemption rates for schools that do not have another process in place. This method is not consistent with all of the requirements of the ACIP recommended schedule of immunizations and only takes into account the number of doses a student has received; not whether the doses were given at the correct age or meets minimum interval requirements.

1. Use this worksheet to record the number of doses of vaccine each student has received.
2. Make a check ✓ in the **one** appropriate column to the right if the child is *In Process* (does not have all required doses but has a plan in place), has claimed a *Medical, Religious or Personal Exemption*, or has *No Record* on file.
3. If the student has received the correct number of doses of all the required vaccines, check the *Up to Date* column to the far right.
4. Use additional worksheets as needed to record all your enrolled students.
5. On the subtotal line of each page, count the number of students, the number of students claiming an exemption, and the number of students fully up to date.
6. Use the final page summary table to calculate your rates.

Required by 4 months	Required by 6 months	Required by 8 months	Required by 15 months	Required by 19 months	Required for Kindergarten entry (K-5 th Grades)	Required for 6 th – 12 th Grades
<ul style="list-style-type: none">• 1-DTap• 1 Polio• 1 Hib• 1 Hep B• 1 PCV	<ul style="list-style-type: none">• 2 DTap• 2 Polio• 2 Hib• 2 Hep B• 2 PCV	<ul style="list-style-type: none">• 3 DTap• 2 Polio• 2 Hib• 3 Hep B• 3 PCV	<ul style="list-style-type: none">• 3 DTap• 2 Polio• 2 Hib• 3 Hep B• 3 PCV13• 1 MMR• 1 Varicella	<ul style="list-style-type: none">• 4 DTap• 3 Polio• 3 Hib• 3 Hep B• 4 PCV13• 1 MMR• 1 Varicella	<ul style="list-style-type: none">• 4/5 DTap• 3/4 Polio• 3 Hep B• 2 MMR• 2 Varicella	<ul style="list-style-type: none">• 4/5 DTap plus one Tdap• 3/4 Polio• 3 Hep B• 2 MMR• 1-2 Varicella

Please see ACIP schedule/catch up schedule for additional guidance: <http://www.cdc.gov/vaccines/schedules/>

Name/initials column is optional for individual student identification.

¹ Defined as a public, private, or parochial nursery school, day care center, child care facility, family child care home, foster care home, Head Start program, kindergarten, or elementary or secondary school through grade twelve, or a college or university. “School” does not include a public services short-term child care facility as defined in section 26-6-102 (6.7), C.R.S., a guest child care facility as defined in section 26-6-102 (5), C.R.S., a ski school as defined in section 26-6-103.5 (6), C.R.S., or college or university courses which are offered off-campus; or are offered to nontraditional adult students, as defined by the governing board of the institution; or are offered at colleges or universities which do not have residence hall facilities.

[Check one correct column for each student]

IMMUNIZATION AND EXEMPTION RATE SUMMARY REPORT FOR YOUR CHILD CARE/SCHOOL

1. Add the subtotals from the worksheets to get the total number of students, the total number of students with exemptions and the total number of students that are up to date.
2. Fill in the table below with the totals for your facility.
3. Calculate the rates for your facility using the guidance below.

All Students:

Total # Students		Total # Exemptions		Total # Up to Date

Immunization Rate = Total # of students ÷ Total # Up To Date = _____ multiply by 100 to get a percentage _____ %

Exemption Rate = Total # of students ÷ Total # Exemptions = _____ multiply by 100 to get a percentage _____ %

Note: The rate of up to date students plus the rate of students with exemptions will not always total 100% unless you have no in-process students and have an immunization record or exemption on every student.

For comments or questions, please email cdphe.dcdimmunization@state.co.us