New York State Department of Health School Immunization Worksheet for Day Care and Pre-K

Completion Instructions on Page 2 – Do Not Return This Form – Keep for Your Records

Day Care/Pre-K Name: _____

Prepared By: _____

				1	2				3				4					5				6					7						8				9
Total Children Enrolled:				**Children Without Immunization Record** – See criteria on Page 2	**Diphtheria Tetanus Pertussis (DTaP)** – See criteria on Page 2				**Polio** – See criteria on Page 2				**Measles/Mumps/Rubella (MMR)** – See criteria on Page 2					**Haemophilus Influenzae Type B (Hib)** – See criteria on Page 2				**Hepatitis B** – See criteria on Page 2					**Varicella (Chickenpox)** – See criteria on Page 2						**Pneumococcal (PCV)** – See criteria on Page 2				**Completely Immune** – See criteria on Page 2
Name	**DOB**				**a.** Up to Date	**b.** Med. Exempt.	**c.** In Process	**d.** Non-compliant	**a.** Up to Date	**b.** Med. Exempt.	**c.** In Process	**d.** Non-compliant	**a.** Up to Date	**b.** Titer	**c.** Med. Exempt.	**d.** In Process	**e.** Non-compliant	**a.** Up to Date	**b.** Med. Exempt.	**c.** In Process	**d.** Non-compliant	**a.** Up to Date	**b.** Titer	**c.** Med. Exempt.	**d.** In Process	**e.** Non-compliant	**a.** Up to Date	**b.** Titer	**c.** Med. Exempt.	**d.** History of	**e.** In Process	**f.** Non-compliant	**a.** Up to Date	**b.** Med. Exempt.	**c.** In Process	**d.** Non-compliant	
Page Sub-total:																																					
Summary Totals:																																					
Total Children on Page:																																					

INSTRUCTIONS FOR SCHOOL IMMUNIZATION WORKSHEET DAY CARE AND PRE-K

- ✓ Use this worksheet to help you fill out the survey form. This worksheet is for your own records and does not need to be returned.
- ✓ Only transfer "Summary Totals" from the front of the last worksheet to the survey form.
- ✓ The immunization status of all children in Pre-K/Day Care should be included, not only new children.
- ✓ Intervals between doses of vaccine must be in accordance with the American Academy of Pediatrics Recommended Immunization Schedules for Persons 0 Through 18 Years of Age.
- ✓ For children who are behind or started late, refer to the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind available here on Table 2.
- ✓ **All children should only be counted once in each vaccine or status category**.

- Column 1. Enter an "X" for those children who do not have an immunization record or other proof of immunity on file. Do not count students who do not have an immunization record in columns 2 through 8.
- Column 2a. Enter an "X" for those children who have received 4 doses of Diphtheria, Tetanus, and Pertussis (DTaP) vaccine as age appropriate.
- Column 2b. Enter an "X" for those children who have a valid medical exemption for DTaP.
- Column 2c. Enter an "X" for those children who are in process for DTaP.
- Column 2d. Enter an "X" for those children who are non-compliant for DTaP.
- Column 3a. Enter an "X" for those children who have received 3 doses of polio vaccine as age appropriate.
- Column 3b. Enter an "X" for those children who have a valid medical exemption for polio.
- Column 3c. Enter an "X" for those children who are in process for polio.
- Column 3d. Enter an "X" for those children who are non-compliant for polio.
- Column 4a. Enter an "X" for those children who have received 1 dose of measles/mumps/rubella (MMR) vaccine no more than 4 days prior to their first birthday.
- Column 4b. Enter an "X" for those children who have a valid medical exemption for MMR.
- Column 4c. Enter an "X" for those children who are in process for MMR.
- Column 4d. Enter an "X" for those children who have demonstrated serologic evidence of immunity to or laboratory confirmation of measles, mumps and rubella diseases.
- Column 4e. Enter an "X" for those children who are non-compliant for MMR.
- Column 5a. Enter an "X" for those children who have received the appropriate number of doses of Haemophilus influenza type B (Hib) vaccine as age appropriate.
- Column 5b. Enter an "X" in the Hib box for those children who have a valid medical exemption for Hib
- Column 5c. Enter an "X" for those children who are in process for Hib.
- Column 5d. Enter an "X" for those children who are non-compliant for Hib.

- Column 6a. Enter an "X" for those children who have received 3 doses of hepatitis B vaccine as age appropriate.
- Column 6b. Enter an "X" for those children who have demonstrated serological evidence of immunity to hepatitis B disease.
- Column 6c. Enter an "X" for those children who have a valid medical exemption for hepatitis B.
- Column 6d. Enter an "X" for those children who are in process for hepatitis B.
- Column 6e. Enter an "X" for those children who are non-compliant for hepatitis B.
- Column 7a. Enter an "X" for those children who have received 1 dose of varicella (chickenpox) vaccine no more than 4 days prior to their first birthday.
- Column 7b. Enter an "X" for those children who have demonstrated serological evidence of immunity to varicella.
- Column 7c. Enter an "X" for those children who have a valid medical exemption for varicella.
- Column 7d. Enter an "X" for those children who have been diagnosed by a physician, physician assistant, or nurse practitioner as having had varicella disease.
- Column 7e. Enter an "X" for those children who are in process for varicella.
- Column 7f. Enter an "X" for those children who are non-compliant for varicella.
- Column 8a. Enter an "X" for those children who have received the appropriate number of doses of pneumococcal conjugate vaccine (PCV) as age appropriate.
- Column 8b. Enter an "X" for those children who have a valid medical exemption for PCV.
- Column 8c. Enter an "X" for those children who are in process for PCV.
- Column 8d. Enter an "X" for those children who are non-compliant for PCV.
- Column 9. Enter an "X" for those children who are up to date, have titers, or history of disease under columns 2 through 8. Do not include children with medical exemptions, who are in process, non-compliant, or have no immunization record in this category.