



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

IMMUNIZATION REQUIREMENTS FOR ENROLLED STUDENTS IN CONNECTICUT SCHOOLS 2019-2020 SCHOOL YEAR



PRESCHOOL

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| DTaP: | 4 doses (by 18 months for programs with children 18 months of age) |
| Polio: | 3 doses (by 18 months for programs with children 18 months of age) |
| MMR: | 1 dose on or after 1 st birthday |
| Hep B: | 3 doses, last one on or after 24 weeks of age |
| Varicella: | 1 dose on or after 1 st birthday or verification of disease |
| Hib: | 1 dose on or after 1 st birthday |
| Pneumococcal: | 1 dose on or after 1 st birthday |
| Influenza: | 1 dose administered each year between August 1 st -December 31 st (2 doses separated by at least 28 days required for those receiving flu for the first time) |
| Hepatitis A: | 2 doses given six calendar months apart, 1 st dose on or after 1 st birthday |

KINDERGARTEN

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| DTaP: | At least 4 doses. The last dose must be given on or after 4 th birthday |
| Polio: | At least 3 doses. The last dose must be given on or after 4 th birthday |
| MMR: | 2 doses separated by at least 28 days, 1 st dose on or after 1 st birthday |
| Hep B: | 3 doses, last dose on or after 24 weeks of age |
| Varicella: | 2 doses separated by at least 3 months-1 st dose on or after 1 st birthday; or verification of disease |
| Hib: | 1 dose on or after 1 st birthday for children less than 5 years old |
| Pneumococcal: | 1 dose on or after 1 st birthday for children less than 5 years old |
| Hepatitis A: | 2 doses given six calendar months apart, 1 st dose on or after 1 st birthday |

GRADES 1-6

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| DTaP/Td: | At least 4 doses. The last dose must be given on or after 4 th birthday. Students who start the series at age 7 or older only need a total of 3 doses. |
| Polio: | At least 3 doses. The last dose must be given on or after 4 th birthday |
| MMR: | 2 doses separated by at least 28 days, 1 st dose on or after 1 st birthday |
| Hep B: | 3 doses, last dose on or after 24 weeks of age |
| Varicella: | 2 doses separated by at least 3 months-1 st dose on or after 1 st birthday; or verification of disease |
| Hepatitis A: | 2 doses given six calendar months apart, 1 st dose on or after 1 st birthday |

GRADE 7

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| Tdap/Td: | 1 dose for students who have completed their primary DTaP series. Students who start the series at age 7 or older only need a total of 3 doses of tetanus-diphtheria containing vaccine, one of which must be Tdap |
| Polio: | At least 3 doses. The last dose must be given on or after 4 th birthday |
| MMR: | 2 doses separated by at least 28 days, 1 st dose on or after 1 st birthday |
| Meningococcal: | 1 dose |
| Hep B: | 3 doses, last dose on or after 24 weeks of age |
| Varicella: | 2 doses separated by at least 3 months-1 st dose on or after 1 st birthday; or verification of disease |
| Hepatitis A: | 2 doses given six calendar months apart, 1 st dose on or after 1 st birthday |

GRADES 8-12

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|----------------|--|
| Tdap/Td: | 1 dose for students who have completed their primary DTaP series. Students who start the series at age 7 or older only need a total of 3 doses of tetanus-diphtheria containing vaccine, one of which must be Tdap |
| Polio: | At least 3 doses. The last dose must be given on or after 4 th birthday |
| MMR: | 2 doses separated by at least 28 days, 1 st dose on or after 1 st birthday |
| Meningococcal: | 1 dose |
| Hep B: | 3 doses, last dose on or after 24 weeks of age |
| Varicella: | 2 doses separated by at least 3 months-1 st dose on or after 1 st birthday; or verification of disease |

- DTaP vaccine is not administered on or after the 7th birthday.
- Tdap can be given in lieu of Td vaccine for children 7 years and older unless contraindicated.
- Hib is required for all Pre-K and K students less than 5 years of age.
- Pneumococcal Conjugate is required for all Pre-K and K students less than 5 years of age.
- Hep A requirement for school year 2019-2020 applies to all Pre-K through 7th graders born 1/1/07 or later.
- Hep B requirement for school year 2019-2020 applies to all students in grades K-12.
Spacing intervals for a valid Hep B series: at least 4 weeks between doses 1 and 2; 8 weeks between doses 2 and 3; at least 16 weeks between doses 1 and 3; dose 3 must be administered at 24 weeks of age or later.
- Second MMR for school year 2019-2020 applies to all students in grades K-12.
- Meningococcal Conjugate requirement for school year 2019-20 applies to all students in grades 7-12
- Tdap requirement for school year 2019-2020 applies to all students in grades 7-12
- If two live virus vaccines (MMR, Varicella, MMRV, Intra-nasal Influenza) are not administered on the same day, they must be separated by at least 28 days (there is no 4 day grace period for live virus vaccines). If they are not separated by at least 28 days, the vaccine administered second must be repeated.
- Lab confirmation of immunity is **only** acceptable for Hep A, Hep B, Measles, Mumps, Rubella, and Varicella.
- **VERIFICATION OF VARICELLA DISEASE:** Confirmation in writing by a MD, PA, or APRN that the child has a previous history of disease, based on family or medical history.

For the full legal requirements for school entry visit:

<https://portal.ct.gov/DPH/Immunizations/Immunization--Laws-and-Regulations>

If you are unsure if a child is in compliance, please call the Immunization Program at (860) 509-7929.

New Entrant Definition:

*New entrants are any students who are new to the school district, including **all** preschoolers and all students coming in from Connecticut private, parochial and charter schools located in the same or another community. **All pre-schoolers, as well as all students entering kindergarten**, including those repeating kindergarten, and those moving from any public or private pre-school program, even in the same school district, **are considered new entrants**. The one exception is students returning from private approved special education placements—they are not considered new entrants.

Commonly Administered Vaccines:

| <u>Vaccine:</u> | <u>Brand Name:</u> | <u>Vaccine:</u> | <u>Brand Name:</u> |
|-----------------|--------------------|-----------------|---|
| DTaP-IPV-Hib | Pentacel | MMRV | ProQuad |
| DTaP-HIB | TriHibit | PCV7 | Pevnar |
| HIB-Hep B | Comvax | PCV13 | Pevnar 13 |
| DTaP-IPV-Hep B | Pediarix | DTaP-IPV | Kinrix, Quadracel |
| Hepatitis A | Havrix, Vaqta | Influenza | Fluzone, FluMist, Fluviron, Fluarix, FluLaval Flucelvax, Afluria |