

# Keep our students and classrooms healthy!

## Dear Parents or Guardians,

Whooping cough, also known as pertussis, is a bacterial infection that can easily spread causing severe coughing fits and missed days of school.

Meningococcal disease is a serious bacterial illness that affects the brain and the spinal cord. Meningitis can cause shock, coma, and death within hours of the first symptoms.

To help protect your children and others from whooping cough and meningitis, Georgia law requires students to be vaccinated against both diseases.

**Before starting the school year, all students born on or after January 1, 2002 and entering or transferring into 7<sup>th</sup> grade will need proof of a whooping cough booster shot and a meningococcal shot unless the child has an exemption.**

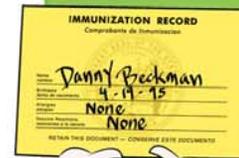
If your preteen has not been vaccinated against whooping cough or meningococcal disease, we strongly recommend getting your child vaccinated. Getting Tdap (the tetanus, diphtheria, pertussis shot) and MCV4 (meningococcal conjugate vaccine) now will not only help protect your child against the ongoing threat of whooping cough and meningitis but will also meet the school entry requirement.

Ask your pediatrician or local health department about other shots your child may need including:

- the human papillomavirus (HPV) 3-shot series
- an annual flu vaccine; and
- catch-up immunizations, including chickenpox, MMR (measles, mumps, rubella) and hepatitis B.

Proof of both vaccinations must be documented on the Georgia Immunization Certificate (Form 3231)

If your child does not have health insurance or their health plan won't cover these vaccines, call your local health department and ask about getting no or low cost vaccines. For more information, visit <http://dph.georgia.gov/vaccines-children> or call (800)-848-3868.



## Help Your Preteen Relax During Shots

### Encourage your preteen to:

- Bring along his/her favorite music
- Remember to breathe—take slow, deep breaths
- Stay seated if he/she feels dizzy or anxious
- Make eye contact with you or focus on something in the room, like a poster
- Close his/her eyes and think of a favorite place or activity
- Think about where to go after the appointment for a reward



# Summary of Georgia Immunization Requirements for Child Care & School Attendance



These charts are based on the ACIP Recommendations and Georgia Requirements; for more detailed information including dose schedules and minimum time intervals; please refer to Georgia Form 3231REQ and Table 1 of the ACIP General Recommendations, *MMWR*, January 28, 2011.

## Required Number of Doses for Children Who Started Immunizations before Age 7 Years

Required Vaccines	2 mo	4 mo	6 mo	12 mo	15 mo	18 mo	24 mo	4-6 years	5-6 yrs of age Total Doses Required for School Entry
<b>DTP, DT, DTaP</b>	1	2	3	4				5	4 or 5 (if #4 dose given on or after 4th birthday, #5 not needed)
<b>Hep B</b>	1	2	3						3
<b>Hib (ActhiB) or * Hib (PedvaxHIB or Comvax)</b>	1	2	3	4					Required for Child Care and Pre-K only
<b>**Polio</b>	1	2	3					4	3 or 4 (4 <sup>th</sup> dose of polio on or after 4 <sup>th</sup> birthday required for children born on or after 1-1-06)
<b>***MMR</b>				1				2	2
<b>Varicella</b>				1				2	2
<b>PCV</b>	1	2	3	4					Required for Child Care & Pre-K only
<b>Hep A</b>				1				2	2 Required for children born on or after 1-1-06

\*If PedvaxHIB or Comax is administered at ages 2 and 4 months, a dose at 6 months is not indicated.

\*\*The final dose in the series should be administered on or after the fourth birthday and at least 6 months following the previous dose. If 4 doses are administered prior to age 4 years a fifth dose should be administered at age 4 through 6 years. (*MMWR* 2009; 58(30):829-30)

\*\*\*State requirement is for 2 doses each of measles and mumps, and 1 dose of rubella vaccine. Second dose may be given before age 4 years, provided at least 4 weeks have elapsed since first dose.

## Required Number of Doses for Children Who Started Immunizations after Age 7 Years

Required Vaccines	First Visit	1 Mo After 1 <sup>st</sup> Dose	1 Mo After 2 <sup>nd</sup> Dose	1 Mo After 3 <sup>rd</sup> Dose	4 Mo After 1 <sup>st</sup> Dose	6 Mo After Previous Dose	Total Doses Required
*Hep B	1	2			3*		3
**Polio	1	2	3			3 or 4	3 or 4
***MMR	1	2					2
Varicella	1	2					2
****Tdap/Td	1(Tdap)	2(Td)				3(Td)	3
*****MCV4	1						1

\*If child received 2 doses of adult Recombivax-HB 10 mcg between the ages of 11-15 yrs and the doses are separated by at least 4 months, dose 3 is not needed.

\*\* The final dose in the series should be administered on or after the fourth birthday and at least 6 months following the previous dose. A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least 6 months after the previous dose.

\*\*\* State requirement is for 2 doses each of measles and mumps, and 1 dose of rubella vaccine.

\*\*\*\*State requirement is for 1 dose of Tdap booster for 7<sup>th</sup> grade; Td is recommended for remaining additional doses to complete series

\*\*\*\*\* State requirement is for 1 dose of MCV4 for 7<sup>th</sup> grade