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Bureau of Infectious Disease Prevention,
Response and Services

Immunization Program

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DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

JUDYANN BIGBY, MD
SECRETARY

JOHN AUERBACH
COMMISSIONER

Policy for School Entry for Recent Immigrant or Refugee Arrivals with No Immunization Documentation

Many refugee and immigrant children arrive in Massachusetts each year. Some of these children will not have an immunization record and will be unable to provide one due to the circumstances of their departure from their home country. The policy of the Massachusetts Department of Public Health (MDPH) is to consider individuals without written documentation of immunization as unvaccinated.

MDPH strongly encourages refugee and immigrant children to obtain a comprehensive health assessment and to begin catch up immunization after arrival. However, this should not be a barrier to school entry, based on the requirements of the McKinney-Vento Act (42 USC 11431). This law requires schools to enroll "homeless children and youths" immediately, including unaccompanied children, regardless of citizenship status, even if they do not have records normally required for enrollment, such as medical and immunization records. "Homeless children and youths" are defined as those who lack a fixed, regular and adequate nighttime residence, including those who:

- share the housing of other persons due to a loss of housing,
- are living in emergency or transitional shelters, or
- are awaiting foster care placements.

If a child lacks immunization records, the enrolling school should refer the child's parents or guardians to the local educational agency's homeless liaison, who will assist in obtaining necessary records related to immunization or medical care. In general, state and local educational agencies are to adopt policies which remove barriers to the enrollment and retention of homeless children and youths, including recently arrived immigrants or refugees.

The immunizations required for childcare, school and college entry in MA (102 CMR 7.00 and 105 CMR 220.000) are attached and can also be found on the MDPH website (www.mass.gov/dph/imm; click on "School Requirements"). Additional guidance related to the latest U.S. immunization recommendations, including catch-up schedules, can be found at www.cdc.gov/vaccines/recs/schedules/default.htm.

Upon school enrollment, the Massachusetts Department of Public Health (DPH) Immunization Program recommends the following actions be taken regarding immunization:

- **If students do not have any health records, they should be referred to a Massachusetts primary care provider to complete a health assessment and to begin catch up immunization.** Other options may include a health assessment by the school physician, at a school-based health center or at a community health center. To receive immunizations, students can also be referred to their local board of health in some communities. Children who are refugees are linked to the Massachusetts Refugee Health Assessment Program for immunization and health assessment services by their resettlement agency and should be able to provide documentation that this process has been initiated after the first appointment.
- **Schools should evaluate the immunization status of these children as they would that of internationally adopted children, or persons vaccinated outside the Unites States with missing or incomplete records.** Begin or continue the vaccination series for all immunizations required for childcare, school or college entry in Massachusetts.
- **DPH does NOT recommend routine analysis of titers; rather students should begin the necessary immunizations based on the appropriate catch up schedule.** However, there are alternative proofs of immunity which can substitute for some vaccines:
    - Laboratory evidence of immunity for: hepatitis B, measles, mumps, rubella or varicella;
    - Reliable past history of chickenpox disease defined as:
        - Physician interpretation of parent/guardian description of chickenpox; or
        - Physician diagnosis of chickenpox; or
        - Laboratory proof of immunity.

Additional Guidance

Additional guidance can be found at:

- The Advisory Committee on Immunization Practices' (ACIP) General Recommendations on Immunization (see pages 35-37) http://www.cdc.gov/mmwr/PDF/rr/rr5515.pdf
- American Academy of Pediatrics' (AAP) Committee on Infectious Diseases Red Book. See pages 35-36, 97-98. http://aapredbook.aappublications.org/
- Massachusetts Department of Public Health Immunization Program Website: www.mass.gov/dph/imm
- Massachusetts Department of Public Health Refugee and Immigrant Health Program: www.mass.gov/dph/refugee
- CDC 2010 Childhood, Adolescent and Catch-up Immunization Schedule: www.cdc.gov/vaccines/recs/schedules/child-schedule.htm#printable
- School Based Health Centers: go to the DPH website: www.mass.gov/dph, scroll to the bottom of the page and click on the link "Programs and Services K-S". On the new page, click on the link to "School-Based Health Centers".
- Community Health Centers: www.massleague.org/CHC/FindHealthCenter.php
- Local Boards of Health: www.mhoa.com/roster.htm
- WHO website: www.who.int/immunization_monitoring/en/globalsummary/scheduleselect.cfm
- Massachusetts Department of Elementary and Secondary Education homeless liaisons: www.doe.mass.edu/mv/

Massachusetts School Immunization Requirements 2009*

	Child Care/Preschool[1]	Kindergarten	Grades 1-6	Grades 7-12	College[2]
Hepatitis B[3]	3 doses	3 doses	3 doses	3 doses	3 doses for all health science students and all full-time undergraduate and graduate students
DTaP/DTP/DT/Td[4]	≥4 doses DTaP/DTP	5 doses DTaP/DTP	≥4 doses DTaP/DTP or ≥ 3 doses Td	4 doses DTaP/DTP or ≥3 doses Td; plus 1 Td booster	1 Td booster within the last 10 years
Polio[5]	≥3 doses	4 doses	≥3 doses	≥3 doses	NA
Hib[6]	1 to 4 doses[6]	NA	NA	NA	NA
MMR[7]	1 dose	2 doses measles, 1 mumps, 1 rubella	2 doses measles, 1 mumps, 1 rubella	2 doses measles, 1 mumps, 1 rubella	2 doses measles, 1 mumps, 1 rubella
Varicella[8]	1 dose	1 dose	1 dose	<13 years old – 1 dose ≥13 years old – 2 doses	NA
Meningococcal[9,10]	NA	NA	NA (see footnote 10)	1 dose for all new full-time residential students (see footnote 9)	1 dose for all new full-time residential students (see footnote 9)

*These requirements also apply to all new "enterers." NA means there is no vaccine requirement for the grades indicated.

[1]**Child Care/Preschool:** Minimum requirements by 24 months; younger children should be immunized according to schedule for their age.

[2]**College:** Requirements apply to: 1) all full-time undergraduate and graduate students; 2) all full-time and part-time health science students; and 3) any full-time or part-time student attending any postsecondary institution while on a student or other visa, including foreign students attending or visiting classes as part of a formal academic visitation or exchange program.

[3]**Hepatitis B:** 3 doses are required for child care attendance and entry into preschool, kindergarten-12th grade, and college (full-time undergraduate and graduate students, as well as all full- and part-time undergraduate and graduate health science students). Laboratory proof of immunity is acceptable.

[4]**DTaP/DTP/DT/Td:** ≥4 doses are required for child care attendance and entry into preschool. 5 doses of DTaP/DTP are required for school entry unless the fourth dose is given on or after the 4th birthday. DT is only acceptable when accompanied by a letter stating a medical contraindication to DTaP/DTP. A **single** booster dose of Td is required for all students entering grades 7-12 (Tdap is **preferred**). Please note: Td is not required if it has been <5 years since their last dose of DTaP/DTP/DT.

[5]**Polio:** ≥3 doses are required for child care attendance and entry into preschool. 4 doses are required for school entry, unless the third dose of an all-IPV or all-OPV schedule is given on or after the 4th birthday, in which case only 3 doses are needed. However, if the sequential or a mixed IPV/OPV schedule was used, 4 doses are always required to complete the primary series.

[6]**Hib:** Hib vaccine is required for child care attendance and preschool entry. The number of primary doses is determined by vaccine product and age the series begins.

[7]**MMR:** 1 dose is required for child care attendance and entry into preschool. A second dose of measles vaccine, given at least 4 weeks after the first, is required for entry to all grades K-12, and kindergarten-12th grade, unless they have a physician-certified reliable history of chickenpox. If the child is ≥13 years of age at first vaccination, 2 doses are required.
A reliable history of chickenpox is defined as: 1) physician interpretation of parent/guardian description of chickenpox; 2) physician diagnosis of chickenpox; or 3) laboratory proof of immunity.

[9]**Meningococcal**: Immunization with meningococcal vaccine is required for: 1) newly enrolled full-time students attending a secondary school with grades 9-12 (in the case of ungraded classrooms, those with students 13 years or older) who will be **living in a dormitory or comparable congregate living arrangement** licensed or approved by the secondary school; and 2) newly enrolled full-time undergraduate and graduate students in a degree granting program at a postsecondary institution (e.g., colleges) who will be **living in a dormitory or comparable congregate living arrangement** licensed or approved by the postsecondary institution. These institutions are also required to supply all newly enrolled full-time students (or their parent/legal guardian) who will be **living in a dormitory or comparable congregate living arrangement** with the MDPH developed Meningococcal Information and Waiver Form.

All affected students must: 1) receive information about meningococcal disease and vaccine; and 2) provide documentation of receipt of 1 dose of meningococcal polysaccharide vaccine within the last 5 years (or a dose of meningococcal conjugate vaccine at anytime in the past).

As an alternative, affected students or their parent/legal guardian may sign the Meningococcal Information and Waiver Form developed by MDPH to indicate that they read and understood the required information related to the risks of meningococcal disease and: a) elected to decline the vaccine; or b) could not obtain meningococcal vaccine due to a shortage, but wish to receive it.

These requirements apply to **all newly enrolled full-time residential students**, regardless of grade and year of study.

[10]**At residential schools with lower grades**: the requirements apply to residential students in grades pre-K through 8 only if the school combines these grades in the same school or part of a school with students in grades 9-12.

Recommended Vaccines

Other vaccines are recommended, **but not currently required**, for child care and school entry. The table below indicates vaccines that are recommended, in addition to those required for child care and school entry. Please see the immunization schedules on pages one and two of this document for more detailed information on recommended vaccines and their dosing schedules.

	Child Care/Preschool	Kindergarten	Grades 1-6	Grades 7-12	College
Recommended Vaccines	• 3 doses rotavirus • 2 doses hepatitis A • 4 doses pneumococcal (PCV7) • Yearly influenza (after 6 months of age)	• 2 doses varicella • Yearly influenza	• 2 doses varicella • Yearly influenza	• 1 dose Tdap • 1 dose meningococcal • 3 doses HPV (for females) • 2 doses varicella • Yearly influenza	• 1 dose Tdap • 3 doses HPV (for females) • 2 doses varicella • Yearly influenza