April 24, 2017

RE: 2017 Calendar Year Immunization Requirements for Children Entering Kindergarten, 7th Grade or Children Entering a New School District in Grades 1-12

Dear Superintendents of Local and Intermediate School Districts; Principals of all Public, Private and Parochial Schools; and Public School Academy Directors:

Immunizations are one of the most effective measures in protecting children from harmful diseases and death. The Michigan Public Health Code requires all children who attend school in Michigan to have an up-to-date immunization history or a valid waiver on file per Administrative Rules and report their immunization status to their jurisdictional local health department. A child who fails to meet these immunization requirements shall not be admitted into the school.

It is the responsibility of the parent(s)/guardian(s) to ensure that their child has received all required vaccine doses upon school entry.

Since 1978, Michigan law requires that each student possess a certificate of immunization at the time of registration (or no later than the first day of school) for entry into kindergarten, 7th grade, or into a new school district involving grades 1-12.

There are three circumstances in which a required vaccine may be waived or delayed:

1. The child has received at least one dose of required vaccine(s) and the next dose(s) are not yet due. These children are considered to be in a "provisional" status. Schools are required to follow-up with these students to ensure subsequent doses of vaccine are received and are complete for all required vaccines;

2. The child has a medical contraindication to a vaccine, in this case a Medical Contraindication Form is required to be completed and signed by the child's primary care physician. The form shall state the medical contraindication(s), the vaccine(s) involved, and the time period during which the child is precluded from receiving the vaccine(s);

3. A parent or guardian holds a religious or philosophical ("other") belief which preclude receipt of vaccination(s). These are nonmedical exemptions and require certification at the local health department.

To meet admission requirements, it is the parent(s)/legal guardian(s) responsibility to bring the original signed current 2017 Nonmedical Waiver Form to your school for entry into the Michigan Care Improvement Registry (MCIR)/School Immunization Reporting System (SIRS).

A student who fails to meet school immunization requirements shall not be admitted to school:

- Students excused, on “Pupil Membership Count Day” may still be counted for purposes of the State School Aid, if they physically return to school within 30 calendar days from the date of “Pupil Membership Count Day.”
Students excluded from school entry due to an incomplete immunization record may be granted an excused absence by the Michigan Department of Education if permitted by the local school district Board of Education.

The MCIR/SIRS system must be utilized to meet immunization compliancy with school immunization reporting. This system pulls immunization records contained within the MCIR for students entered into the MCIR/SIRS school roster. All students in both kindergarten and 7th grade need to be placed on the roster as well as any newly enrolled student to the district. The November 1, 2017 report should include all newly enrolled students from January 1, 2017 through September 30, 2017. The February 1, 2018 report should include the November roster, plus any students starting from October 1, 2017 through December 31, 2017. The local health department will monitor the progress, timeliness and accuracy of your school(s) immunization compliance reporting.

For those individual programs without internet access, please contact your local health department for approval and guidance to report, using the handwritten IP-100/101 Immunization Reporting Form.

Proper maintenance of up-to-date immunization records are critical in the event of an outbreak of vaccine preventable disease, or if an audit is conducted by your local health department or the Michigan Department of Health and Human Services.

Copies of the Nonmedical Waiver and Medical Contraindication Forms must be submitted no later than November 1, 2017 and February 1, 2018 to the jurisdictional local health department. Parent(s)/guardian(s) are required to receive education on the benefits of vaccination and the risks of disease before obtaining the signed certified Nonmedical Waiver Form from their local health department.

Health professionals shall address concerns and/or questions, and then sign the current State of Michigan 2017 Nonmedical Waiver Form. Parents seeking a nonmedical exemption must contact the local health department to arrange for the educational session.

The State School Aid Act (PA 94 of 1979) Section 388.1767, requires that school districts shall submit an immunization report of the completed, appropriately waived and provisional immunization by November 1, 2017, and meet a 90% compliancy of the entering students, as listed above. School districts which are not in compliance will be subject to 5% of their state school aid funds being withheld. By February 1, 2018, a minimum of 95% of entering students, as listed above, shall submit a completed, appropriately waived and provisional immunization record to avoid the implementation of another 5% withholding. Submission of immunization records prior to the November and February deadlines will allow your local health department to review the submitted information and assist with data entry corrections.

The Revised School Code, Section 380.1177a* also requires the Michigan Department of Education, in cooperation with the Michigan Department of Health and Human Services, to develop information for Michigan schools to address notification of families with children enrolled in grades 6, 9, and 12, about the risk and prevention of Meningococcal Meningitis and Human Papillomavirus Diseases.

Information regarding the symptoms of vaccine-preventable diseases, how they spread, risk factors, risk associated with vaccination against these diseases, and where to obtain the vaccines are available in this packet. These materials should be distributed to all parent(s)/guardian(s) about the importance of getting their children and adolescents vaccinated with all recommended vaccines. Feel free to print
copies of these materials and include them in any new parent or orientation packets. Please disseminate
this information in school newsletters, and any other social media source utilized in your school districts.

Parent handouts can be found at: http://www.aimtoolkit.org/docs/TeenVaccinesInfoForParents.pdf

Information about influenza vaccine is included in this packet and should be shared within the school
community. Online access to these notification materials is available at www.michigan.gov/immunize or
www.michigan.gov/mde.

A summary of requirements and supporting information is included in this packet and is also posted
online at www.mcir.org under the School/Childcare section. Please review this important information to
assist you with the completion of the immunization reporting of your students. A request for additional
informational materials should be directed to your local health department.

To assist in completion of immunization reports, a summary of the immunization requirements for new
school entrants, along with supporting information, are available online at www.mcir.org under the
School/Childcare link. To obtain technical assistance or to enroll as a MCIR/SIRS user, please contact
the MCIR Help Desk at 1-888-243-6652.

Thank you for your continued support and cooperation in ensuring that Michigan’s children are properly
immunized to avoid the ongoing threat of communicability and illness associated with vaccine
preventable diseases.

Sincerely,

Nick Lyon
Director
Department of Health and Human Services

Brian J. Whiston
State Superintendent
Department of Education

Enclosures

c: Local Health Departments

The following materials can be found on www.MCIR.org and should be reviewed.

**Childcare packet:**
- MCIR/SIRS Information Sheet
- Childcare Cover Letter
- Vaccines Required for Childcare and Preschools in Michigan
- Parents Handout - Vaccines Required for Childcare and Preschools in Michigan
- Influenza Information for Childcare Centers
- Waiver Key Point Flyer
- Waiver FAQ for Parents
- Vaccine Terminology

**School packet:**
- MCIR/SIRS Information Sheet
- School Cover Letter
- Information for Parents – Teen Vaccines Papillomavirus, Meningococcal & Vaccines for Pre-Teens and Teens
- Influenza Information for Schools
- Vision Screening Information
- Vaccines Required for School Entry in Michigan
- Parents Handout - Vaccines Required for School Entry in Michigan
- Waiver Key Point Flyer
- Waiver FAQ for Parents
- Vaccine Terminology

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**Timeline for Reporting on MCIR/SIRS**

**January – December:**
Build your roster, making sure that appropriate reporting period and grade is marked for each student. Use current grade, or roundup for kindergarten in the Spring and Summer of 2017 — all students will be advanced automatically on August 1st.

**October 1st:**
Childcare closes the report period by going into IP Status and clicking on the “close period” button on October 2nd. (The button will not be highlighted and you will not be able to close the period if you are not at 90% compliancy.) Continue to update immunization records until you reach at least 90% compliancy.

**November 1st:**
School closes the report period by going into IP Status and clicking on the close period button. (The button will not be highlighted and you will not be able to close the period if you have not obtained at least 90% compliancy). Complete vision report for all kindergarten students. Continue to update immunization records until you reach at least 100% compliancy.

**February 1st:**
School closes the report period by going into IP Status and clicking on the “close period” button. (The button will not be highlighted and you will not be able to close the period if you are not at 95% compliancy). Continue to update immunization records until you reach at least 100% compliancy. Contact your local health department or the help desk if you have any questions about reporting.
### Meningococcal Vaccines (MenACWY, MenB)

Meningococcal vaccines protect against meningitis, which affects the brain and spinal cord. If your child contracts meningitis, it can cause brain damage, severe disabilities or death.

Common symptoms include a fever, rash, headache, or stiff neck.

It is spread through close contact with an infected person, such as coughing, kissing, and sharing food or drinks. This disease is easily spread.

MenACWY is given at 11-12 years of age with a second dose at 16. MenB is given at 16-18 years of age in a series of doses. If your child has not received these vaccines, talk to their health care provider today.

### Adolescent Catch-Up

Many vaccines are given during childhood to give life-long protection against diseases. If your child has not received all of the below vaccines, it is not too late!

- **3 doses of hepatitis B vaccine (Hep B)**
- **2 doses of hepatitis A vaccine (Hep A)**
- **2 doses of measles, mumps, rubella vaccine (MMR)**
- **2 doses of varicella (chickenpox) vaccine**

At least 3 doses of polio vaccine (IPV or OPV)

Flu vaccine every year

These vaccines are important, especially if your child plans to travel. All doses are needed for full protection.

### Tetanus, Diphtheria, Pertussis (Tdap)

Tdap vaccine protects your child against pertussis (whooping cough), diphtheria, and tetanus.

Tetanus causes painful tightening of the muscles and is very serious. It is found in soil and enters the body through a cut or wound.

Diphtheria can make it hard to breath or move body parts. It is spread by coughing or sneezing.

Pertussis can cause severe coughing and choking, making it difficult for your child to breathe or eat. It is spread by coughing, sneezing or close contact with an infected person.

Tdap vaccine is usually given at the 11-12 years of age. However, anyone who has not had Tdap vaccine needs a dose.

### Human Papillomavirus (HPV)

HPV vaccine protects against cervical cancer in women and genital warts in men and women. It also protects against anal, penile, vaginal and vulvar cancers.

HPV is a common infection transmitted by skin-to-skin contact. Even if your child does not have sexual intercourse, they can still get HPV. HPV infection often has no symptoms so a person could have it and not know.

The best time to get HPV vaccine is at 11-12 years of age, well before sexual activity starts. If the series is started before age 15 years, only 2 doses are needed. Individuals can be vaccinated through 26 years of age.

This vaccine is safe, effective, and prevents several types of cancers.
Is flu vaccine recommended for children in schools?
Yes. The Centers for Disease Control and Prevention (CDC) and the Michigan Department of Health and Human Services (MDHHS) recommend that all children 6 months of age and older receive flu vaccine every year to help them stay healthy.

DID YOU KNOW? The flu vaccine is the best defense against the flu and the best way to protect children and adults from getting the flu.

How can students and staff be protected from the flu?
You can protect students and staff by getting a flu vaccine and encouraging others in contact with children to get vaccinated—parents, teachers, secretaries, and other support staff. The flu vaccine protects against the flu by creating antibodies that fight against the flu virus.

DID YOU KNOW? Every year there are Michigan schools that close because too many students are absent with the flu. Stop the spread by getting a flu vaccine!

What is influenza or “the flu”?
The flu is an infection of the nose, throat, and lungs that is caused by flu viruses. There are many different flu viruses that can make people sick. The flu spreads easily through coughing and sneezing. Many people get the flu every year. Some people can get very sick, and some even die.

What are the symptoms of the flu?
People who have the flu often get sick very fast with a high fever, headache, muscle aches, dry cough, and sore throat. Some people who have the flu have NO symptoms at all, but they can still spread the flu to others.

What kinds of flu vaccine can students get?
School-aged children can get the flu shot. The nasal spray flu vaccine was not recommended for the 2016-2017 flu season because it did not do a good job of protecting against the flu in previous seasons, in comparison to the flu shot.

DID YOU KNOW? The decision to no longer use FluMist® is an example of using science to help improve the public’s health.

How often should a flu vaccine be given?
Flu vaccines change from year to year, so children and adults need to get a flu vaccine every year. Some children may need two doses, which a healthcare provider can help determine. The vaccine can be given as soon as it becomes available (as early as August).

DID YOU KNOW? It is safer to get the flu vaccine than it is to get the flu. Don’t underestimate the health risks from flu.
MEMORANDUM
Michigan Department of Health and Human Services

DATE:   February 10, 2017

TO:   Principals and Superintendents of all Michigan Public, Private and Parochial Schools

SUBJECT:   VISION SCREENING and REPORTING FOR KINDERGARTEN

The screening of children’s vision prior to the start of Kindergarten is required in Michigan. Several laws mandate the screening, confirmation of screening, and the reporting of these screenings.

Public Health Code Act 368 of 1978, Section 9307 states that “a parent, guardian, or person in loco parentis applying to have a child registered for the first time in a kindergarten or first grade in a school in this state shall present to school officials, at the time of registration or not later than the first day of school, a certificate of hearing and vision testing or screening or statements of exception under Section 9311”.

The Revised School Code (Act 451 of 1976, section 380.1177) requires that parents of children entering kindergarten present a statement to school officials confirming that they have received the Michigan Department of Health and Human Services Vision Screening OR a statement, signed by a licensed eye care practitioner (optometrist or ophthalmologist) or medical/osteopathic physician, indicating that a child’s eyes have been examined at least once after age three and before initial school entry may also be presented. School officials are required to enter vision screening data into the MCIR/SIRS system for all kindergarten or developmental kindergarten new entrants by November 1 of each year.
Please note the following points regarding Kindergarten Vision Screening in Michigan:

- Parents are responsible for getting their child’s vision screened prior to the first day of Kindergarten.
- Schools facilitate the screenings by communicating the requirement to parents.
- Local public health departments offer free screenings for all children in their service area.
- Schools can facilitate the screenings by including the local health department screening staff during Round-Ups or registration days, if available.
- Screening statements from the local health department, a licensed eye care practitioner (optometrist or ophthalmologist) or medical/osteopathic physician are acceptable.
- Screenings are available at no charge to families through your local health department.
- Screenings should take place no more than 6 months prior to the start of school.
- Students should not be denied access to school because the parent did not have the screening completed. Parents should have the screening completed within the first week of school.
- School officials enter the screenings onto the immunization data entry screen in the MCIR no later than November 1 of each school year.
- November 1 is the deadline to report that the screenings have been completed prior to the first day of school.
- A separate report to MDHHS is no longer required.
- Schools and screening sites should ensure the following when scheduling their screening day:
  o Have available a quiet room with table and appropriate chairs for either preschool or school-age screening.
  o Have available a room with adequate space, outlets, air flow, etc.
  o Screenings should never be conducted in bathrooms or rooms where other events are taking place or where unsafe conditions exist.
  o Observers (including parents) must not communicate with children during the screening to prevent leading responses which can result in false negatives.
  o Failure to ensure the above necessities will result in being asked to reschedule the screening date.

If you, or your support personnel responsible for entering vision screening data, have questions regarding this requirement, please contact your local health department’s Vision Screening Program or Dr. Rachel Schumann, Vision Program Consultant for the Michigan Department of Health and Human Services, at 517-335-6596.

On behalf of the children of Michigan, many thanks for helping ensure that all Michigan children have good vision as they begin their journey to success in learning and life.
**SCHOOLS**

VACCINES REQUIRED FOR SCHOOL ENTRY IN MICHIGAN

Whenever children are brought into group settings, there is a chance for diseases to spread. Students must follow state vaccine laws in order to attend school. These laws are the minimum standard to help prevent disease outbreaks in school settings. The best way to protect students in your care from other serious diseases is to promote the recommended vaccination schedule at www.cdc.gov/vaccines. Encourage parents to follow CDC’s recommended schedule; by doing so, school requirements will be met.

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<table>
<thead>
<tr>
<th>Vaccines Required for School Entry in Michigan</th>
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</tr>
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<td></td>
</tr>
<tr>
<td>Measles, Mumps, Rubella (MMR)*</td>
<td>2 doses at or after 12 months of age</td>
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<td>3 doses</td>
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</tr>
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<td>None</td>
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During disease outbreaks, incompletely vaccinated students may be excluded from school. Parents and guardians choosing to decline vaccines must obtain a certified non-medical waiver from a local health department. Read more about waivers at www.michigan.gov/immunize.

*If the student has not received these vaccines, documented immunity is required. All doses of vaccines must be valid (correct spacing and ages) for school entry purposes.

Updated March 1, 2017
**PARENTS**

**VACCINES REQUIRED FOR SCHOOL ENTRY IN MICHIGAN**

Whenever children are brought into group settings, there is a chance for diseases to spread. Children must follow state vaccine laws in order to attend school. These laws are the minimum standard to help prevent disease outbreaks in school settings. The best way to protect your child from other serious diseases is to follow the recommended vaccination schedule at www.cdc.gov/vaccines. Talk to your healthcare provider to make sure your child is fully protected.

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During disease outbreaks, incompletely vaccinated students may be excluded from school. Parents and guardians choosing to decline vaccines must obtain a certified non-medical waiver from a local health department. Read more about waivers at www.michigan.gov/imunize.

*If the child has not received these vaccines, documented immunity is required. All doses of vaccines must be valid (correct spacing and ages) for school entry purposes.

*Updated March 1, 2017*
Dear Parent/Guardian:

Key Points Related to Claiming a Nonmedical Immunization Waiver for Children Attending Michigan Schools and Licensed Child-Care Centers

In early 2015, Michigan instituted an administrative rule change on nonmedical waivers for childhood immunizations. Parents/guardians seeking to obtain a nonmedical immunization waiver on behalf of their child/children who are enrolled in school or licensed child-care programs are required to attend an educational session where they are provided with information about vaccine-preventable diseases and vaccinations.

- Michigan has one of the highest immunization waiver rates in the country, with select counties reporting waiver rates up to 12.5% (that is, more than 12% of school-age students in these places have not received all vaccinations) and individual school buildings reporting even higher waiver rates

**Key Points**

- The rule applies to parents seeking an immunization waiver on behalf of their children enrolled in a public or private:
  - Licensed childcare, preschool, and Head Start programs
  - Kindergarten, 7th grade, and any newly enrolled student into the school district
- This rule preserves your ability to obtain a nonmedical waiver.
- Nonmedical waivers (religious or philosophical/other objections) are available at your county health department and cannot be found at schools/child-care centers.
- Parents/Guardians are required to follow these steps when seeking a nonmedical waiver:
  1. Contact your county health department for an appointment to speak with a health educator.
  2. During the visit, immunization-related questions and concerns of the parents/guardians can be brought up for discussion with the county health department staff. The staff will present evidence-based information regarding the risks of vaccine-preventable diseases and the benefits/risks (mostly moderate side-effects) of vaccination.
  3. If, at the end of the visit, you request a nonmedical waiver for your child, you will receive a copy of the current, certified (stamped and signed) State of Michigan Nonmedical Waiver Form.
     - Schools/childcare centers will only accept the current, official State of Michigan form (Current date: January 1, 2017).
     - Forms cannot be altered (such as crossing information out).
  4. Take current, certified waiver form to your child’s school or childcare center.
- If your child has a medical reason (that is, a true contraindication or precaution) for not receiving a vaccine, a physician must sign the State of Michigan Medical Contraindication Form, available at your doctor’s office (not the county health department).
- Based on the public health code, a child without either an up-to-date immunization record, a certified nonmedical waiver form, or a physician-signed medical waiver form can be excluded from school/childcare.

For more information, please visit [www.michigan.gov/immunize](http://www.michigan.gov/immunize) > then click on *Local Health Departments* > then click on *Immunization Waiver Information*. On this website, there is a link to a list of all the county health departments, along with their addresses and phone numbers.

April 12, 2017
Nonmedical Waiver Rule for Childhood Immunizations in School and Licensed Childcare: Information for Parents/Guardians

In early 2015, Michigan instituted an administrative rule change on nonmedical waivers for childhood immunizations. Parents/guardians seeking to obtain a nonmedical immunization waiver on behalf of their child/children who are enrolled in school or licensed child-care programs are required to attend an educational session, where they are provided with information about vaccine-preventable diseases and vaccinations.

**Frequently Asked Questions:**

**Why is this rule important?**

Michigan has one of the highest immunization waiver rates in the country, with some counties reporting waiver rates up to 12.5% (that is, more than 12% of school-age students in these places have not received all vaccinations). In addition, individual school buildings have reported even higher waiver rates. High nonmedical waiver rates can leave communities susceptible to the entry of diseases such as measles, chickenpox, and pertussis (whooping cough) by undermining community or “herd” immunity that protects vulnerable children (for example, children who cannot be vaccinated for medical reasons and children with compromised immune systems). Herd immunity can also slow the spread of disease if a high proportion of individuals are immune to the disease in a community. Immunization is one of the most effective ways to protect children from harmful diseases and even death.

**How does this rule affect parents/guardians?**

Parents/guardians seeking to claim a nonmedical waiver are required to participate in an immunization-focused discussion with county health department staff. During the discussion, immunization-related questions and concerns of parents/guardians can be brought up for discussion with the county health department staff. The staff will present evidence-based information regarding the risks of vaccine-preventable diseases and the benefits/risks (mostly moderate side-effects) of vaccination. This rule preserves the ability of parents/guardians to obtain a nonmedical waiver following completion of this required educational session.

**What is a nonmedical immunization waiver?**

A nonmedical waiver is a written statement by parents/guardians describing their religious or philosophical (other) objections to specific vaccine/vaccines, on a form provided by the county health department.

**Who does this rule apply to?**

The rule applies to parents seeking an immunization waiver on behalf of their children who are enrolling in a public or private:

- Licensed child-care, preschool, and Head Start programs
- Kindergarten, 7th grade, and any newly enrolled student into the school district
What is considered a certified nonmedical waiver?
A certified nonmedical waiver is the State of Michigan Immunization Waiver Form with a revision date of January 1, 2017, displaying the county health department stamp and signatures of the authorizing agent completing the immunization education and the parent/guardian.

Can a parent/guardian obtain a certified nonmedical waiver form from a school, childcare center, or healthcare provider?
No, a certified nonmedical waiver can only be obtained at a county health department.

How does a parent/guardian obtain a certified nonmedical waiver?
Parents/guardians are required to contact their county health department to receive immunization waiver education and a current certified State of Michigan Immunization Waiver Form.

What if my child has a medical contraindication to a vaccine?
This rule does not change the existing process for medical contraindications to vaccination. If your child has a medical reason (that is, a true contraindication or precaution) for not receiving a vaccine, a physician must sign the State of Michigan Medical Contraindication Form (which is available at your doctor’s office, and not the county health department). This form must be completed and signed by a physician before it can be submitted to a school or child-care center.

What documentation are parents/guardians required to submit to their school or child-care center?
1. Parents/guardians are required to submit one of the following documents:
   - A complete immunization record or
   - A physician-signed State of Michigan Medical Contraindication Form or
   - A current, certified State of Michigan Nonmedical Immunization Waiver Form

   If one of the above forms is not submitted, then students can be excluded from school or childcare based on the public health code, unless students are in a provisional category. (Provisional is defined as a child who has received 1 or more doses of vaccine, however they need to wait the recommended time to receive the next dose)

2. Waiver forms that are altered in any fashion (for example: information on the form is crossed out) cannot be accepted by schools/child-care programs.

Where can I find more information?
For more information, please visit www.michigan.gov/immunize > then click on Local Health Departments > then click on Immunization Waiver Information.
   - The above website provides a complete list of county health departments in Michigan, including phone numbers and addresses.
## Vaccine Terminology

(These vaccines CAN be counted towards school and/or child care entry)

<table>
<thead>
<tr>
<th>CDC Abbreviation</th>
<th>Vaccine</th>
<th>Common Names, Synonyms, Brand Names</th>
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<tbody>
<tr>
<td>DT</td>
<td>Diphtheria &amp; Tetanus</td>
<td>DT pediatric</td>
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<tr>
<td>DTP*</td>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>Tri-Immunol*, DTwP*</td>
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<tr>
<td>DTP-Hib*</td>
<td>Diphtheria, Tetanus, Pertussis &amp; <em>Haemophilus influenzae</em> type b</td>
<td>Tetramune*, DTP/ActHib*</td>
</tr>
<tr>
<td>DTap</td>
<td>Diphtheria, Tetanus, acellular Pertussis</td>
<td>Daptacel®, Infanrix®, Tripedia®, Acel-Imune®, Certiva*</td>
</tr>
<tr>
<td>DTap-HepB-IPV</td>
<td>Diphtheria, Tetanus, acellular Pertussis, Hepatitis B &amp; Inactivated Polio Vaccine</td>
<td>Pediarix®</td>
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<td>DTap-IPV/Hib</td>
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<td>Pentacel®</td>
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<tr>
<td>DTap-IPV</td>
<td>Diphtheria, Tetanus, acellular Pertussis &amp; Inactivated Polio Vaccine</td>
<td>Kinrix®, Quadracel®</td>
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<tr>
<td>Td</td>
<td>Tetanus, diphtheria</td>
<td>Td (adolescent/adult), Tenivac®, Decavac*</td>
</tr>
<tr>
<td>Tdap</td>
<td>Tetanus, diphtheria, acellular pertussis</td>
<td>Adacel®, Boostrix®</td>
</tr>
<tr>
<td>IPV</td>
<td>Inactivated Polio Vaccine</td>
<td>IPOL®, elIPV, IPV, Salk Inactivated, Poliovax*</td>
</tr>
<tr>
<td>OPV*</td>
<td>Oral Polio Vaccine</td>
<td>Trivalent Oral Polio Vaccine* (tOPV*), Bivalent Oral Polio Vaccine* (bOPV*), Monovalent Oral Polio Vaccine* (mOPV*), Sabin*, Orimune*</td>
</tr>
<tr>
<td>HepA-HepB†</td>
<td>Hepatitis A &amp; Hepatitis B</td>
<td>Twinrix®†</td>
</tr>
<tr>
<td>HepB</td>
<td>Hepatitis B</td>
<td>Engerix-B®, Recombivax HB®, HBV, HB vaccine</td>
</tr>
<tr>
<td>Hib-HepB*</td>
<td><em>Haemophilus influenzae</em> type b &amp; Hepatitis B</td>
<td>Comvax®</td>
</tr>
<tr>
<td>Hib</td>
<td><em>Haemophilus influenzae</em> type b</td>
<td>ActHIB®, Hiberix®, PedvaxHIB®, HibTITER®, ProHIBit®, OmniHIB®</td>
</tr>
<tr>
<td>Hib-MenCY††</td>
<td><em>Haemophilus influenzae</em> type b &amp; Meningococcal Conjugate serotypes C and Y</td>
<td>MenHibrix††, HibMen CY-TT††</td>
</tr>
<tr>
<td>PCV7*</td>
<td>Pneumococcal Conjugate Vaccine, 7-valent*</td>
<td>Prevnar7*</td>
</tr>
<tr>
<td>PCV13*</td>
<td>Pneumococcal Conjugate Vaccine, 13-valent</td>
<td>Prevnar13*</td>
</tr>
<tr>
<td>Measles*</td>
<td>Measles (Rubeola)</td>
<td>Attenuvax®</td>
</tr>
<tr>
<td>Mumps*</td>
<td>Mumps</td>
<td>MumpsVax®</td>
</tr>
<tr>
<td>Rubella*</td>
<td>Rubella (German Measles)</td>
<td>Meruvax®, Meruvax II*</td>
</tr>
<tr>
<td>Measles-Rubella*</td>
<td>Measles-Rubella</td>
<td>M-R-VAX II*</td>
</tr>
<tr>
<td>Mumps-Rubella*</td>
<td>Mumps-Rubella</td>
<td>Biavax II*</td>
</tr>
<tr>
<td>MMR</td>
<td>Measles, Mumps, Rubella</td>
<td>MMR-II®, MMR</td>
</tr>
<tr>
<td>MMRV</td>
<td>Measles, Mumps, Rubella &amp; Varicella</td>
<td>ProQuad®</td>
</tr>
<tr>
<td>VAR</td>
<td>Varicella</td>
<td>Varivax®, Chickenpox vaccine</td>
</tr>
<tr>
<td>MenACWY or MCV4</td>
<td>Meningococcal Conjugate Vaccine (A, C, W, Y)</td>
<td>Menactra® (MenACWY-D), Menveo® (MenACWY-CRM), Nimenrix®</td>
</tr>
<tr>
<td>MPSV4</td>
<td>Meningococcal Polysaccharide Vaccine</td>
<td>Menomune®</td>
</tr>
</tbody>
</table>

The vaccines listed in the above table are those that can be counted towards a child’s school-required and/or childcare-required vaccinations. Please see additional footnotes on page 2.

* Vaccines that are not available in the U.S. but may count towards a child’s school-required vaccinations.
† Twinrix® contains Hepatitis A and B. The Hepatitis B component of this vaccine can count towards a child’s required Hepatitis B series for school entry.
‡ Hib-MenCY, or MenHibrix®, contains Hib and Meningococcal Conjugate serotypes C and Y. The MenCY components of MenHibrix® do not count as the Meningococcal Conjugate (MenACWY) vaccine dose required for 7th grade students and transfer students 11 years and older.
# Additional Vaccines That May Be On Immunization Records

(这些 vaccines do NOT count towards school and child care entry)

<table>
<thead>
<tr>
<th>CDC Abbreviation</th>
<th>Vaccine</th>
<th>Common Names, Synonyms, Brand Names</th>
</tr>
</thead>
<tbody>
<tr>
<td>HepA</td>
<td>Hepatitis A</td>
<td>Havrix®, Vaqta®, HAV</td>
</tr>
<tr>
<td>2vHPV</td>
<td>Human Papillomavirus Vaccine (bivalent)</td>
<td>Cervarix, HPV2</td>
</tr>
<tr>
<td>4vHPV</td>
<td>Human Papillomavirus Vaccine (quadrivalent)</td>
<td>Gardasil, HPV4</td>
</tr>
<tr>
<td>9vHPV</td>
<td>Human Papillomavirus Vaccine (9-valent)</td>
<td>Gardasil 9®, HPV9</td>
</tr>
<tr>
<td>IIV</td>
<td>Inactivated Influenza Vaccine</td>
<td>Fluogen, FluShield</td>
</tr>
<tr>
<td>IIV3 (TIV)</td>
<td>Trivalent Inactivated Influenza Options</td>
<td>Afluria®, Fluirin®</td>
</tr>
<tr>
<td>RIV</td>
<td>Recombinant Influenza Vaccine</td>
<td>Flublok®</td>
</tr>
<tr>
<td>IIV4 (QIV)</td>
<td>Quadrivalent Inactivated Influenza Options</td>
<td>Fluarix®, FluLaval®, Fluzone®, Afluria®</td>
</tr>
<tr>
<td>ccIIV4</td>
<td>Cell Culture Quadrivalent Influenza Vaccine</td>
<td>Flucelvax®</td>
</tr>
<tr>
<td>RIV4</td>
<td>Recombinant Quadrivalent Influenza Vaccine</td>
<td>Flublok® Quadrivalent</td>
</tr>
<tr>
<td>IIV4 ID</td>
<td>Intradermal Inactivated Influenza Vaccine</td>
<td>Fluzone® Intradermal</td>
</tr>
<tr>
<td>LAIV4</td>
<td>Live, Attenuated Influenza Vaccine (nasal spray)</td>
<td>FluMist®</td>
</tr>
<tr>
<td>MenB</td>
<td>Meningococcal Serogroup B</td>
<td>Trumenba® (MenB-FHbp), Bexsero® (MenB-4C)</td>
</tr>
<tr>
<td>MenC</td>
<td>Meningococcal Serogroup C</td>
<td>Meningitec, Meningtec, Meninvact, Menjugate, Neis Vac-C</td>
</tr>
<tr>
<td>PPV, PPSV23</td>
<td>Pneumococcal Polysaccharide Vaccine, 23-valent</td>
<td>PNU-Immune 23, Pneumovax®</td>
</tr>
<tr>
<td>RV5, RV1</td>
<td>Rotavirus Vaccine</td>
<td>RotaTeq® (RV5), Rotarix® (RV1)</td>
</tr>
<tr>
<td>TT</td>
<td>Tetanus Toxoid</td>
<td>Tetanus toxoid</td>
</tr>
</tbody>
</table>

The vaccines listed in the above table are those that **are not required** for school or childcare entry in Michigan, however, you may see these listed on a child’s immunization record. Refer to the local health department to get all vaccine doses entered into the Michigan Care Improvement Registry (MCIR).

For more information on which vaccines are required for school entry in Michigan, please visit www.michigan.gov/documents/mdhhs/School_Req_for_Schools_553548_7.pdf.

For more information on which vaccines are required for childcare or preschool entry in Michigan, please visit www.michigan.gov/documents/mdhhs/Child_Care_Reqs_ChildCares_553541_7.pdf.

A complete list of vaccines that are no longer available in the U.S. can be found in CDC’s *Epidemiology and Prevention of Vaccine-Preventable Diseases* at www.cdc.gov/vaccines/pubs/pinkbook/appendix/index.html, under Appendix B.