



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ROBERT GORDON
DIRECTOR

MEMORANDUM

DATE: August 29, 2019

TO: Local and Intermediate School District Superintendents
Public School Academy Directors
Local Education Agency Principals
Nonpublic School Administrators

FROM: Robert Gordon 
Director, Michigan Department of Health and Human Services
Michael F. Rice, Ph.D. 
State Superintendent, Michigan Department of Education

SUBJECT: 2019 Immunization Requirements for Children Entering Kindergarten and 7th Grade, or Enrolling in a New School District in Grades 1-12

Please share this important information with all staff who will be working with child immunization records at your facility.

Immunizations are one of the most effective and scientifically proven ways to protect children from harmful diseases and death. Since 1978, Michigan law has required that each student have an up-to-date certificate of immunization at the time of registration (or no later than the first day of school) for entry into kindergarten and 7th grade, and for enrollment into a new school district, grades 1-12.

In order for a child to attend school in Michigan, the Michigan Public Health Code requires parent(s)/legal guardian(s) to have one of the following on file with the school:

1. A valid, current immunization record.
 - i. [Note: *Provisional Status Vaccines*. In the event the child has received at least one dose of a required vaccine and the next dose is not yet due, the school is required to follow up with the child to ensure s/he has received the required follow-up doses of the vaccine and are up-to-date for all other required vaccines.]
2. A medical doctor's (M.D./D.O.) signed State of Michigan 2019 Medical Contraindication Form, which states the medical contraindication(s), the vaccines involved, and the time period during which the child is not able to get the vaccines.

3. A current, certified State of Michigan 2019 Immunization Nonmedical Immunization Waiver Form required under Michigan Administrative Rules.
 - i. [Note: When a parent or legal guardian holds a religious or other objection that prevents a child from receiving vaccines, a 2019 Immunization Nonmedical Waiver Form is required to be completed, signed, and certified at the local health department. The local health department will provide education from a health professional on the benefits of vaccination and the risks of disease. Health professionals will address questions and concerns prior to signing the current State of Michigan 2019 Nonmedical Immunization Waiver Form.]

Any student who fails to submit the required immunization information shall not be admitted into the school.

This year, additional direction is being given to avoid confusion regarding information that may be added to Michigan Care Improvement Registry/School Information Reporting System (MCIR/SIRS), and the information that is subject to the federal Family Educational Rights and Privacy Act (FERPA). Immunization data added by health care providers are not subject to FERPA, and therefore are not part of an educational record.

Proper maintenance of up-to-date immunization records, including waivers, is critical and required to be on file for all students. The Michigan Department of Health and Human Services (MDHHS) or the local health department may conduct an audit in the event of an outbreak and/or cases of non-compliance.

The MCIR/SIRS system links immunization records contained within the MCIR for students entered on the MCIR/SIRS school roster. All enrolled students in kindergarten and 7th grade, as well as any students newly enrolled to a school district, can be placed on the roster to meet school immunization reporting requirements. Districts should contact their local health department for other means of school immunization reporting if MCIR/SIRS is not used.

Before entering any immunization data into MCIR/SIRS, including immunization waiver data, the school must have a valid FERPA consent form on file for the student. Once the FERPA consent form is signed and returned, data can be added to MCIR/SIRS in compliance with FERPA. Without consent, the school cannot enter immunization information into MCIR/SIRS. If a student is 18 years or older, s/he is considered an "eligible student" who may provide consent for disclosure of information from his/her education records. Please review the enclosed Frequently Asked Questions (FAQ) document regarding "FERPA No Consent." A template of the disclosure form and further guidance on immunization reporting can be found at www.mcir.org under School & Childcare, Reporting to the Health Department.

In the event that a FERPA consent form has not been received, or is not on file, for a student:

1. The "No FERPA" consent box in MCIR/SIRS must be checked.
2. Students may be added to rosters in order to view the provider-entered data, but then must be removed to avoid the student from being reported twice.

3. If the provider-entered data show that the student is complete in his/her school immunization requirements, the student can remain on the roster, since no additional immunization data will be added to MCIR/SIRS.
4. If there is no FERPA consent on file, and the provider-entered data indicate that the student has not completed the required school immunizations, immunization data should not be entered into MCIR/SIRS.

The immunization status for a "No Consent Student" must still be reported to the local health department using the "Immunization Reporting Form for Students with No FERPA Consent." To protect student privacy, this form should only contain aggregate non-identifiable information for students who do not have a consent on file. Those students being reported on this form should be removed from the student roster in MCIR/SIRS, so they are not reported twice. The completed "Immunization Reporting Form for Students with No FERPA Consent" form must be submitted to the local health department each November and February when the MCIR/SIRS report is completed.

To obtain technical assistance, or to enroll as a MCIR/SIRS user, districts may contact their local health department or the MCIR Help Desk at 1-888-243-6652. **Please see the enclosed handout, "Important School and Childcare Immunization Information and Resources," for additional guidance about school immunization reporting.**

Thank you for your continued support and cooperation to ensure Michigan's children are properly immunized to avoid the ongoing threat of illness associated with vaccine-preventable diseases.

Immunization guidance documents can be accessed at: <https://www.mcir.org/school-childcare/reporting-immunization-program-status-to-the-health-department/>

RG:jj

cc: Michigan Local Health Departments
Michigan Education Alliance

Important School and Childcare Immunization Information and Resources

Information regarding Local Health Departments (LHD):

- Contact information for LHDs can be found in the Michigan Association for Local Public Health (MALPH) resource directory at www.malph.org/directory

Guidance regarding students excused on “Pupil Membership Count Day” and students excluded from school entry:

- Students excused on “Pupil Membership Count Day” may still be counted for purposes of 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 (MDE), if permitted, by the local school district Board of Education.

Information about school immunization reporting dates:

- The **November 1, 2019** report includes all newly-enrolled students from **January 1, 2019 through September 30, 2019**.
- The **February 1, 2020** report includes the November roster, plus any students starting from **October 1, 2019 through December 31, 2019**.
- The LHD will monitor the progress, timeliness, and accuracy of your school(s) immunization compliance reporting.

Information regarding The State School Aid Act:

- The State School Aid Act (P.A. 94 of 1979) Section 388.1767 requires that school districts shall submit an immunization report of complete, appropriately waived, or with a provisional immunization record by November 1, 2019, and meet a 90 percent compliancy of the entering students, as listed above.
- School districts not in compliance will be subject to 5 percent of their State School Aid funds being withheld.
- By February 1, 2020, school districts shall submit an immunization report of complete, appropriately waived, or with a provisional immunization record, and meet a minimum of **95 percent** of the entering students, as listed above, to avoid the implementation of 5 percent withholding.
- Submission of immunization records prior to the November and February deadlines will allow your LHD time to review the submitted information and assist with data entry corrections.

Information regarding The Revised School Code:

- The Revised School Code, Section 380.1177(a)
- The Revised School Code, Act 451 of 1976, requires the MDE, in cooperation with the Michigan Department of Health and Human Services (MDHHS), 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 on teen vaccines:

- A teen vaccine information guide can be found at:
www.aimtoolkit.org/indiv-families/adolescents.php

Information regarding vaccine-preventable diseases that can be shared with parents or legal guardians:

- Materials about the importance of getting children and adolescents vaccinated with all recommended vaccines **should be** distributed to all parents/legal guardians in school newsletters and any other social media source utilized in your school districts.
- Handouts 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 within this school immunization packet.
- Information about influenza vaccine has also been included within this packet.
 - Influenza can cause serious illness, hospitalization, and death.
 - It is important to include influenza materials in any school newsletters, social media, or orientation packets.
- Online access to the materials referenced and within this packet are available at:
www.michigan.gov/immunize and www.mcir.org.

Information regarding the Child Care Organizations Act (1973 PA 116):

- Licensing Rules for Child Care Centers-BCAL PUB-08 (Effective 01/02/2014)
- R 400.8143 Children's Records
- Under section 9211 of 1978 PA 368, MCL 333.9211(2), immunizations shall be reported to the department of community health for all children enrolled using the method established by the department of health and human services by October 1 of each year

MCIR/SIRS REPORTING

Toll-free MCIR helpdesk number is: 1-888-243-6652

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 FAQ for Parents
- Vaccine Terminology

School packet:

- MCIR/SIRS Information Sheet
- School Cover Letter & Resources
- Information for Parents – Teen Vaccines Papillomavirus, Meningococcal & Vaccines for Pre-Teens and Teens
- Influenza Information for Schools
- FAQ for FERPA
- Consent Form for Disclosures
- Vision Screening Information
- Vaccines Required for School Entry in Michigan
- Parents Handout - Vaccines Required for School Entry in Michigan
- Waiver FAQ for Parents
- Vaccine Terminology

Timeline for MCIR/SIRS Reporting

January – December: Build your roster, assure that appropriate reporting period and grade is marked for each student. Use current grade, or roundup for kindergarten in the Spring and Summer of 2019 – all students will be advanced automatically on August 1st.

October: 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 90% compliancy.

February 1st: School closes the report period by going into IP Status and clicking on the “close **February 1st**” button. 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 95% compliancy. Contact your local health department or the help desk if you have any questions about reporting.

TEEN VACCINES

INFORMATION FOR PARENTS



M eningococcal V accines (MenACWY, MenB)	A dolescent C atch-Up	T etanus, Diphtheria, P ertussis (Tdap)	H uman P apillomavirus (HPV)
<p>Meningococcal vaccines protect against meningitis, which affects the brain and spinal cord.</p> <p>Meningitis is easily spread through close contact with an infected person, such as coughing, kissing, and sharing food or drinks. Initial symptoms include a fever, rash, headache, or stiff neck.</p> <p>Meningitis can cause brain damage, severe disabilities, or death.</p> <p>MenACWY vaccine is given at 11-12 years with a second dose at 16. MenB vaccine is given at 16-18 years in a series of doses.</p> <p>If your child has not received these vaccines, talk to their health care provider today.</p>	<p>If your child has not already received the vaccines below, it's not too late to get them protected against these diseases!</p> <p>3 doses of hepatitis B vaccine (HepB)</p> <p>2 doses of hepatitis A vaccine (HepA)</p> <p>2 doses of measles, mumps, rubella vaccine (MMR)</p> <p>2 doses of varicella (chickenpox) vaccine</p> <p>At least 3 doses of polio vaccine (IPV/OPV)</p> <p>Flu vaccine every year</p> <p>These vaccines are important, especially if your child plans to travel. All doses are needed for full protection.</p>	<p>Tdap vaccine protects your child against tetanus, diphtheria, and pertussis (whooping cough).</p> <p>Tetanus is serious and causes painful tightening of the muscles. It is found in soil and enters the body through a cut or wound.</p> <p>Diphtheria can make it hard to breathe or move body parts. It is spread by coughing or sneezing.</p> <p>Pertussis is spread by coughing, sneezing, or close contact with an infected person. It can cause severe coughing and choking, making it hard to breathe or eat.</p> <p>Tdap vaccine is usually given at 11-12 years. However, anyone who has not had Tdap vaccine needs a dose.</p>	<p>HPV vaccine protects against genital warts, cervical, oropharyngeal, vaginal, vulvar, penile, and anal cancers.</p> <p>HPV is a virus transmitted by skin-to-skin contact. Almost everyone will get an HPV infection in their lifetime. Many HPV infections have no symptoms, so a person may transmit the virus to others without knowing.</p> <p>The best time to get HPV vaccine is at 11-12 years. When started before the 15th birthday, most adolescents will only need 2 doses. People can get HPV vaccine through 26 years.</p> <p>HPV vaccine is safe, effective, and is cancer prevention.</p>

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability. MDE and MDHHS are required by law ([MCL 380.1177a](#)) to develop and make available to schools information on meningococcal and HPV vaccines. MDHHS is also required ([MCL 333.9205b](#)) to notify schools of the availability of HPV educational materials, and encourage schools to make them available to parents.

INFLUENZA:

Information for Schools on Influenza and Vaccines



Updated March 2019

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 way to protect children and adults from getting the flu. It also protects against complications if you do get the flu.**

How can students and staff be protected from the flu?

You can protect students and staff by getting your 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 different flu viruses.

➤ **DID YOU KNOW? Every year, schools in Michigan close because too many students are out sick 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 by 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?

Both the flu shot and nasal spray flu vaccine will be available for school-aged children to get.

➤ **DID YOU KNOW? The decision to once again recommend FluMist® is an example of using science and data 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 to be protected. A healthcare provider can help determine if a child needs one or two doses of flu vaccine. 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!**

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Spanish ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 517-335-8159 (TTY 711).

Arabic ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 517-335-8159 (رقم هاتف الصم والبكم: 711).



“FERPA No Consent” Checkbox in MCIR/SIRS and Forms

Frequently Asked Questions: Information for Schools



Why is this important?

The federal Family Educational Rights and Privacy Act (FERPA) protects the release of a student’s personal data. Any student’s vaccine and/or waiver status is protected by FERPA, including entry of such data by school personnel in the Michigan Care Improvement Registry (MCIR) under the School Immunization Reporting System (SIRS). Parental consent must be obtained before a school can enter a student’s personally identifiable information (PII) and immunization data into MCIR/SIRS (i.e., vaccine and/or waiver data provided by a parent/guardian and entered by a school in MCIR/SIRS). An **unchecked FERPA box** in MCIR/SIRS indicates parent/guardian permission to enter PII and vaccine and/or waiver data in MCIR/SIRS for sharing with local health departments (LHDs). It is anticipated that most parents will provide permission. School data in MCIR/SIRS will not be visible in MCIR to the Health Care Provider (HCP). Vaccine data entered by HCPs are not affected by FERPA and can be viewed by schools, Local Health Departments (LHDs), and other HCPs.

Who does this apply to?

This applies to parents/guardians of children who are enrolling in a public or private school:

- Kindergarten, 7th grade, and any newly enrolled student into the school district.
- School personnel must send the form, “Consent for Disclosure of Immunization Information to Local and State Health Departments,” to these students’ homes for parent/guardian signature and then collect the signed forms.
- Parents or guardians who give permission to share a student’s immunization record will have an **unchecked FERPA No Consent box**. This indicates that a parent or guardian has provided consent for schools to enter PII and vaccination data into MCIR/SIRS to be shared with the State and LHDs.
- FERPA is an active consent – or opt in - process. This means schools do not need to collect a document that states the parent does not want to share PII and immunization information with the State or LHD. If a consent form is not collected, the school will need to check the “FERPA No Consent” box in MCIR/SIRS, and the immunization information will need to be shared with LHDs using the “MDHHS Immunization Reporting Form for Students with No FERPA Consent”.

[For more information, refer to: www.mcir.org/school-childcare/reporting-immunization-program-status-to-the-health-department/.](http://www.mcir.org/school-childcare/reporting-immunization-program-status-to-the-health-department/)

Does the “Consent for Disclosure of Immunization Information to Local and State Health Departments” form need to be redone each year?

After initial submission to the school, there is no need to complete this form every year. However, this form needs to stay with the student’s file. For example, when a child moves from elementary school to middle school, the middle school will need to have that form in the student’s file.

“FERPA No Consent” Checkbox in MCIR/SIRS and Forms

Frequently Asked Questions: Information for Schools

Does this replace the waiver document?

No, parents/guardians seeking to claim a nonmedical waiver are still required to participate in an immunization-focused discussion with LHD staff. During the discussion, parents/guardians can bring up any immunization-related questions and concerns they may have. The staff will present evidence-based information regarding the risks of vaccine-preventable diseases and the benefits/potential risks (risks consisting mostly of moderate side effects) of vaccination. This rule preserves the ability to obtain a nonmedical waiver following the completion of the required educational session.

What if school personnel fail to receive from a parent/guardian the signed consent form?

When a parent/guardian does not give permission for the school to share PII and immunization data in MCIR/SIRS, the MCIR/SIRS “FERPA No Consent” checkbox should be utilized. Immunization information, including waiver data, will be reported using aggregate numbers on the “MDHHS Immunization Reporting Form for Students with no FERPA Consent” to the local health department.

The school MCIR/SIRS user will take the following steps:

1. Log into MCIR/SIRS
2. Search for student
3. On student information page, click **Edit Information** hyperlink (screenshot 1)
4. Edit school information for the student by **checking the new “FERPA No Consent” checkbox**
5. Save the change by clicking the **Submit** button

The “FERPA No Consent” checkbox with a checkmark should now be visible.

In Summary:



School/Childcare
 Edit Information
 Student ID: _____ Grade: 7th Report Period: November 2018
 Last Physical Date: _____ Language: English
 McKinney-Vento Act Birth Certificate Vision Screened
 FERPA No Consent

Consent = an unchecked/blank FERPA checkbox



School/Childcare
 Edit Information
 Student ID: _____ Grade: 7th Report Period: November 2018
 Last Physical Date: _____ Language: English
 McKinney-Vento Act Birth Certificate Vision Screened
 FERPA No Consent

No consent = a checked FERPA checkbox, do not share data with MDHHS/LHD

Where can I find more information?

For more information, please visit www.mcir.org/school-childcare/.

MEMORANDUM

Michigan Department of Health and Human Services

DATE: January 14, 2019

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 or medical/osteopathic physician (optometrist or ophthalmologist), 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 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:
 - Have available a quiet room with table and appropriate chairs for either preschool or school-age screening
 - Have available a room with adequate space, outlets, air flow, etc.
 - Screenings should never be conducted in bathrooms or rooms where other events are taking place or where unsafe conditions exist
 - Observers (including parents) must not communicate with children during the screening to prevent leading responses which can result in false negatives
 - 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.

(Enter School District, PSA, or Nonpublic School Name)

Consent for Disclosure of Personally Identifiable Information and Immunization Information to Local and State Health Departments

Immunizations are an important part of keeping our children healthy. Schools and State and Local health departments must monitor immunization levels to ensure that all communities are protected from potentially life-threatening diseases and, if necessary, respond promptly to an emerging public health threat. It is important that disease threats be minimized through the monitoring of students being immunized.

Sharing immunization and personally identifiable information including the student’s name, Date of Birth, gender, and address with local and state health departments will help to keep your child safe from vaccine preventable diseases. The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g, requires written parental consent before personally identifiable information and immunization information from your child’s education records is disclosed to the health department. If your child is 18 or over, he or she is an “eligible student” and must provide consent for disclosures of information from his or her education records.

You may withdraw your consent to share this information in writing at any time.

I authorize _____ [Enter School District, PSA, or Nonpublic School Name] _____ to release my child’s immunization record and personally identifiable information to the Michigan Department of Health and Human Services and Local Health Department. I understand this information will be used to improve the quality and timeliness of immunization services and to help schools comply with Michigan Law. This includes any immunization information and limited personally identifiable information from the school.

Student’s Name: _____ Date of Birth: __/__/__

Signature of Parent/Guardian
or Eligible Student: _____ Date: __/__/__

Printed Parent/Guardian Name: _____

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.



	All Kindergarteners and 4-6 year old transfer students	All 7th Graders and 7-18 year old transfer students
Diphtheria, Tetanus, Pertussis (DTP, DTaP, Tdap)	4 doses DTP or DTaP 1 dose must be at or after 4 years of age	4 doses D and T or 3 doses Td if 1st dose given at or after 1 year of age 1 dose Tdap at 11 years of age or older upon entry into 7th grade or higher
Polio	4 doses 3 doses if dose 3 was given at or after 4 years of age	
Measles, Mumps, Rubella (MMR)*	2 doses at or after 12 months of age	
Hepatitis B*	3 doses	
Meningococcal Conjugate (MenACWY)	None	1 dose at 11 years of age or older upon entry into 7th grade or higher
Varicella (Chickenpox)*	2 doses at or after 12 months of age or Current lab immunity or	

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.



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 health care provider to make sure your child is fully protected.



	All Kindergarteners and 4-6 year old transfer students	All 7th Graders and 7-18 year old transfer students
Diphtheria, Tetanus, Pertussis (DTP, DTaP, Tdap)	4 doses DTP or DTaP 1 dose must be at or after 4 years of age	4 doses D and T or 3 doses Td if 1st dose given at or after 1 year of age 1 dose Tdap at 11 years of age or older upon entry into 7th grade or higher
Polio	4 doses 3 doses if dose 3 was given at or after 4 years of age	
Measles, Mumps, Rubella (MMR)*	2 doses at or after 12 months of age	
Hepatitis B*	3 doses	
Meningococcal Conjugate (MenACWY)	None	1 dose at 11 years of age or older upon entry into 7th grade or higher
Varicella (Chickenpox)*	2 doses at or after 12 months of age or Current lab immunity or History of varicella disease	

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 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.



Vaccine Terminology

The vaccines listed in the table below are those that **can be counted** towards a child's school-required and/or childcare-required vaccinations.

CDC Abbreviation	Vaccine	Common Names, Synonyms, Brand Names
DT	Diphtheria & Tetanus	DT pediatric
DTP*	Diphtheria, Tetanus, Pertussis	Tri-Immunol*, DTWP*
DTP-Hib*	Diphtheria, Tetanus, Pertussis & <i>Haemophilus influenzae</i> type b	Tetramune*, DTP/ActHIB*
DTaP	Diphtheria, Tetanus, acellular Pertussis	Daptacel®, Infanrix®, Tripedia*, Acel-Imune*, Certiva*
DTaP-HepB-IPV	Diphtheria, Tetanus, acellular Pertussis, Hepatitis B & Inactivated Polio Vaccine	Pediarix®
DTaP-Hib*	Diphtheria, Tetanus, acellular Pertussis & <i>Haemophilus influenzae</i> type b	TriHIBit*, DTaP/ActHIB*
DTaP-IPV/Hib	Diphtheria, Tetanus, acellular Pertussis, Inactivated Polio & <i>Haemophilus influenzae</i> type b	Pentacel®
DTaP-IPV	Diphtheria, Tetanus, acellular Pertussis & Inactivated Polio Vaccine	Kinrix®, Quadracel®
Td	Tetanus, diphtheria	Td (adolescent/adult), Tenivac®, Decavac*
Tdap	Tetanus, diphtheria, acellular pertussis	Adacel®, Boostrix®
IPV	Inactivated Polio Vaccine	IPOLE®, eIPV*, Salk Inactivated*, Poliovax*
OPV*	Oral Polio Vaccine	Trivalent OPV* (tOPV*), Bivalent OPV* (bOPV*), Monovalent OPV* (mOPV*), Sabin*, Orimune*
HepA-HepB [†]	Hepatitis A & Hepatitis B	Twinrix® [†]
HepB	Hepatitis B	Engerix-B®, Recombivax HB®, Heplisav-B®, HBV, HB vaccine
Hib-HepB*	<i>Haemophilus influenzae</i> type b & Hepatitis B	Comvax*
Hib	<i>Haemophilus influenzae</i> type b	ActHIB®, Hiberix®, PedvaxHIB®, HibTITER*, ProHIBit*, OmniHIB*
Hib-MenCY* ^{††}	<i>Haemophilus influenzae</i> type b & Meningococcal Conjugate C and Y	MenHibrix* ^{††} , HibMen CY-TT* ^{††}
PCV7*	Pneumococcal Conjugate Vaccine, 7-valent*	Prennar7*
PCV13	Pneumococcal Conjugate Vaccine, 13-valent	Prennar13®
Measles*	Measles (Rubeola)	Attenuvax*
Mumps*	Mumps	MumpsVax*
Rubella*	Rubella (German Measles)	Meruvax*, Meruvax II*
Measles-Rubella*	Measles & Rubella	M-R-VAX II*
Mumps-Rubella*	Mumps & Rubella	Biavax II*
MMR	Measles, Mumps & Rubella	MMR-II®
MMRV	Measles, Mumps, Rubella & Varicella	ProQuad®
VAR	Varicella	Varivax®, Chickenpox vaccine
MenACWY or MCV4	Meningococcal Conjugate Vaccine (A, C, W, Y)	Menactra® (MenACWY-D), Menveo® (MenACWY-CRM), Nimenrix*
MPSV4*	Meningococcal Polysaccharide Vaccine	Menomune*

See additional footnotes on page 2.

*Vaccines that are not available in the U.S. but may count toward 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 component of MenHibrix **does not count** as the Meningococcal Conjugate (MenACWY) vaccine dose required for 7th grade students and transfer students aged 11 years and older.

Additional Vaccines That May Be on Immunization Records

These vaccines **do not** count towards school and childcare entry.

CDC Abbreviation	Vaccine	Common Names, Synonyms, Brand Names
HepA	Hepatitis A	Havrix®, Vaqta®, HAV
2vHPV	Human Papillomavirus Vaccine, bivalent	Cervarix, HPV2
4vHPV	Human Papillomavirus Vaccine, quadrivalent	Gardasil, HPV4
9vHPV	Human Papillomavirus Vaccine, 9-valent	Gardasil 9®, HPV9
IIV	Inactivated Influenza Vaccine	Fluogen, FluShield
IIV3 (TIV)	Trivalent Inactivated Influenza Vaccine	Afluria®, Fluvirin®
RIV3	Recombinant Trivalent Influenza Vaccine	Flublok®
IIV4 (QIV)	Quadrivalent Inactivated Influenza Vaccine	Fluarix®, FluLaval®, Fluzone®, Afluria®
ccIIV4	Cell Culture Quadrivalent Influenza Vaccine	Flucelvax®
RIV4	Recombinant Quadrivalent Influenza Vaccine	Flublok® Quadrivalent
IIV4 ID	Intradermal Inactivated Influenza Vaccine	Fluzone® Intradermal
LAIV4	Live Attenuated Influenza Vaccine (nasal spray)	FluMist®
MenB	Meningococcal Serogroup B	Trumenba® (MenB-FHbp), Bexsero® (MenB-4C)
MenC	Meningococcal Serogroup C	Meningitec, Meningtec, Meninvact, Menjugate, Neis Vac-C
PPV, PPSV23	Pneumococcal Polysaccharide Vaccine, 23-valent	PNU-Immune 23, Pneumovax®
RV5, RV1	Rotavirus Vaccine	RotaTeq® (RV5), Rotarix® (RV1)
TT	Tetanus Toxoid	Tetanus toxoid

The vaccines listed in the table above 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 in 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](http://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](http://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.



Michigan Department of Health and Human Services Immunization Reporting Form for Students with No FERPA Consent on File

Instructions: Once complete, forward this form to your Local Health Department

Report Period: February November

Date: _____

School Name: _____

Total Number of Students with No FERPA Consent				Total Number of Students with No FERPA Consent and No Immunization Record on File			
K							
7							
O							
	DTP/DTaP/ Tdap/Td 1	DTP/DTaP/ Tdap/Td 2	DTP/DTaP/ Tdap/Td 3	DTP/DTaP/ Tdap/Td 4	DTP/DTaP/ Tdap/Td 5	DTP/DTaP/ Tdap/Td 6	*Series Waived
K							
7							
O							
	POLIO 1	POLIO 2	POLIO 3	POLIO 4	POLIO 5	*Series Waived	
K							
7							
O							
	MMR 1	MMR 2	MMR 3	*Series Waived			
K							
7							
O							
	HEP-B 1	HEP-B 2	HEP-B 3	HEP-B 4	*Series Waived		
K							
7							
O							
	VAR 1	VAR 2	VAR 3	HAD Disease	*Series Waived		
K							
7							
O							
	Meningococcal MenACWY (MCV4) 1	Meningococcal MenACWY (MCV4) 2			*Series Waived		
K							
7							
O							

*Please mark **R**-Religious, **M**=Medical, or **O**=Other (Philosophical) in the *Series Waived* box.

	Number of Completes	Number of Provisional	Number of Incompletes
K			
7			
O			
	Number of Religious Waivers	Number of Medical Waivers	Number of Other Waivers
K			
7			
O			