

2010-2011 School Year
 Indiana State Department of Health (ISDH)
 School Immunization Requirements
 Quick Reference Guide[^]

	3-5 Year Olds	K	1	2	3	4	5	6	7	8	9	10	11	12
DTaP/DTP/DT/Td*	4	5	5	5	5	5	5	5	5	5	5	5	5	5
Polio**	3	4***	4	4	4	4	4	4	4	4	4	4	4	4
Measles	1	2	2	2	2	2	2	2	2	2	2	2	2	2
Mumps	1	2	2	2	2	2	2	2	2	2	2	2	2	2
Rubella	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Hepatitis B~	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Varicella ∞	2	2	1	1	1	1	1	2	2	2	2	2	2	2
Tdap	-	-	-	-	-	-	-	1	1	1	1	1	1	1
MCV4	-	-	-	-	-	-	-	1	1	1	1	1	1	1

[^] **Shaded areas represent grades for which immunization reports are required to be submitted to the Indiana State Department of Health.** For children who have delayed immunizations, please refer to the 2010 CDC "Catch-up Immunization Schedule" to determine adequately immunizing doses. All minimum intervals and ages for each vaccination as specified per 2010 CDC guidelines must be met for a dose to be valid. A copy of these guidelines can be found at www.cdc.gov/vaccines/recs/schedules/default.htm.

*Four doses of DTaP/DTP/DT are acceptable if 4th dose was administered on or after child's fourth birthday.

**Three doses of polio vaccine are acceptable if 3rd dose was administered on or after child's fourth birthday and the doses are all IPV or all OPV.

***The 4th dose of polio vaccine must be administered on or after child's fourth birthday. This applies only to kindergarten for 2010-2011.

~ Two dose alternative adolescent schedule (Recombivax HB given at age 11-15 years x 2 doses) is acceptable if properly documented.

∞ Physician documentation of disease history, including month and year, is proof of immunity for preschool, kindergarten and 1st grade-students. A signed statement from the parent/guardian indicating history of disease, including month and year is required for children in grades 2-12.

For a current list of requirements, please go to https://chirp.in.gov/chirp_files/chirp_docs.htm