The Department of Public Health is an advocate for and partner with the people of Illinois to re-envision health policy and promote health equity, prevent and protect against disease and injury, and prepare for health emergencies.
Disclosures

I have no relevant financial relationships with the manufacturer(s) of any commercial products(s) and/or provider(s) of commercial services discussed within this CNE activity.

I do NOT intend to discuss an unapproved or investigative use of a commercial product/device in my presentation.
Laboratory Evidence of Immunity
- + IgG or titer accepted for measles, rubella, mumps and varicella.
- Hepatitis B infection: HBsAg, anti-HBc and/or anti-HBs.
- Lab evidence of immunity is not allowed for Hib, pneumococcal, diphtheria, tetanus, pertussis, polio or meningococcal vaccines.

Students Affected by School Requirements
- Public AND Private Schools
- Rules Target Students by Grade.
- Students attending ungraded school programs (including special education), must comply in accordance with grade equivalent:
  * Kindergarten = 5 years of age
  * 6th graders = 11 years of age
  * 9th graders = 15 years of age
- Home school student who attends classes or programs must comply with the school requirements

Mandated Intervals Between Shots
1 Month = 4 Weeks / 28 Days
2 Months = 8 Weeks / 56 Days
4 Months = 16 Weeks/112 Days
One year of age = On or after the first birthday.

**For Preschool hepatitis B only:**
6 months of age = 24 weeks = 168 days

ACIP Best Practice guidelines consider vaccine doses are sometimes administered ≤4 days before the minimum interval or age as valid. Vaccine doses given within this 4 day grace period can be considered by the local school authority as “proof of immunity” per 77 Ill. Adm. Code 665.270. This does not apply to the 28 days time interval required between live vaccine doses, consistent with ACIP Best Practices recommendations.

**For LIVE virus vaccines** (i.e. MMR or Varicella) **if the interval between any 2 live doses is < 28 days**, the vaccine administered second cannot be counted as valid and must be repeated.
The “4-day grace period” is *not* accepted on 28 day interval between 2 live-virus vaccines.
KEY POINTS for Immunity Reviews

➢ Any vaccine dose administered at an interval less than required in Illinois or prior to the age required **cannot** be accepted as valid *(4-day grace period allowed as per previous slide).*

➢ If a health care provider* feels that a child is adequately immunized, or a specific immunization is not necessary or indicated, then the provider must submit documentation (provider note) to school authorities.

➢ When a health care provider claims a child is immune, the provider must submit laboratory documentation of the child’s immunity to school authorities.
KEY POINTS for Immunity Reviews

- All proof of immunity documentation must be reviewed by designated IDPH Immunization staff with parental consent. If a signed parental consent is not submitted with initial request, school must resubmit ALL DOCUMENTATION.

- Include student’s name, D.O.B.; current grade level; immunization dates; all physician’s notes/statements and current Certificate Child Health Examination Form.

- School contact information; including school health official’s full name; phone number; fax number and email address.
KEY POINTS for Immunity Reviews

➢ Make sure that **ALL** documents being submitted are legible.

➢ While waiting for the notes to be reviewed, consider the student as **in compliance but unprotected**.

➢ If IDPH determines the provider statement is not acceptable to prove immunity, then the student is no longer considered to be in compliance and is subject to the exclusion provision of the law.
Minimum Immunization Requirements for Entering a Child Care Facility or School in Illinois - Fall 2021

- Diphtheria, Pertussis, Tetanus: Three doses of DTP or DTaP by 1 year of age. One additional booster dose by 2nd birthday.
- Polio: Two doses by 1 year of age, one additional dose by 2nd birthday. Three doses for any child 24 months of age or older appropriately spaced.
- Measles: One dose on or after the 1st birthday. Two doses of measles vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.
- Rubella: One dose on or after the 1st birthday. Two doses of rubella vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.
- Mumps: One dose on or after the 1st birthday. Two doses of mumps vaccine, the 1st dose must have been received on or after the first birthday and the second dose no less than 4 weeks (28 days) later.
- Haemophilus influenzae type b (Hib): Any child five years of age (60 months of age) or older shall not be required to provide proof of immunization with Hib vaccine.

Minimum intervals allowed:
- Diphtheria, Pertussis, Tetanus: 4 weeks (28 days)
- Polio: 4th dose at least 6 months after previous dose
- Measles: 4th dose at least 6 months after previous dose
- Rubella: 4th dose at least 6 months after previous dose
- Mumps: 4th dose at least 6 months after previous dose
- Haemophilus influenzae type b (Hib): 4th dose at least 6 months after previous dose

For more information, visit: http://www.dph.illinois.gov/topics-services/prevention-wellness/immunization
Minimum Immunization Requirements
Entering a Child Care Facility or School in Illinois - Fall 2021

Note:
Students attending ungraded school programs must comply in accordance with grade equivalent.

Within the Advisory Committee on Immunization Practices (ACIP) recommendations, vaccine doses given up to four days before minimum interval or age can counted as valid. However, this does not apply to intervals between live vaccines. Live vaccines shall not be given fewer than 28 days after receipt of a prior live vaccine.

**For Tdap Per The Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, A dose of Tdap or DTaP administered at 10 years of age or later may now be counted as the adolescent Tdap booster.

***For Meningococcal Conjugate: if there is an indication for earlier vaccination (between ages 10 and 11) then the provider submits a letter/statement stating the reasons and provider that with the vaccine records (Section 665.280). Letter/statement to be honored by School Health Authorities and NOT submitted to IDPH for Review.

Compliance with the School Code
A child shall be considered in compliance with the health examination and immunization requirement in Section 27-8.1 of the School Code if all applicable immunizations that a child can medically receive are given before entering school and a signed statement from a health care provider is presented indicating when the remaining medically indicated immunization will be administered within the current school year. Local school authorities shall monitor immunization schedules to assure their completion. If a child is delinquent for a scheduled appointment for immunization, he or she is no longer considered to be in compliance.

Resources:
IDPH Immunization Webpage
Child and Student Health Examination and Immunization Code
Immunization Schedules
CDC Immunization Webpage
ACIP Vaccine Recommendations and Guidelines
Epidemiology and Prevention of Vaccine-Preventable Diseases-The Pink Book
Ask the Experts

Sources:
Title 77, Part 665 Child and Student Health Examination and Immunization Code Advisory Committee on Immunization Practices (ACIP)

http://www.dph.illinois.gov/topics-services/prevention-wellness/immunization
Kindergarten Entry 2021-2022

POLIO (IPV) for Kindergarten entry

• Beginning with school year 2017-2018, any child entering kindergarten shall show proof of having received 4 or more doses of polio (IPV) vaccine.
• The first three doses in the series shall have been received no less than 4 weeks (28 days) apart.
• The fourth or last dose shall be administered on or after the 4th birthday and at least SIX months after the previous dose.
• This rule follows ACIP recommendations.

Fall 2021
POLIO – Kindergarten Entry
Starting School Year 2017-18, 4 doses of polio vaccine required for Kindergarten Entry

2017-18 Kindergarten
2018-19 Kindergarten, 1st
2019-20 Kindergarten, 1st, 2nd
2020-21 Kindergarten, 1st, 2nd, 3rd
2021-22 Kindergarten, 1st, 2nd, 3rd, 4th
2022-23 Kindergarten, 1st, 2nd, 3rd, 4th, 5th
2023-24 Kindergarten, 1st, 2nd, 3rd, 4th, 5th, 6th
2024-25 Kindergarten, 1st, 2nd, 3rd, 4th, 5th, 6th, 7th
2025-26 Kindergarten, 1st, 2nd, 3rd, 4th, 5th, 6th, 7th, 8th

Fall 2021
Catch-up Schedule For Kindergarten Polio 2021-2022

For Kindergarten entry beginning with school year 2017-2018:

• A fourth (4\textsuperscript{th}) dose is not needed if the third (3\textsuperscript{rd}) dose was administered at age four or older and at least six months after the previous dose, in accordance with the ACIP catch-up series.

• This rule follows ACIP recommendations.
6th Grade Entry 2021-2022

Upon entry into 6th grade; student must show proof of:

• 2 doses of Varicella vaccine;
• 2 doses of M-M-R vaccine;
• 1 dose of Tdap (in addition to completed series for DTaP/Td);
• 3 dose Hepatitis B vaccine series; and
• 1 dose of Meningococcal Conjugate vaccine (MenACWY – Menactra/Menveo), administered on or after the 11th birthday.
FOR 6th GRADE ENTRY:
Submitting a schedule to the school for Tdap and/or meningococcal conjugate vaccine...

Per Section 665.270 of the School Code...
If a schedule/note is submitted stating that the student will receive his/her Tdap or MCV4 during the school year when they turn 11, it is considered a schedule, accepted and considered compliant but unprotected on schedule.
Meningococcal Conjugate (MenACWY) Requirement

Meningococcal Requirement (MenACWY) for 6th and 12th graders:

• 6th – 11th graders must show 1 dose of MenACWY on or after the 11th** birthday at school entry

• 12th graders must show 2 doses of MenACWY at school entry

• If first dose of MenACWY administered > 16th birthday; then only one dose required for entry to 12th grade.

Fall 2021
Meningococcal Conjugate (MenACWY) Requirement

• If a child entering 6th grade is not yet 11, recommended that vaccination is deferred until age 11 to provide the child the most optimal vaccine efficacy during the time period of greatest risk.

• A 10 y.o. entering 6th grade would not be out of compliance with school code if the provider documents when the vaccine will be administered (Section 665.270).

• If there is an indication for earlier vaccination (between ages 10 and 11), then the provider submits a letter/statement stating the reasons and provide that with the vaccine records (Section 665.280:)
  – Letter/statement to be honored by School Health Authorities and NOT submitted to IDPH for review.
Every childcare facility and attendance center shall maintain an accurate list of all children and students who have not presented proof of immunity against any or all of the required immunizations as noted in Section 665.240 or Section 665.280.
“Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.”

Which means these students must be compliant with requirements for Tdap, 2 doses of MMR, Meningococcal (MCV4), 2 doses of Varicella, and Hepatitis B.
## School Compliance

### Two Types of Exemptions Allowed in Illinois: Medical and Religious

<table>
<thead>
<tr>
<th>MEDICAL OBJECTION</th>
<th>RELIGIOUS EXEMPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Must indicate the student’s medical condition that contraindicates the specific immunization.</td>
<td>• Must detail specific religious belief which conflicts with the specific immunization and or exam.</td>
</tr>
<tr>
<td>• Must be written by a MD, DO, APN or PA</td>
<td>• Must use the Certificate of Religious Objection form.</td>
</tr>
<tr>
<td>• The medical objection documentation should be received and honored by appropriate school personnel.</td>
<td>• Must be signed by health care provider (MD/DO; APN; PA) responsible for the performing the health exam.</td>
</tr>
<tr>
<td>• These students must be placed on a susceptible list and subject to immediate exclusion if vaccine-preventable disease or contact is identified at the school.</td>
<td>• Provider signature attests to informing the parents of the benefits of immunization and health risk of not vaccinating to the student and to the community.</td>
</tr>
<tr>
<td></td>
<td>• Local school authority is responsible for determining whether written statement constitutes a valid religious objection.</td>
</tr>
</tbody>
</table>

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**Both Exemptions are not to be sent to IDPH for review**
# Illinois Certificate of Religious Exemption

## To Required Immunizations and/or Examinations Form

### Parent or Legal Guardian - Complete This Section

Note: This form is required for all students entering kindergarten, sixth or ninth grades when parent(s) or legal guardian(s) is requesting a religious exemption on or after October 16, 2015. This form also must be submitted to request religious exemption for any student enrolling to enter any public, charter, private, or parochial preschool, kindergarten, elementary or secondary school on or after October 16, 2015.

This form may NOT be used for personal or philosophical reasons. Illinois law does not allow for such exemptions.

<table>
<thead>
<tr>
<th>Student Name (Last, First, Middle)</th>
<th>Gender</th>
<th>Student Date of Birth</th>
<th>School Name</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Month Day Year</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

City: ____________________________

Telephone Number(s):

Exemption Requested for (mark all that apply):
- Hepatitis B
- DTaP
- Polio
- Hib
- Pneumococcal
- MMR
- Varicella
- ToTdap
- Meningococcal
- Health Exam
- Eye Exam
- Dental Exam
- Vision/Hearing Tests
- Other (indicate below)

To receive an exemption to vaccination/examination, a parent or legal guardian must provide a statement detailing the religious beliefs that prevent the child from receiving each required school vaccinations/examination being requested. In the space provided below, state each vaccination or examination exemption requested and state the religious grounds for each request. If additional space is needed, attach additional page(s).

Religious Exemption Notice:

No student is required to have an immunization/examination that is contrary to the religious beliefs of his/her parent or legal guardian. However, not following vaccination recommendations may endanger the health or life of the unvaccinated student, others with whom they come in contact, and individuals in the community. In a disease outbreak, or after exposure to any of the diseases for which immunization is required, schools may exclude children who are not vaccinated in order to protect all students.

I have read the Religious Exemption Notice (above) and have provided requested information for each vaccination/examination being requested for religious exemption.

Signature of parent or legal guardian (required) Date ____________________________

### Health Care Provider*- Complete This Section

Provision of Information: I have provided the parent or legal guardian of the student named above, with information regarding 1) the required examinations, 2) the benefits of immunization, and 3) the health risks to the student and to the community from each communicable disease for which immunization is required in Illinois. I understand that my signature only reflects that this information was provided; I am not affirming the parent or legal guardian's religious beliefs regarding any examination, immunization, or immunizing agent.

Health Care Provider Name: ____________________________

Signature of health care provider* ____________________________

Address: ____________________________

Telephone #: ____________________________

* Health care provider responsible for performing child’s health examination includes physicians licensed to practice medicine in all of its branches, advanced practice nurses, or physician assistants.

Fall 2021
I-CARE
Illinois Comprehensive Automated Immunization Registry Exchange

• School employees can access immunization records from the State Immunization Registry, I-CARE.
• Allows view and printing of child immunization records in your jurisdiction.
• Must register for I-CARE by completing the memorandum of agreement then going online to sign on through the web portal.
• “Data-mining” or third-party access is prohibited.
• To register for I-CARE please email at dph.icare@illinois.gov

Fall 2021
ILLINOIS DEPT OF PUBLIC HEALTH
Immunization Program - Regional Listing

For questions on specific immunization requirements and Proof of Immunity reviews

PEORIA REGION
Chris Morrow
5415 N. University St, Peoria, IL 61614
Phone: (309) 693-5374    Fax: (309) 693-5118
Email: Christopher.Morrow@illinois.gov

EDWARDSVILLE REGION
Anjanette Manzy (Interim)
22 Kettle River Dr. Glen Carbon, IL 62034
Phone: (618) 656-6680    Fax: (618) 656-5863
Email: Anjanette.E.Manzy@illinois.gov

ROCKFORD REGION
Alison Lind
4302 N Main, Rockford, IL 61103
Phone: (815) 987-7971    Fax: (815) 987-7822
Email: Alison.Lind@Illinois.gov

CHAMPAIGN REGION
Pamela Linder
2125 S. First St., Champaign, IL 61820
Phone:(217) 278-5900    Fax: (217) 278-5959
Email: Pamela.Linder2@illinois.gov

WEST CHICAGO REGION
Vacant
245 W Roosevelt Rd., Bldg. #5, West Chicago, IL 60185
Phone: (630) 293-6800    Fax: (630) 293-6908
Email:

BELLWOOD REGION (Suburban Cook County)
Mijiza Jefferson
4212 W. St. Charles Rd, Bellwood, IL 60104
Phone: (708) 544-5300    Fax: (708) 544-5830
Email: Mijiza.Jefferson@illinois.gov

Fall 2021
THANK YOU

IDPH Immunization Program

217/785-1455

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