



## Frequently Asked Questions About School Immunization Requirements

### Hepatitis B

- Q.** Can a student who is beginning the series of hepatitis B vaccinations be allowed to attend school?
- A.** Yes. A student may continue to attend school while in the process of completing the hepatitis B vaccination series. The parent or guardian must present documentation of appointment(s) to receive the remainder of the required dose(s). Schools should track the student's appointment dates to ensure receipt of all required doses.
- Q.** Is a student compliant with the hepatitis B vaccination requirement if they were vaccinated with the 2-dose hepatitis B vaccine dosing schedule?
- A.** Yes. Two doses of hepatitis B vaccine are acceptable only if the student was vaccinated with the Merck & Co. brand vaccine **Recombivax HB™ Adult Formulation**. Recombivax HB™ Adult Formulation vaccine is licensed for use in adolescents 11 - 15 years of age as a two-dose series.

### Varicella (Chickenpox)

- Q.** What is acceptable documentation for proof of immunity to varicella disease?
- A.** Per COMAR any of the following is acceptable proof of immunity to varicella disease:
- Age appropriate vaccination with varicella vaccine;
  - Proof of immunity from varicella by blood test; or
  - Proof of immunity by medical diagnosis indicated by month and year of diagnosis.
- Q.** What is meant by the COMAR statement “medical diagnosis indicated by month and year of diagnosis”?
- A.** A medical diagnosis of varicella disease is an acceptable proof of immunity in lieu of vaccination. Per COMAR, medical diagnosis is a documented history of typical varicella disease provided by a physician or other healthcare provider. The medical diagnosis must include the month and year of disease.

**Q. What is “typical varicella disease”?**

**A. Typical varicella disease symptoms include:**

- Generalized pruritic, vesicular rash typically consisting of up to 250-500 lesions.
- Mild fever and other systemic symptoms may be present.
- Rash usually appears on scalp, followed by the trunk, then progresses to the extremities, with the highest concentration of lesions on the trunk.
- Lesions are 1-4 mm in diameter.
- The fluid filled bumps (vesicles) rupture or become purulent, then turn into crusts or scabs which last about 14 days.

Students reporting a history of atypical mild varicella disease should not be considered as having a valid history of disease because other diseases may mimic mild atypical varicella. These students should be referred for a varicella vaccination or blood test.

**Q. What do we do when we find a record that has history of varicella disease that does not include month and year?**

**A. Per COMAR, documentation of varicella disease must include month and year. If a DHMH Form 896 or other immunization certificate does not include month and year, the parent or guardian should work with a healthcare provider to document the month and year of the disease.**

**Q. Should students be referred to their local health department to receive history of varicella disease documentation?**

**A. Students should be referred to a healthcare provider to acquire documentation of medical diagnosis for varicella disease. Students should primarily be referred to their local health department to receive vaccination.**

## **Pneumococcal**

**Q. Is pneumococcal polysaccharide vaccine (PPV23) acceptable for the preschool pneumococcal vaccination requirement?**

**A. No. Only pneumococcal conjugate vaccine, PCV7, (brand name Prevnar™) is acceptable for the pneumococcal vaccination requirement. PCV7 is the only recommended pneumococcal vaccine indicated for routine use in children per the Advisory Committee on Immunization Practices (ACIP) guidelines. PCV7 is the only pneumococcal vaccine licensed for children less than two years of age.**

Q. I have a DHMH form 896 that lists Prevnar™ for pneumococcal vaccination. Is this the same as PCV7?

A. Yes. Since only one manufacturer currently makes this vaccine, providers often write Prevnar™ on the immunization record.

### **General Information**

Q. Per COMAR the address of the parent or guardian is now required on the DHMH form 896 or other immunization certificates. Does this mean schools will have to backtrack and review every form to make sure the address is complete?

A. During the course of a routine record review, if a school identifies a DHMH form 896 that is incomplete efforts should be made to add the required information to comply with COMAR requirements.

Q. Where can I get a copy of vaccine requirements for the current school year?

A. Go to [www.EDCP.org](http://www.EDCP.org) click (Immunization). Then click on “Back To School Immunization Requirements”

Q. Where can I get additional immunization resource materials?

A. Please call the Center for Immunization at 410-767-6679.

Q. Where can I get the Immunization Certificate DHMH Form 896?

A. There are two easy ways!

1. Complete the Health Education Materials Form located in the *Resources* section of this notebook and fax to 410-799-1370.

**OR**

2. Request them directly from the warehouse at 410-799-1940.