

**TEXAS SCHOOL FOR THE DEAF****HEALTH REQUIREMENTS AND SERVICES:  
IMMUNIZATIONS**FFAB  
(EXHIBIT)

This chart summarizes the vaccine requirements incorporated in Title 25, Health Services, Section 97.61-97.77 of the Texas Administrative Code as of April 1999

<b>Minimum State Vaccine Requirements for Texas Children</b>	
<b>Age (a)</b>	<b>Vaccine Requirement</b>
Younger than 2 months	<ul style="list-style-type: none"><li>• No vaccines required</li></ul>
2 months through 3 months	<ul style="list-style-type: none"><li>• One dose polio vaccine</li><li>• One dose DTP/DTaP vaccine</li><li>• One dose Hib vaccine</li></ul>
4 months through 5 months	<ul style="list-style-type: none"><li>• Two doses polio vaccine</li><li>• Two doses DTP/DTaP vaccine</li><li>• Two doses Hib vaccine</li></ul>
6 months through 11 months	<ul style="list-style-type: none"><li>• Two doses polio vaccine</li><li>• Two doses Hib vaccine</li><li>• Three doses DTP/DTaP vaccine</li></ul>
12 months through 14 months	<ul style="list-style-type: none"><li>• One dose MMR vaccine received on or after first birthday(b)</li><li>• Two doses Hib vaccine</li><li>• Three doses polio vaccine</li><li>• Three doses DTP/DTaP vaccine</li><li>• (Effective 8/1/00) One dose of varicella vaccine received on or after first birthday(c)</li></ul>
15 months through 4 years Effective 8/1/00-32 border counties:(d) 2 years-one dose hepatitis A vaccine; 3 through 4 years-two doses hepatitis A vaccine.	<ul style="list-style-type: none"><li>• One dose MMR vaccine received on or after first birthday(b)</li><li>• One dose Hib vaccine on or after 15 months of age, unless a primary series and booster have been completed</li><li>• Three doses polio vaccine</li><li>• (Less than 17 months) Three doses DTP/DTaP</li><li>• (18 months through 3 years) Four doses DTP/DTaP</li><li>• (4 years) Five doses DTP/DTaP, although fifth dose is not necessary if the fourth dose is given on or after the fourth birthday</li><li>• For children 18 months and older, pediatric DT vaccine is an acceptable substitute for DTP/DTaP if pertussis vaccine is medically contraindicated.</li><li>• (Effective 8/1/00) One dose of varicella vaccine received on or after first birthday(c)</li></ul>
5 years through 6 years	<ul style="list-style-type: none"><li>• Three doses polio vaccine including one received on or after the fourth birthday</li><li>• (5 years of age and older) Five doses DTP/DTaP, although fifth dose is not necessary if the fourth dose is given on or after the fourth birthday. Pediatric DT vaccine is an acceptable substitute for DTP/DTaP if pertussis vaccine is medically contraindicated.</li><li>• One dose MMR vaccine received on or after the first birthday and one additional dose of measles vaccine (this dose may be received as part of a second MMR)</li><li>• Three doses hepatitis B vaccine</li><li>• (Children living in 32 border counties(d)) Two doses hepatitis A vaccine</li><li>• (Effective 8/1/00) Children born on or after September 2, 1994, must have</li></ul>

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	one dose of varicella vaccine received on or after first birthday(c)
7 years through 11 years Polio vaccine not required for students 18 years of age and older.	<ul style="list-style-type: none"><li>Three doses polio vaccine including one received on or after fourth birthday</li><li>Three doses DTP/DTaP/Td vaccine including one received on or after fourth birthday and one dose within the last ten years</li><li>One dose MMR vaccine received on or after first birthday.(b) Children born on or after September 2, 1991, must have two doses of measles vaccine (this dose may be received as part of a second MMR)</li><li>Children born on or after September 2, 1992, must have three doses hepatitis B vaccine</li><li>(Children living in 32 border counties(d)) Children born on or after September 2, 1992, must have two doses hepatitis A vaccine</li></ul>
12 years and older	<ul style="list-style-type: none"><li>Children born between September 1, 1978, and September 1, 1991 (inclusive), must show proof of two doses of measles vaccine within 30 days after their twelfth birthday (this dose may be received as part of a second MMR)</li></ul>
<b>Additional Vaccines</b>	<p>The following vaccines are required in addition to those required at age 7.</p> <p>(Effective 8/1/00) Children born between September 2, 1988, and September 1, 1992 (inclusive), must show proof of three doses of hepatitis B vaccine within 30 days after their twelfth birthday</p> <p>(Effective 8/1/00) Children born between September 2, 1988, and September 1, 1994 (inclusive), must have one dose of varicella vaccine received on or after first birthday(c) within 30 days after their twelfth birthday. If first dose is received after age 13, two doses are required.</p>
<b>Notes</b>	<ol style="list-style-type: none"><li>A child/student must meet all the immunization requirements shown for an age group upon first entering the age group.</li><li>MMR (or one dose of each of its components) must have been received on or after the first birthday if the vaccine was administered on or after September 1, 1990. Measles vaccine received prior to September 1, 1990, may have been administered in the calendar month of the first birthday.</li><li>Serologic proof of immunity or documentation of previous illness may substitute for vaccination. Previous illness may be documented by a written statement from a physician, school nurse, or the child's/student's parent or guardian containing wording such as: "This is to verify that (name of student) had varicella disease (chickenpox) on or about (date) and does not need varicella vaccine."</li><li>Counties affected by the hepatitis A requirement are: Brewster, Brooks, Cameron, Crockett, Culberson, Dimmitt, Duval, Edwards, El Paso, Frio, Hidalgo, Hudspeth, Jeff Davis, Jim Hogg, Kenedy, Kinney, La Salle, Maverick, McMullen, Pecos, Presidio, Real, Reeves, Starr, Sutton, Terrell, Uvalde, Val Verde, Webb, Willacy, Zapata, and Zavala.</li></ol>
<b>Provisional Enrollment</b>	All immunizations should be completed by the first day of attendance. However, if this is not possible and if permitted by local district policy, a child/student may be provisionally enrolled and allowed to attend a child-care facility or school, provided at least one immunization in each series has been

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	received. The remaining required immunizations must be completed as soon as medically possible in order for the child/student to remain in attendance.
<b>Alternate Dosage Schedules</b>	In some circumstances, the United States Food and Drug Administration (FDA) may approve the use of an alternative dosage schedule for an existing vaccine. These alternative regimens may be used to meet the requirements specified in 19 TAC 97.63 (relating to required immunizations) only when alternative regimens are fully documented. Such documentation must include vaccine manufacturer and dosage received for each dose of that vaccine.
<b>Documentation</b>	Since many types of personal immunization records are in use, any document will be acceptable, provided it has been validated by a physician or public health personnel. The month, day, and year that the vaccination was received must be recorded on all school immunization records created or updated after September 1, 1991.
<b>Source</b>	The requirements are based on the Recommended Childhood Immunization Schedule-United States, 1999, approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP). Children on an ideal or optimum schedule as recommended will have received 5 doses of DTP/DTaP vaccine, 4 doses of polio vaccine, 3 or more doses of Hib vaccine, 3 doses of hepatitis B vaccine, 2 doses of MMR vaccine, and 1 dose varicella vaccine by the time they enter kindergarten.
	Recent outbreaks of pertussis throughout Texas have resulted in the death and disability of children. Under the previous rule, there was no requirement for pertussis vaccination in children between the ages of 15 months and 5 years, due to a publication error. The Department concluded that the absence of such a requirement presented an imminent peril to the health and safety of children in Texas.