MERRIMACK SCHOOL DISTRICT

School Administrative Unit #26 36 McElwain Street Merrimack, New Hampshire 03054 Tel. (603) 424-6200 Fax (603) 424-6229

AMANDA S. DOYLE Assistant Superintendent for Curriculum **EVERETT V. OLSEN, Jr.** Chief Educational Officer **MATTHEW D. SHEVENELL** Assistant Superintendent for Business

August 31, 2023

Dear Parent/Legal Guardian,

New Hampshire State Law (RSA 200:38 and RSA 200:39) establishes the need for a physical examination and certain immunizations before a child may register for and enter school, unless excused for religious reasons or a registered physician provides evidence that the immunization would be detrimental to the child's health.

The state law, and the policies of the New Hampshire Department of Education, and the New Hampshire Department of Health and Human Services requires a local school district to exclude a child from school if the physical exam and immunizations are not met.

I ask that you please refer to the enclosed materials from the New Hampshire Department of Health and Human Services. If you have any questions, please contact the school nurse of your child's school.

Thank you for your cooperation.

Sincerely,

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Everett V. Olsen, Jr. Chief Educational Officer



Lori A. Weaver Interim Commissioner

> Patricia M. Tilley Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH SERVICES BUREAU OF INFECTIOUS DISEASE CONTROL

29 HAZEN DRIVE, CONCORD, NH 03301 603-271-4482 1-800-852-3345 Ext. 4482 Fax: 603-271-3850 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

New Hampshire School Immunization Requirements 2023-2024

Refer to page 2 for minimum ages and intervals

Diphtheria, Tetanus, and 6 years and under: 4 or 5 doses with the last dose given on or after t	
Pertussis	4 th birthday
DTaP	7 years and older : 3, 4, or 5 doses with the last dose given on or after
DT/DTP	the 4 th birthday
Tdap/Td	Grades 7-12: 1 dose of Tdap is required for entry into 7 th grade
	Grades K-11: 3 or 4 doses with the last dose given on or after the 4 th
Polio	birthday and the last 2 doses separated by 6 months or more
FOIIO	Grade 12: 3 doses, with the last dose given on or after the 4 th birthday
	OR 4 doses regardless of age at administration
Hepatitis B	Grades K-12: 3 doses at acceptable intervals
Measles, Mumps, and Rubella	Grades K-12: 2 doses; the first dose must be administered on or after
MMR	the 1 st birthday
	Grades K-12: 2 doses with the first dose administered on or after the 1 st
Varicella (Chicken Pox)	birthday OR laboratory confirmation of immunity. History of natural
	immunity without lab confirmation of immunity is NOT acceptable.

- Children must have proof of all required immunizations, documentation of immunity, or valid exemptions, in order to be admitted or enrolled in any school in New Hampshire. Documentation of immunity by confirming laboratory test is acceptable for Measles, Mumps, Rubella, Varicella, and Hepatitis B.
- A child may be "conditionally" enrolled when the parent or guardian provides:
 - 1) Documentation of at least one dose for each required vaccine; AND
 - 2) The appointment date for the next dose of required vaccine.
- All immunizations must meet minimum age and interval requirements for each vaccine. A 4-day grace period is allowed; however, live attenuated vaccines (MMR, Varicella, or nasal influenza vaccine) that are not administered on the same day must be administered at least 28 days apart.
- Medical and religious exemptions have specific requirements. Information is available at: <u>Immunization Exemptions for Children | New Hampshire Department of Health and Human Services (dhhs.nh.gov)</u>
- The 2022 Immunization Schedule from the CDC's Advisory Committee on Immunization Practices can be found here: <u>https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html</u>

Vaccine	Dose #	Minimum Age	Minimum Interval Between Doses	Notes
	DTaP – Dose 1	6 weeks	4 weeks between Dose 1 & 2	All children must have a valid dose on or after the 4 th birthday.
Diphtheria, Tetanus, and Pertussis	DTaP – Dose 2	10 weeks	4 weeks between Dose 2 & 3	For children 6 years and under, the 5 th dose is not necessary if the 4 th dose was administered at age 4 years or older and is at least 6
DTaP	DTaP – Dose 3	14 weeks	6 months between Dose 3 & 4*	months after the previous dose.
	DTaP – Dose 4	12 months	6 months between Dose 4 & 5	* A 4th dose inadvertently administered as early as age 12 months may be counted if at least 4 months since dose 3.
	DTaP – Dose 5	4 years		If dose 1 is given at age 7 or older, only 3 doses are needed (as long as there is 6 months between dose 2 and 3); can be Tdap or Td as long as one of the doses is Tdap.
Tetanus, Diphtheria, and Pertussis	Tdap –	7 years	ACIP recommends that children age 7 through 9 years who receive	Students are required to have a dose of Tdap prior to 7 th grade.
Tdap	Dose 1		Tdap or DTaP inadvertently or as part of a catch-up series should receive the routine Tdap dose at 11–12 years.*	* Tdap given on or after the 7 th birthday meets this requirement per NH Administrative Rule He-P 301.14.
	IPV – Dose 1	6 weeks	4 weeks between Dose 1 & 2	*Kindergarten through 11 th Grade: 3 or 4 doses, with one dose on or after the 4 th birthday and at least 6 months after the previous dose.
Polio IPV	IPV – Dose 2	10 weeks	4 weeks between Dose 2 & 3	If a combined IPV/OPV polio schedule was used, the total
	IPV – Dose 3	14 weeks	4 weeks to 6 months between Dose 3 & 4*	number of doses needed is the same as an all IPV schedule.
	IPV – Dose 4	4 years		Any OPV dose(s) given on or after April 1, 2016 does not count towards the polio vaccine requirement and the series must be completed with IPV.
	HepB – Dose 1	Birth	4 weeks between Dose 1 & 2	
Hepatitis B <i>HepB</i>	HepB – Dose 2	4 weeks	8 weeks between Dose 2 & 3	Note: Minimum age for Dose 3 is at least 24 weeks of age.
	HepB – Dose 3	24 weeks	16 weeks between Dose 1 & 3	
Measles, Mumps, and Rubella	MMR – Dose 1	12 months	4 weeks between Dose 1 & 2	Live attenuated vaccines not administered on the same day
MMR	MMR – Dose 2	13 months		must be administered at least 28 days apart.
Varicella (chickenpox)	VAR – Dose 1	12 months	12 weeks between Dose 1 & 2*	Live attenuated vaccines not administered on the same day must be administered at least 28 days apart.
VAR	VAR – Dose 2	15 months		*If first dose administered at age 13 or older, the minimum interval between Dose 1 and Dose 2 is 4 weeks.

Pre-school Students 3-5 Years Old New Hampshire Immunization Requirements 2023-2024

Refer to page 2 for minimum ages and intervals

DIPTHERIA, TETANUS, PERTUSSIS (DTaP/DTP/DT)

3-5 years	Four doses. The 3 rd and 4 th dose must be separated by at least 6 months.
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POLIO

3-5 years Three doses. Any OPV dose(s) given on or after April 1, 2016 does not count toward the po vaccine requirement and the series must be completed with IPV.	lio
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MEASLES, MUMPS, and RUBELLA (MMR)

3-5 years One dose. This dose must be administered on or after age 12 months.	
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HAEMOPHILUS INFLUENZAE TYPE B (Hib)

3-5 years	One dose on or after 15 months of age OR Four doses with the last dose administered on or after 12 months of age OR see catch-up schedule below* Hib is not required for children \geq 5 years of age.
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HEPATITIS B

3-5 years	Three doses given at acceptable intervals. See attached schedule (page 2)
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VARICELLA (CHICKEN POX)

	One dose. This dose must be administered on or after age 12 months. OR laboratory confirmation of chicken pox disease.

*Hib catch-up vaccination schedule:

- If unvaccinated at 15-59 months: 1 dose needed.
- If dose 1 given before 12 months and dose 2 before 15 months, 3rd and final doses must be 8 weeks after dose 2.
- If dose 1 given at 7-11 months, dose 2 must be at least 4 weeks later and 3rd and final dose given at 12-15 months or 8 weeks after dose 2 (whichever is later).
- If dose 1 given at 12-14 months, 2nd and final dose must be at least 8 weeks after dose 1.
- If PedvaxHIB brand used, call NHIP for recommended schedule and requirements for dosing.

Brand Names for Vaccines

Alphabetical List

May be used as a reference when reviewing immunization records. This is a list of many vaccine brand names.

Not all are required for school, pre-school, or childcare admittance.

Brand Name	Vaccine(s)/Abbreviation
ActHIB®	Haemophilus influenzae type b (Hib)
Adacel®	Tetanus, Diphtheria, Pertussis (Tdap)
Boostrix®	Tetanus, Diphtheria, Pertussis (Tdap)
Daptacel®	Diphtheria, Tetanus, Pertussis (DTaP)
DT	Diphtheria, Tetanus (DT)
Engerix B®	Hepatitis B (HepB)
Hiberix®	Haemophilus influenzae type b (Hib)
Infanrix®	Diphtheria, Tetanus, Pertussis (DTaP)
Ipol®	Polio (IPV)
Kinrix®	Diphtheria, Tetanus, Pertussis (DTaP) & Polio (IPV)
M-M-R II	Measles, Mumps, Rubella (MMR)
Pediarix®	Diphtheria, Tetanus, Pertussis (DTaP), Polio (IPV), & Hepatitis B (HepB)
PedvaxHIB®	Haemophilus influenzae type b (Hib)
Pentacel®	Diphtheria, Tetanus, Pertussis (DTaP), Polio (IPV), & Haemophilus influenzae type b (Hib)
ProQuad®	Measles, Mumps, Rubella & Varicella (MMRV)
Quadracel®	Diphtheria, Tetanus, Pertussis (DTaP) & Polio (IPV)
RecombivaxHB®	Hepatitis B (HepB)
TDVAX ™	Tetanus, Diphtheria (Td)
Tenivac ®	Tetanus, Diphtheria (Td)
Varivax®	Varicella (Chicken Pox, VAR)
Vaxelis™	Diphtheria, Tetanus, Pertussis (DTaP), Polio (IPV), Haemophilus influenzae type b (Hib), & Hepatitis B (Hep B).

See <u>https://www.cdc.gov/vaccines/terms/usvaccines.html</u> for other vaccine brand names.