



# ST. DOMINIC SAVIO

## CATHOLIC HIGH SCHOOL

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Print name please

Class of \_\_\_\_\_

### IMMUNIZATION RECORD 2018-2019

For the protection of the entire student body + staff, students are not permitted to attend class without current immunizations.

\*Minimum Immunization Requirements are listed in the chart below.

Dates of vaccines must include:(month/day/year)

Immunization	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5	Dose 6
DTP/DTaP/DT/Td						
Tdap						
OPV/IPV (circle one)						
MMR						
Hepatitis B						
Varicella (C-pox)			Date of Disease: _____ Parent Signature: _____			
Hepatitis A						
Meningococcal- MCV4						

Required: Physician Signature or Official Clinic Seal

Date

Required: Print Physician Name

Printed address of physician office

#### Texas State Dept. of Health Services MINIMUM Immunization Requirements 9<sup>th</sup> - 12<sup>th</sup>

**Tetanus:** 3 doses of DTP, DTaP, DT, Td with one on/after 4th birthday **AND**

**Tdap:** 1 dose of Tdap is required within the last 10 years. Td is acceptable in lieu of Tdap with a documented medical contraindication to Pertussis.

**Polio:** 3 doses of Polio with one dose on/after 4th birthday **OR** 4 doses of a documented combination of IPV and OPV. (Polio not required if 18 or older)

**Measles/ Mumps/ Rubella:** 2 doses MMR required with one given on/after 1<sup>st</sup> birthday.

**Hepatitis B:** 3 doses of Hepatitis B. If received first dose after age 11 yrs then 2 doses of adult hepatitis B vaccine is acceptable IF dose and type of vaccine are clearly documented (2 doses of Recombivax 10mcg/ml).

**Varicella:** 2 doses required. If student had disease – parent to fill in box on right side of page above with date of disease and parent signature.

**Meningococcal - MCV4:** 1 dose required of quadrivalent conjugate on/after 11<sup>th</sup> birthday.

\*Doses of DTaP and Polio administered month of or prior to 4th birthday are acceptable for students in grades 6 → 12.

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#### Vision/ Hearing /Spinal Screening: Minimum Requirements 9<sup>th</sup> – 12<sup>th</sup>

1. **Vision and Hearing:** All new students are required to have vision + hearing screening. The minimum requirement allows you to use results from 7th or 8th grade if it is an **official record** with full name, DOB, chart used, screener, screening date and results as stated below.

**Vision:** must submit visual acuity for right and left eyes recorded separately.

**Hearing:** must submit an audiometric screening done on R and L ear separately at 25 dB(or less) at 1000, 2000, and 4000 Hz . An Otoacoustic Emissions Test is **not** accepted by TDOH as a hearing test.

2. **Spinal Screening:** required in 6<sup>th</sup> and 9<sup>th</sup> grade. If done elsewhere must submit an **official record** with full name, DOB, screener, screening date and results .Spinal screening must be recoded as “passed” OR failed and referred”. *This is the current rule but it is tentative until the 2017 legislature closes.*

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