

**Woodbury Public Schools
Immunization Deficiencies**

To the Parent/ Guardian of _____ DOB _____

Your child's health record shows the following immunizations are incomplete. The boxes checked below indicate the dates that are missing.

<i>Vaccine Type</i>	<i>Primary Series Doses</i>			<i>Booster</i>	
				<i>First</i>	<i>4 Year</i>
DPT, Td					
Polio					
MMR		///////	///////	////////////////	
Measles		///////	///////	////////////////	
Rubella		///////	///////	////////////////	////////////////
Mumps		///////	///////	////////////////	////////////////
HIB					////////////////
Hep B					
Mantoux					
Varicella					
Pneumococcal Vaccine (PreK)					
Meningococcal Vaccine (Gr. 6)					
Tdap (Gr.6)					

Immunization Requirements (effective 1-2008)

- DPT**-minimum of 4 doses (booster dose must be on or after 4th birthday)
- Polio**- minimum of 3 doses (booster dose must be on or after 4th birthday)
- MMR**- 2 doses (one dose on or after 1st birthday) plus (booster dose)
- Hep B**- 3 doses
- HIB**- 1 dose after 1st birthday- for Preschool
- Varicella**- 1 dose or doctor verification of disease
- Pneumococcal vaccine**- Preschool
- Meningococcal Vaccine**- Gr. 6
- Tdap**- Grade 6

Your doctor or clinic must administer the required immunization, and the confirmation of the administration must be given to the Nurse on or before **SCHOOL STARTS (must show at least 1 dose of DPT, Polio & MMR for admission to school.)**. After that date, the student will be *excluded* from school until the immunization is administered.

School Nurse Educator

Phone