**STATE OF NEW JERSEY**  
**HEALTH HISTORY AND APPRAISAL**

**VACCINE TYPE**

<table>
<thead>
<tr>
<th>Diphtheria, Tetanus, Pertussis (DtaP) or any combination</th>
<th>1st Dose</th>
<th>2nd Dose</th>
<th>3rd Dose</th>
<th>4th Dose</th>
<th>5th Dose</th>
<th>LEAD SCREENING</th>
</tr>
</thead>
<tbody>
<tr>
<td>TdP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Test Date</td>
</tr>
</tbody>
</table>

| Polio – Inactivated Polio Vaccine (IPV)                   |          |          |          |          |          | Result         |
|///////////////////////////////////////////////////////////|

| Mumps, Rubella (MMR)                                     |          |          |          |          |          |                |

| Haemophilus B (Hib)**                                     |          |          |          |          |          |                |

| Hepatitis B                                              |          |          |          |          |          |                |

| Varicella                                                |          |          |          |          |          |                |

| Pneumococcal Conjugate                                   |          |          |          |          |          |                |

| Meningococcal                                            |          |          |          |          |          |                |

| Hepatitis A***                                            |          |          |          |          |          |                |

| HPV (Human Papillomavirus) ***                            |          |          |          |          |          |                |

**HISTORY**

- **FOOD ALLERGIES**
  - Diabetes
  - Lyme Disease

- **NON-FOOD/NON-MEDICATION ALLERGIES**
  - Influenza (Flu)
  - Mononucleosis

- **ASTHMA**
  - Drug Allergies
  - Chronic Otitis Media

- **CONGENITAL DISORDER**
  - Congenital Heart Disease

- **CONVULSIVE DISORDER**
  - Hepatitis

**VISION**

- With Corrective Lens
  - R
  - L
  - BOTH

- Without Corrective Lens
  - R
  - L
  - BOTH

**HEARING**

- Pure Tone
  - R
  - L

**HISTORY**

- **YEAR**
- **YEAR**
- **YEAR**
- **YEAR**

**CHILDHOOD LEAD SCREENING REQUIREMENTS**

- All children should be tested at both 12 and 24 months of age.
- Any child 25 to 72 months (less than 6 years) of age who has never previously been tested.
- Any child up to 72 months of age who has been exposed to a known or suspected source of lead.
## Minimal Immunization Requirements for School Attendance in New Jersey

### DISEASE(S) | MEETS IMMUNIZATION REQUIREMENTS | COMMENTS
--- | --- | ---
**DTaP** (AGE 1-6 YEARS): 4 doses, with one dose given on or after the 4th birthday, OR any 6 doses. 
(AGE 7-9 YEARS): 3 doses of Td or any previously administered combination of DTP, DTaP, and DT to equal 3 doses. | Any child entering pre-school, pre-Kindergarten, or Kindergarten needs a minimum of four doses. Pupils after the seventh birthday should receive adult type Td. DTP/Hib vaccine and DTaP also valid DTP doses. Laboratory evidence of immunity is also acceptable. |
**Tdap** GRADE 6 (or comparable age level for special education programs): 1 dose | For pupils entering Grade 6 on or after 9-1-08 and born on or after 1-1-97, A child does not need a Tdap dose until FIVE years after the last DTP/DTaP or Td dose. |
**Poliomyelitis** (POLIO) (AGE 1-6 YEARS): 3 doses, with one dose given on or after the 4th birthday, OR any 4 doses. 
(AGE 7 or OLDER): Any 3 doses. | Either Inactivated Polio Vaccine (IPV) or Oral Polio Vaccine (OPV) separately or in combination is acceptable. Polio vaccine is not required of pupils 16 years of age or older. Laboratory evidence of immunity is also acceptable. |
**Measles** if born before 1-1-95, 1 dose of a live Measles-containing vaccine on or after the first birthday. 
if born on or after 1-1-96, 2 doses of a live Measles-containing vaccine on or after the first birthday. 
If entering a college or university after 9-1-95 and previously unvaccinated, 2 doses of a live Measles-containing vaccine on or after the first birthday. | Any child over 15 months of age entering child care, pre-school, or pre-Kindergarten needs a minimum of 1 dose of measles vaccine. Any child entering Kindergarten needs 2 doses. Previously unvaccinated students entering college after 9-1-95 need 2 doses of measles-containing vaccine or any combination containing live measles virus administered after 1968. Documentation of 2 prior doses is acceptable. Laboratory evidence of immunity is also acceptable. Intervals between first and second doses/measles/MMR/MMRV cannot be less than 1 month. |
**Rubella and Mumps** 1 dose of live Mumps-containing vaccine on or after the first birthday. 
1 dose of live Rubella-containing vaccine on or after the first birthday. | Any child over 15 months of age entering child care, pre-school, or pre-Kindergarten needs 1 dose of rubella and mumps vaccine. Any child entering Kindergarten needs 1 dose each. Each student entering college for the first time after 9-1-95 needs 1 dose of rubella and mumps vaccine or any combination containing live rubella and mumps virus administered after 1968. Laboratory evidence of immunity is also acceptable. |
**Varicella** 1 dose on or after the first birthday. | All children 19 months of age and older enrolled into a child care/pre-school center after 9-1-04 or children born on or after 1-1-98 entering a school for the first time in Kindergarten or Grade 1 need 1 dose of varicella vaccine. Laboratory evidence of immunity, physician’s statement or a parental statement of previous varicella disease is also acceptable. |
**Haemophilus influenzae type b (Hib)** (AGE 2-11 MONTHS)\(^{(1)\)}; 2 doses 
(AGE 12-69 MONTHS)\(^{(1)\}}; 1 dose | Mandated only for children enrolled in child care, pre-school, or pre-Kindergarten. \(^{(1)}\) Minimum of 2 doses of Hib vaccine is needed if between the ages of 2-11 months. \(^{(2)}\) Minimum of 1 dose of Hib vaccine is needed after the first birthday. DTP/Hib and Hib/Hep B also valid Hib doses. |
**Hepatitis B** (K-Grade 12): 3 doses or 2 doses \(^{(1)}\} | If a child is between 11-15 years of age and has not received 3 prior doses of Hepatitis B then the child is eligible to receive 2-dose Hepatitis B Adolescent formulation. Laboratory evidence of immunity is also acceptable. |
**Pneumococcal Vaccine** (AGE 2-11 MONTHS)\(^{(1)\}}; 2 doses 
(AGE 12-69 MONTHS)\(^{(1)\}}; 1 dose | Mandated only for children enrolled in child care, pre-school, or pre-Kindergarten. \(^{(1)}\) Minimum of 2 doses of Pneumococcal vaccine is needed if between the ages of 2-11 months. \(^{(2)}\) Minimum of 1 dose of Pneumococcal vaccine is needed after the first birthday. |
**Meningococcal Vaccine** (Entering Grade 6 (or comparable age level for Special Ed programs): 1 dose \(^{(1)}\}) 
(Entering a four-year college or University, previously unvaccinated and residing in a campus dormitory): 1 dose \(^{(2)}\}) | For pupils entering Grade 6 on or after 9-1-08 and born on or after 1-1-97. \(^{(1)}\) Previously unvaccinated students entering a four-year college or University after 9-1-04 and who reside in a campus dormitory, need 1 dose of meningococcal vaccine. Documentation of one prior dose is acceptable. |
**Influenza** (AGES 6-59 MONTHS): 1 dose ANNUALLY | For children enrolled in child care, pre-school or pre-Kindergarten on or after 9-1-08. 1 dose to be given between September 1 and December 31 of each year. |

### Age Appropriate Vaccinations (for Licensed Child Care Centers/Pre-Schools)

**Child's Age** | **Number of Doses Child Should Have (By Age):**
--- | ---
2-3 Months | 1 dose DTaP, 1 dose Polio, 1 dose Hib, 1 dose PCV7
4-5 Months | 2 doses DTaP, 2 doses Polio, 2 doses Hib, 2 doses PCV7
6-7 Months | 3 doses DTaP, 2 doses Polio, 2-3 doses Hib, 2-3 doses PCV7, 1 dose Influenza
8-11 Months | 3 doses DTaP, 2 doses Polio, 2-3 doses Hib, 2-3 doses PCV7, 1 dose Influenza
12-14 Months | 3 doses DTaP, 2 doses Polio, 1 dose Hib, 2-3 doses PCV7, 1 dose Influenza
15-17 Months | 3 doses DTaP, 2 doses Polio, 1 dose MMR, 1 dose Hib, 1 dose PCV7, 1 dose Influenza
18 Months-4 Years | 4 doses DTaP, 3 doses Polio, 1 dose MMR, 1 dose Hib, 1 dose PCV7, 1 dose Influenza

### Provisional Admission:
Provisional admission allows a child to enter/attend school but must have a minimum of one dose of each of the required vaccines. Pupils must be actively in the process of completing the series. If a pupil is <5 years of age, they have 17 months to complete the immunization requirements. If a pupil is 5 years of age and older, they have 12 months to complete the immunization requirements.

### Grace Periods:
- **4-day grace period:** All vaccines doses administered less than or equal to four days before either the specified minimum age or dose spacing interval shall be counted as valid and shall not require revaccination in order to enter or remain in a school, pre-school or child care facility.
- **30-day grace period:** Those children transferring into a New Jersey school, pre-school, or child care center from out of state or out of country may be allowed a 30-day grace period in order to obtain past immunization documentation before provisional status shall begin.