June 30, 2014

MEMORANDUM

TO: City and County Superintendents of Education

FROM: Thomas R. Bice, State Superintendent of Education

RE: Public Health Immunization Survey

Each year the Alabama Department of Public Health (ADPH) requests that we support the annual immunization survey. This survey provides current data indicating the immunization status of currently enrolled students. This information is used by the ADPH to assess statewide immunization coverage levels. Please complete and return the enclosed survey form to the ADPH (address, fax, and Web site are indicated on the survey form) by October 10, 2014.

The local education agency is responsible for ensuring that we are in compliance with the Family Educational Rights and Privacy Act (FERPA). The administrative procedures for the immunization audit will remain the same as in the past four years. The purpose of this visit will be to validate the information submitted on the survey through an immunization audit and to answer your questions regarding immunization records. The parent/guardian will have the privilege to opt out of the immunization audit.

There are two significant changes in the immunization requirements for this school year:

- Documentation of Varicella (chickenpox) vaccination or immunity will be required for preschool-aged children through twelfth grade.
- Documentation of Tdap vaccination will be required for Alabama students ages 11 or older entering sixth, seventh, eighth, ninth, and tenth grade.

If you have any questions regarding the survey or immunization requirements, please contact the Immunization Area Manager listed at the bottom of the survey.

TRB/JV/KM

Enclosures

cc: City and County School Nurses

FY14-2072
August 18, 2014

Dear Principal or Headmaster:

Subject: 2014-2015 School Entry Immunization Survey

The Alabama School Immunization Law requires that students be in compliance with specific immunization requirements to attend school. In accordance with this law, students must be immunized against the following diseases: diphtheria, pertussis, tetanus, polio, measles, mumps, rubella, and varicella. Vaccination information for each grade level, 3-year-old kindergarten through 12th grade, is requested so that ADPH is able to report specific information about age-appropriate vaccinations to the Centers for Disease Control and Prevention. The State of Alabama immunization requirements are available at www.adph.org/Immunization/Resources/Alabama School Immunization Law.

The Alabama Department of Public Health (ADPH), Immunization Division, annually evaluates the immunization status of school-aged children using the Alabama School Entry Immunization Survey, which is completed by individual schools. For the 2013-2014 school term, 94.11% of all public and private students were in compliance with State required vaccinations. This assessment identifies students who need additional vaccines or documentation and assist in the school’s effort to comply with statutory requirements. A copy of the survey is enclosed along with instructions for its completion as well as a sample letter your school may send to the parents of children who are not up-to-date or have an expired Alabama Certificate of Immunization. Additionally, you may complete the survey utilizing the following URL link:

http://www.adph.org/Extranet/Forms/Form.asp?formID=4452

The changes for the 2014-2015 school year are as follows:

- The requirement for one dose of varicella (chickenpox) vaccine or documentation of immunity includes children entering grades K-12. Currently, the Advisory Committee on Immunization Practices (ACIP) recommends a second dose of varicella vaccine for all children aged 4-6 years. A second dose of varicella vaccine is recommended, but not
required, for children and adolescents who previously received one
dose prior to age 13 years. Two doses are required for students 13
years of age or older beginning the series. The survey will collect data
for students who have received one dose of varicella vaccine, two doses
of varicella vaccine, and for students that have already had chickenpox
disease.

- A dose of Tdap vaccine is now required for Alabama students’ ages 11
  years or older entering 6th, 7th, 8th, 9th, and 10th grades. Students
  entering these grades will need to comply with these new requirements
  along with the existing grade requirements.

Moreover, please return the completed Alabama School Entry Survey by Friday,
October 10, 2014, to the person and address listed on the bottom of the survey. Your
school may be visited later in the school year by a designated public health representative
to validate information submitted on this survey. Please contact the Immunization
Manager listed on the bottom of the survey for questions or if you need more information
about immunization requirements. A map is enclosed with the Area Immunization
Manager’s contact information for each county.

The Immunization Division is aware of restrictions imposed by the Family
Educational Rights and Privacy Act and continues to work with the Department of
Education and State School Nurse Administrator, Jennifer C. Ventress, to ensure that
subsequent validation audits conducted by ADPH staff conforms with the law. An
opt-out letter for parents has been developed for this purpose. You may send the letter
to parents the first day of school, or you may wait until you are contacted by ADPH staff
prior to their conducting the validation audit. A copy of the letter is enclosed.

Thank you for your assistance in completing this survey.

Sincerely,

[Signature]

Harrison Wallace MPH
Director, Bureau of
Communicable Diseases

HW/nsm

Enclosures

cc:  Thomas R. Bice, Ed.D.
     Dr. Scott Hopkins
     Mr. Don Oswald
     Jennifer C. Ventress, RN, BSN
INSTRUCTIONS FOR COMPLETING THE
2014-2015 SCHOOL ENTRY IMMUNIZATION SURVEY

According to the Rules of the State Board of Health, Chapter 420-6-1-.02, an Alabama Certificate of Immunization (also known as a Blue Slip), an Alabama Certificate of Religious Exemption, or a Medical Exemption (found on the back of the Blue Slip) is required for school attendance. A personal immunization record or an out-of-state record is not acceptable.

A copy of the Rules of the State Board of Health Governing the Immunization of School Children is available from the Alabama Department of Public Health website, www.adph.org/Immunization/Resources/Alabama School Immunization Law. If you have questions about school rules or the completion of this survey, please call the contact person listed at the bottom of the survey form. Please complete all blank spaces at the top of the survey. The completed survey should be returned to the address at the bottom of the form by the date specified. Please follow these instructions to complete the survey form:

1. **Total Enrollment (Column 1):** Enter the total number of students enrolled in each grade.

2. **Unexpired Blue Slip (Column 2):** Enter the number of students, by grade, who have an Alabama Certificate of Immunization with a valid expiration date in the upper right corner.

   Note: **Do not** enter students who have a Medical Exemption, Religious Exemption, Both Medical Exemption & Blue Slip, or Both Religious Exemption & Blue Slip in this column.

3. **Permanent Medical Exemption (Column 3):** A permanent medical exemption is located on the back of the Blue Slip. This section specifically reads, “State of Alabama Permanent Medical Exemption”. Look on the back of all student forms to determine if a physician has granted a permanent medical exemption for vaccines. Enter the number of students, by grade, with a permanent medical exemption in this column.

   Note: This applies only to children who are permanently medically exempt from all vaccines are included in Column 3. Students may be permanently medically exempt from diphtheria/tetanus/pertussis, measles, mumps, rubella, polio, and varicella vaccines.

4. **Temporary Medical Exemption (Column 4):** A temporary medical exemption is located on the back of the Blue Slip. This section specifically reads, “State of Alabama Temporary Medical Exemption”. Look on the back of all student forms to determine if a physician has granted a temporary medical exemption for vaccines. Enter the number of students, by grade, with a medical exemption in this column.

   Note: This applies only to children who are temporarily exempt from all vaccines are included in Column 4. Students may have a temporary medical exemption from diphtheria/tetanus/pertussis, measles, mumps, rubella, polio, and varicella vaccines.
5. **Religious Exemption (Column 5):** Enter the number of students, by grade, who have an official Certificate of Religious Exemption issued from the county health department.

Note: This applies only to students who are religiously exempt from all vaccines are included in Column 5. Students may be religiously exempt from diphtheria/tetanus/pertussis, measles, mumps, rubella, polio, and varicella vaccines. Students who are religiously exempt from all required vaccines do not need to have a Blue Slip.

6. **Both Medical Exemption and Blue Slip (Column 6):** Enter the number of students, by grade, who have an Alabama Certificate of Immunization with a valid expiration date and an official Certificate of Medical Exemption from the county health department or private physician.

Note: This applies only to students who have a medical exemption for some of the state vaccine requirements. Students in Column 6 must have a current blue slip showing coverage for the vaccines that are not listed on the Certificate of Medical Exemption.

7. **Both Religious Exemption and Blue Slip (Column 7):** Enter the number of students, by grade, who have an Alabama Certificate of Immunization with a valid expiration date and an official Certificate of Religious Exemption issued from the county health department.

Note: This applies only to students who have a religious exemption for some of the state vaccine requirements. Students in Column 7 must have a current blue slip showing coverage for the vaccines that are not listed on the Certificate of Religious Exemption.

8. **Expired Blue Slip (Column 8):** Enter the number of students who have expired certificates.

Note: Please do not hold the survey for students with forms that are expired. Send the survey by the due date and continue to follow these students until a valid certificate is placed in the student record.

9. **No Record on File (Column 9):** Enter the number of students who do not have a Blue Slip, Certificate of Religious Exemption, or Medical Exemption in their record.

10. **Required One dose of Varicella Vaccine (Column 10):** Enter the number of children in grades three-year-old kindergarten (K-3) through 12th grade who have documentation of at least one dose of Varicella Vaccine on the Blue Slip.

11. **Recommended Two doses of Varicella Vaccine (Column 11):** Enter the number of children in grades three-year-old kindergarten (K-3) through 12th grade who have documentation of two doses of Varicella Vaccine on the Blue Slip.

**Note:** If a student was counted as having two doses of Varicella in Column 11, please also count this student in Column 10. Students with two doses of Varicella will be counted twice (once in Column 10 and once in Column 11) since
every student with two doses has already received one dose of Varicella Vaccine and should be properly documented.

12. **Varicella Disease Documentation or Test for Immunity (Column 12):** Enter the number of children in grades three-year-old kindergarten (K-3) through 12th grade who have documentation of already having had the disease or test for immunity on the Blue Slip. No other form of documentation is acceptable.

   Note: **Do not** include students who received any doses of varicella vaccine in Column 12.

   **Note:** The total for Columns 2 - 9 should equal the total enrollment in Column 1.
2014-2015 ALABAMA SCHOOL ENTRY SURVEY

Name of School: ____________________________________________ Public  Private (Circle)

Address __________________________________________________________ City __________________ Zip __________________ County __________________

Person Completing Survey __________________________________________ Telephone ( )

Signature of Principal or Headmaster

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<th>Grade</th>
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<th>3 Permanent Medical Exemption</th>
<th>4 Temporary Medical Exemption</th>
<th>5 Religious Exemption</th>
<th>6 Both Med Ex &amp; Blue Slip</th>
<th>7 Both Rel Ex &amp; Blue Slip</th>
<th>8 Expired Blue Slip</th>
<th>9 No Record on File</th>
<th>10 Required One Dose of Varicella Vaccine</th>
<th>11 Recommended Two doses of Varicella Vaccine</th>
<th>12 Varicella disease documentation</th>
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Please call: ___________________________ at ___________________________ if you have a question about this survey.

Return Survey By:  Friday, October 10, 2014  To:
Dear Parent or Guardian,

Each year, the Alabama Department of Public Health (ADPH) conducts an audit of student immunization records to ensure that children enrolled in school in Alabama are protected from vaccine-preventable diseases or have a valid exemption from vaccination. Documentation of vaccination and medical exemptions is contained on the Alabama Certificate of Immunization (also known as the Blue Slip) or on an Alabama Certificate of Religious Exemption. During the course of the audit, an ADPH employee will check for appropriate vaccinations and a valid expiration date on the Blue Slip or for an appropriate exemption form. If a child needs further vaccination or an updated certificate, the school will be notified at the completion of the audit. No identifying information about the child is kept by the ADPH employee.

The Family Educational Rights and Privacy Act mandates parental consent be obtained for persons not employed by this school to view the records of its students. If you do not wish your child’s record to be evaluated by ADPH, please sign this letter in the space below and return it to the school by ________________. No response from you will indicate that you will allow ADPH to audit the immunization records of your child.

Thank you for your assistance.

Sincerely,

Principal’s Name
School Name

I deny access to my child’s vaccination record by the Alabama Department of Public Health.

Name of Child: ____________________________

Parent or Guardian: ________________________

Date: __________________
Fecha

Estimado padre o tutor:

Todos los años, el Departamento de Salud Pública de Alabama (Alabama Department of Public Health, ADPH) efectúa una revisión de los registros de vacunación de los alumnos para garantizar que los niños que asisten a las escuelas de Alabama estén protegidos contra las enfermedades prevenibles mediante el uso de vacunas o que cuenten con una exención válida de la vacunación. La documentación relativa a las vacunaciones y exenciones médicas está incluida en el Certificado de Inmunización de Alabama (Alabama Certificate of Immunization), también conocido como Tarjeta azul, o en un Certificado de Exención Religiosa de Alabama (Alabama Certificate of Religious Exemption). Durante el transcurso de la revisión, un empleado de ADPH verificará las vacunas procedentes y fecha de caducidad válida en la Tarjeta azul o bien en el formulario de exención correspondiente. Si un niño debe recibir más vacunas o precisa un certificado actualizado, la escuela será notificada una vez concluida la revisión. El empleado de ADPH no conservará información personal sobre el menor.

La Ley de Derechos Educacionales y de Privacidad de la Familia (Family Educational Rights and Privacy Act) establece que se requiere el consentimiento de los padres para que personas que no están empleadas por la escuela puedan ver los registros de sus alumnos. Si no desea que el ADPH analice el registro de su hijo/a, firme esta carta en el espacio provisto a continuación y presentela en la escuela antes del _________________.
En caso de no recibirse una respuesta de parte suya, se entenderá que usted autoriza al ADPH a revisar los registros de vacunación de su hijo/a.

Gracias por su colaboración.

Atentamente,

Nombre del director
Nombre de la escuela

Me opongo a que el Departamento de Salud Pública de Alabama tenga acceso al registro de vacunación de mi hijo/a.

Nombre del menor:_________________________________________________________

Padre o tutor:___________________________________________________________

Fecha:________________________________________

Spanish Ferpa Letter
Sample Parent Letter

Dear Parent or Guardian:

The State of Alabama School Law requires all students entering public or private school in Alabama to present an up-to-date Alabama Certificate of Immunization (Blue Slip), an Alabama Certificate of Religious Exemption, or an Alabama Certificate of Medical Exemption for certain vaccine-preventable diseases before entering school at any grade level. All Blue Slips must contain the dates and vaccine type of all vaccines given.

While conducting the annual School Entry Survey, it was discovered that your child lacked the item(s) marked below. Please bring in a revised (Blue Slip) indicating your child’s updated immunization history. Your child may be excluded from school this year if there is a reported case of a vaccine-preventable disease.

If you have any questions or need additional information concerning required vaccines or certificates, please call your physician or local county health department.

Thank you for your cooperation.

Sincerely,

Principal or Headmaster Signature

Your child needs:

_____ Alabama Certificate of Immunization

_____ Documentation of varicella vaccine, history of disease, or lab test for immunity

_____ Documentation of tetanus/diphtheria/acellular pertussis

_____ Documentation of polio vaccine received on or after the 4th birthday

_____ Documentation of MMR vaccine
Sample Parent Letter (Modelo de carta a los padres)

Estimado padre, madre o tutor:

Antes de asistir a la escuela en cualquier nivel de enseñanza, todos los alumnos que ingresan a una escuela pública o privada en Alabama deben presentar un Certificado de Inmunización de Alabama (formulario azul) actualizado, un Certificado de Exención Religiosa de Alabama o un Certificado de Exención Médica de Alabama. Todos los formularios azules deben incluir las fechas de todas las vacunas administradas.

Durante la realización de la Encuesta de Ingreso Escolar que se lleva a cabo todos los años se descubrió que su hijo no posee la documentación que se indica abajo. Le pedimos que traiga un formulario revisado en el que se indiquen los registros de inmunizaciones actualizados de su hijo. Su hijo no podrá ingresar/reingresar a la escuela el próximo año lectivo si no posee un Certificado de Inmunización de Alabama actualizado.

Si desea formular preguntas o necesita información adicional sobre las vacunas o los certificados requeridos, llame a su médico o al departamento de salud de su condado.

Muchas gracias por su colaboración.

Atentamente,

Firma del rector o director

Su hijo necesita:

_____ Certificado de Inmunización de Alabama.

_____ Documentación de vacuna contra la varicela, antecedentes de enfermedades o análisis de laboratorio que documente inmunidad.

_____ Refuerzo de vacuna contra el tétano/la difteria (se requiere el formulario azul actualizado para el ingreso escolar).

_____ Documentación de vacuna contra la poliomielitis recibida a los 4 años de edad o después.

_____ Documentación de vacuna que contenga tétano/difteria recibida a los 4 años de edad o después.

_____ Documentación de vacuna contra las paperas, el sarampión, la rubéola y la varicela (MMR).