

Immunization Guidelines



Age Appropriate Immunization Requirements For Children Enrolled In Child Care Programs - Valid 9/01/10 - 8/31/11

Per **COMAR 13A.15.03.02 and 13A.16.03.04 G & H**

immunization requirements are met only by complying with the vaccine chart below.



Instructions: Find the age of the child in the column labeled “Child’s Current Age”. Read across the row for each required vaccine. The number in the box is the number of doses required for that vaccine based on the CURRENT age or grade level of the child. The age range in the column does not mean that the child has until the highest age in that range to meet compliance. Any child whose age falls within that range must have received the required number of doses based on his/her CURRENT age in order to be in compliance with COMAR.

Vaccine types and dosage numbers required for children enrolled in child care programs								
Vaccine		DTaP/DTP/ DT/Td ¹	Polio ²	Hib ³	MMR ^{2,4}	Varicella ^{2,4,5} (Chickenpox)	Hepatitis B ²	Pneumococcal Conjugate ³ (PCV13)
Child’s Current Age or Grade Level								
Less than 2 months		0	0	0	0	0	1	0
2 - 3 months		1	1	1	0	0	1	1
4 - 5 months		2	2	2	0	0	2	2
6 - 11 months		3	3	2	0	0	3	2
12 - 14 months		3	3	At least one dose given after 12 months of age	1	1	3	2
15 - 23 months		4	3	At least one dose given after 12 months of age	1	1	3	2
24 - 59 months		4	3	At least one dose given after 12 months of age	1	1	3	1
5 years		4	3	Not required	2	1	3	Not required
Grade Level Grade (Ungraded)		DTaP/DTP/ DT/Td ¹	Polio ²	Hib	MMR ²	Varicella ^{2,3} (Chickenpox)	Hepatitis B ²	Pneumococcal Conjugate (PCV13)
Grades K - 12	(5 – 18 +yrs)	4 or 3 ⁴	3 ⁵	Not required	2	1	1	Not required

CHART IS FOR USE BY CHILD CARE FACILITY OPERATORS ONLY TO ASSESS AGE APPROPRIATE IMMUNIZATION STATUS

*** See footnotes on back**

**Vaccine Requirements For Children
Enrolled in Childcare Programs (Valid 9/1/10 - 8/31/11)**

FOOTNOTES

1. If DT vaccine is given in place of DTP or DTaP, a physician documented medical contraindication is required.
2. Proof of immunity by positive blood test is acceptable in lieu of vaccine history for hepatitis B, polio and measles, mumps, rubella and varicella.
3. Hib and PCV(Prevnar™) are not required for children older than 59 months (5 years) of age.
4. All doses of measles, mumps, rubella and varicella vaccines should be given on or after the first birthday. However, upon record review for students in preschool through 12th grade, a preschool or school may count as valid vaccine doses administered less than or equal to four (4) days before first birthday.
5. One dose of varicella (chickenpox) is required for a student younger than 13 years old. Two doses of varicella vaccine are required for a previously unvaccinated student 13 years of age or older. Medical diagnosis of varicella disease is acceptable in lieu of vaccination. Medical diagnosis is documented history of disease provided by a physician or health care provider. Documentation must include month and year. In the absence of documentation a medical provider or local health department may verify immunity via blood test, **but revaccination may be more expedient.**
6. Four (4) doses of DTP/DTaP are required for children less than 7 years old. Three (3) doses of tetanus and diphtheria containing vaccines (DTP, DTaP, Tdap, DT or Td) are required for children 7 years of age and older.
7. Polio vaccine is not required for persons 18 years of age and older.
8. Two doses of Hepatitis B vaccine is acceptable only if the student was vaccinated with the Merck & Co. brand vaccine **Recombivax™ HB Adult Formulation.** Recombivax™ HB Adult Formulation vaccine is licensed for use in adolescents 11 - 15 years of age as a two-dose series.