

CERTIFICATE OF IMMUNIZATION



Child's Name (Last name, first name, middle)

Birthdate (mm/dd/yy)

Parent/Guardian Name (Last name, first name, middle)

Phone (please include area code xxx-xxx-xxxx)

Address

City State Zip Code

Section 1a. Religious Exemption

Check here if religious exemption to immunization selected by parent/guardian

1b. Health Examination Documentation (if required)

This child has been examined: MM / DD / YY

Certified by (Signature/Stamp)

1c. Check if needed

Dental Screening

Vision Screening

Unless specifically exempted by law, Tennessee law requires a certificate on file for each child in attendance in any school or child care facility in Tennessee. Detailed instructions for this form and explanation of requirements are in "Instructions for Completion of Immunization Certificates" and the "Official Immunization Schedule" at the Tennessee Department of Health website (<http://health.state.tn.us/CEDS/required.htm>) and on the Tennessee Web Immunization System.

VACCINE	DATE MM / DD / YY	DATE MM / DD / YY	DATE MM / DD / YY	DATE MM / DD / YY	DATE MM / DD / YY	DATE MM / DD / YY	Total Doses	Diagnosed (YY)	+Serology (YY)	History (YY)	Medical Exemption (X)
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Section 2a. Required Vaccines for School or Child Care Attendance (Dates Required)

Hib Child Care Only (<5 years)											
Pneumococcal (PCV) Child Care Only (<5 years)											
DTP, DTaP, DT, Td											
Poliomyelitis											
Hepatitis B <input type="checkbox"/> Check here if 11-15 years 2-dose schedule used									YY		
Hepatitis A Child Care Effective 7/2010 Kindergarten Effective 7/2011									YY		
Measles									YY		
Mumps									YY		
Rubella									YY		
Varicella								YY	YY	YY	
Tdap Booster 7 th Grade Entry Only											

2b. Recommended Vaccines (Documentation Optional)

Rotavirus											
Influenza											
Meningococcal											
HPV											

Section 3. Provider Assessment (✓select one*, not valid if blank)

- A) Temporary Certificate - Expires** MM / DD / YYYY
Expiration date one month after date next catch-up immunization is due.
- B) Up to Date for Child Care Entry and <18 Months of Age**
Only if requirements incomplete, but up to date for age. Expires at 19 months of age.
- C) Complete for Child Care / Pre-School***
Fulfills all requirements for child care / pre-school or pre-K under 5 years of age.
- D) Complete K-6th Grade***
Fulfills requirements, Kindergarten through 6th grade.
- E) Complete 7th Grade or Higher**
Fulfills requirements, 7th grade or higher.

*If age 4 years and fulfills requirements for Pre-School and Kindergarten, check BOTH Boxes C and D.

Section 4. (Required) Printed or Stamped Name, Address, Phone of Qualified Healthcare Provider (MD, DO, PA, Advanced Practice Nurse or Health Department):

Certified by (Signature/Stamp)

MM | DD | YYYY

Date of Issue

Vaccine Requirements for Attending Child Care Facilities, Pre-Schools and Schools in Tennessee*

Recommended Schedule of Required Doses for Attendance in Child Care / Pre-School / Pre-K and School For Children Who Started Immunizations Before Age 7 Years**

Required Vaccines with footnote numbers in []	2 Months of Age	4 Months of Age	6 Months of Age	12-15 Month of Age	16-18 Month of Age	4-6 Yrs.* (School Entry)	Total Doses Required*** For Checking Complete For School Attendance Box on Immunization Certificate
[1] Hib HbOC or	1	2	3	4			N/A for school (See Footnote [1])
[1] Hib PRP-T or	1	2	3	4			N/A for school (See Footnote [1])
[1] Hib PRP-OMP	1	2		3			N/A for school (See Footnote [1])
[2] PCV	1	2	3	4			N/A for school (See Footnote [2])
[3] DTP, DTaP, DT	1	2	3	4	5		5 or 4 (See Footnote [3])
[4] Polio	1	2		3		4	5, 4 or 3 (See Footnote [4])
[5] Hepatitis B	1	2		3			3 (See Footnote [5])
[6] Hepatitis A					1	2	2 (See Footnote [6])
[7] MMR				1		2	2 (See Footnote [7])
[8] Varicella				1		2	2 (See Footnote [8])
[9] Tdap							(See Footnote [9])

*These requirements were established in accordance with the current Recommended Childhood and Catch-Up Immunization Schedules, United States. Tennessee requirements for Kindergarten (5 years) include doses indicated for 4-6 years.

**For children starting immunizations at age 7 years or older, refer to the catch up schedule available at the Department of Health website or the ACIP catch-up schedule for that age available at www.cdc.gov/vaccines.

***Children who are behind schedule may attend while in the process of completing the requirements with minimum intervals as indicated below.

Minimum Ages For Initial Immunization And Minimum Intervals Between Doses

Vaccine	Minimum Age For First Dose	Minimum interval from dose 1 to 2	Minimum interval from dose 2 to 3	Minimum interval from dose 3 to 4	Minimum interval from dose 4 to 5	With respect to these intervals, 1 month is a minimum of 4 weeks or 28 days.
[1] Hib (Primary Series)						Do not restart any series, no matter how long since the previous dose. Doses given ≤ 4 days before the minimum age or the minimum interval may be counted as valid. Two different live vaccines must be given on the same day or spaced at least 28 days apart.
HbOC & PRP-T	6 weeks	1 month	1 month	See Footnote [1]	N/A	
PRP-OMP	6 weeks	1 month	See Footnote [1]	N/A	N/A	
[2] PCV	6 weeks	1 month	1 month	See Footnote [2]	N/A	
[3] DTP/DTaP (DT)	6 weeks	1 month	1 month	6 months	See Footnote [3]	
[4] Polio	6 weeks	1 month	1 month	See Footnote [4]	See Footnote [4]	
[5] Hepatitis B	birth	1 month	See Footnote [5]	N/A	N/A	
[6] Hepatitis A	12 months	6 months				
[7] MMR	12 months	1 month	N/A	N/A	N/A	
[8] Varicella	12 months	3 months	N/A	N/A	N/A	
[9] Tdap	See Footnote [9]					

Footnotes

- [1] The number of doses of Hib depends on age at 1st dose and brand of vaccine given. The last dose in the series necessary to meet requirements, whether 3rd or 4th, should be given at least 2 months after the previous dose and not before 12 months of age. One dose is sufficient to meet requirements if it is given at age 15 months or later. Hib is required for children younger than 5 years attending child care facilities. Hib is not required for kindergarten or higher grades and is not indicated for children who have reached the 5th birthday. If given on schedule, PRP-T and HbOC have a 3 dose primary series and a booster after age 12 months. PRP-OMP has a 2-dose primary schedule and a booster after 12 months. Providers are responsible for verifying that the child meets the appropriate schedule for the brand used.
- [2] The number of doses in the PCV series depends on age at 1st dose. The last dose in the series should be given at least 2 months after the previous dose and not before 12 months of age. One dose of PCV is required for all children aged 24-59 months in child care with any incomplete schedule.
- [3] The minimum interval between the 4th and 5th doses is 6 months; it may be given as early as 12 months, but typically is given at age 15-18 months. One dose of DTP/DTaP/DT must be on or after the 4th birthday. If the 4th dose was on or after the 4th birthday, the 5th dose is not needed. The 4th dose should be administered a minimum of 6 months after the 3rd dose. However, the 4th dose does not need to be repeated if administered ≥ 4 months after dose 3. Total doses of diphtheria and tetanus toxoids should not exceed 6 before the 7th birthday.
- [4] The final dose of the polio vaccine series must be given on or after the 4th birthday and at least 6 months after the previous dose. If 4 doses are administered before the 4th birthday, a 5th dose should be given at 4-6 years. If the 3rd dose of an all IPV or all OPV series is given on or after the 4th birthday and at least 6 months after the 2nd dose, a 4th dose is not needed.
- [5] The 3rd dose of Hepatitis B vaccine should be given a minimum of 4 months after the 1st dose and 2 months after the 2nd dose and not before 24 weeks of age.
- [6] One dose of Hepatitis A vaccine is required for all children in child care aged 18 months or greater. The recommended schedule is for two doses to be given, 6 months apart, between 12 and 24 months of age. Effective July 2011, proof of a total of two doses is required by Kindergarten entry.
- [7] The MMR requirement is 2 doses of measles vaccine, 2 doses of mumps vaccine and 2 doses of rubella vaccine. The vaccines may be given as MMR or MMRV (combined antigens) or as single antigens.
- [8] The varicella requirement is for 2 doses of varicella-containing vaccine or history of disease for all students entering K or 7th grade, and new entrants into a Tennessee school in any other grade. These may be administered as single dose varicella or in combination as MMRV.
- [9] Tdap is required for 7th grade entry; Tdap is NOT required if a Td booster dose is recorded as given less than 5 years before 7th grade entry (on the appropriate DTaP / DT / Td line of the certificate).

Immunization Requirement Summary for Child Care through 12th Grades Tennessee Department of Health Rule 1200-14-1-.29

Children enrolling in child care facilities, pre-school, pre-Kindergarten:

Infants entering child care facilities must be up to date at the time of enrollment and are required to provide an updated certificate after completing all of the required vaccines due by 18 months of age.

- *Haemophilus influenzae* type B (Hib): if younger than 5 years only
- Pneumococcal conjugate vaccine (PCV): if younger than 5 years only
- Diphtheria-Tetanus-Pertussis (DTaP, or DT if appropriate)
- Poliomyelitis (IPV or OPV)
- Hepatitis B (HBV)
- Hepatitis A: 1 dose, required by 18 months of age or older
- Measles, Mumps, Rubella (1 dose of each, usually given together as MMR)
- Varicella (1 dose or credible history of disease)

Children enrolling in Kindergarten:

- Diphtheria-Tetanus-Pertussis (DTaP, or DT if appropriate)
- Poliomyelitis (IPV or OPV): final dose on or after the 4th birthday required
- Hepatitis B (HBV)
- Hepatitis A: total of 2 doses, spaced at least 6 months apart
- Measles, Mumps, Rubella (2 doses of each, usually given together as MMR)
- Varicella (2 doses or history of disease): previously only one dose was required

All children entering 7th grade (including currently enrolled students):

- Verification of immunity to varicella: 2 doses or credible history of disease
- Tetanus-diphtheria-pertussis booster ("Tdap"): not required if a Td booster dose given less than 5 years before 7th grade entry is recorded on the DTaP/Td line

Children who are new enrollees in a TN school in grades *other* than Kindergarten or 7th:

- Diphtheria-Tetanus-Pertussis (DTaP, or DT if appropriate)
- Poliomyelitis (IPV or OPV): final dose on or after the 4th birthday required
- Hepatitis B (HBV)
- Measles, Mumps, Rubella (2 doses of each, usually given together as MMR)
- Varicella (2 doses or credible history of disease): only one dose was required until 2010

Children with medical or religious exemption to requirements:

- **Medical:** Physician (MD, DO) or health department authorized to indicate specific vaccines medically exempted (because of risk of harm) on the new form. Other vaccines remain required. The medical reason for the exemption does not need to be provided.
- **Religious:** This exemption requires a signed statement by the parent/guardian that vaccination conflicts with their religious tenets or practices. *If the child needs documentation of a health examination for the school, it must be noted by the healthcare provider on the immunization certificate. In that case, the provider should check the box that the parent has sought a religious exemption to explain why immunization information is absent or incomplete.*

Minimum ages or dose intervals: Tennessee follows published CDC guidelines. For vaccines with critical minimum age requirements or minimum dose intervals, doses are considered valid if given up to 4 days before the minimum age or dose interval. Doses administered more than 4 days early are considered invalid and should be repeated as recommended.

Alternative proof of immunity for certain diseases: A positive serology (year of test documented) is acceptable as an alternative to immunization for measles, mumps, rubella, hepatitis A, hepatitis B or varicella. For varicella, documentation of provider diagnosed varicella (year) or provider-verified credible history of illness given by a parent or guardian (year) also is acceptable. By documenting a history of disease, the provider is asserting that he or she is convinced that the child has had chickenpox.

Instructions for Completing Tennessee Certificates of Immunization (PH-4103, Rev. 5/11)

Q. Who can sign the Official Certificate?

A. Persons licensed in the state of Tennessee by the Board of Medical Examiners and the Board of Osteopathic Examiners, advanced practice nurses licensed by the Board of Nursing and any Tennessee health department. A *medical exemption* requires a physician or health department signature.

Q. How can an Official Certificate be completed?

A1. Hard copies are available to healthcare providers (not to parents) from local health departments or the Tennessee Immunization Program (call 615-741-7247 or 1-800-404-3006).

A2. (Preferred) Blank or pre-populated forms can be printed from the website of the Tennessee Web Immunization System (TWIS). TWIS is free to authorized users: visit <https://twis.tn.us>. Pre-populated certificates include demographic information, vaccinations and provider contact information. If the TWIS record is incomplete or if none exists, users can update or create a record before printing the Certificate.

Instructions for completing the Official Certificate (refer to Sample PH-4103, Rev. 5/11):

Note: a revised version was introduced in May 2011. The previous version (Rev. 3/10) is acceptable.

Child's identifying and contact details: Upper left corner, complete as indicated.

Section 1. This section is subject to school policy, health departments do not regulate this.

Section 1a. Religious Exemption: check this box if the Certificate is needed to provide documentation of a required health examination for a child not fully immunized for religious reasons.

Sections 1b and 1c. Health Examination Documentation (if required): Requirements set by local educational authorities. If necessary, provide date of examination and signature/stamp of the certifying healthcare provider. Also, check if dental or vision screening is needed.

Section 2a. Required Vaccines: dates of each valid dose are required (if TWIS printout has errors, write in and initial corrections).

Additional columns of required vaccine table (complete by hand):

Total Doses: Write in total number of valid doses of each vaccine given.

Diagnosed: Use if clinician diagnosed varicella illness. Year (YY) of diagnosis required.

+Serology: Accepted for hepatitis B or A, MMR and varicella. Year (YY) of test required.

History: Use if parent provides credible history of varicella illness. Year (YY) of disease required.

Medical Exemption: Mark an X if a specific vaccine is medically contraindicated (valid only with a physician or Health Department signature). The medical reason does not need to be provided.

Section 2b. Recommended Vaccines (optional): Dates *not* required, for information only.

Section 3. Provider Assessment options: **Certificate is not valid if Section 3 is incorrect or blank.**

Box A) Temporary Certificate – Expires [1 month after next catch up dose due]: Use *only* if a child is behind schedule on *required* vaccines. Give as many catch-up doses as possible, writing in the expiration date *1 month after* the next catch-up dose(s) is (are) due. A new certificate should be issued at each catch-up visit until required vaccinations are completed.

Box B) Up to Date for Child Care Entry and <18 Months of Age: Use when the child is younger than 18 months and age-appropriately vaccinated, but has not completed requirements. Depending on the schedule used by the healthcare provider, a child should complete requirements (Box C) between 12 and 18 months of age. Certificates with Box B marked are only valid *until* age 19 months: before then the parent or guardian must provide the child care facility with an updated certificate showing the child is complete (Box C). If a child enrolling at 12-18 months is complete, use Box C.

Box C) Complete for Child Care / Pre-School: The child has completed all requirements for child care or pre-school / pre-K. Requirements are routinely completed between 12-18 months of age.

Box D) Complete K-6th Grade: The child is at least 4 years old and has completed all requirements for enrolling in Kindergarten through 6th grade.

***Boxes C and D): Check both boxes** only if the child is at least 4 years old and has completed the requirements for pre-school (or pre-K) and Kindergarten.

Box E) Complete 7th grade or higher: Check **only** after Tdap booster dose given (typically at age 11-12 years) and varicella immunity verified before 7th grade entry (if child is a current student and already has a certificate on file, only the 7th grade requirements need to be included on this form).

Section 4: Printed name, address, phone and signature or stamped signature of the *qualified* provider and date of issue.

Back Page of Official Certificate: Reference for vaccine schedule, accepted minimum intervals/ages.

Tennessee Department of Health Immunization Program: Last Updated May 31, 2011