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# General Colorado Immunization Guidelines

## What does it mean for an enrolled student to be in compliance with the Colorado school entry immunization law (25-4-901 et seq, C.R.S)

There are three ways a student can be in compliance with school immunization law:

- **Fully Immunized:** student has received all school-required vaccines and a completed Certificate of Immunization is included in the student's electronic or hard copy file.
  - **In-Process:** student who is attending school is in the process of getting up-to-date on his/her required vaccines. Within 14 days of receiving notification, the student must receive required vaccines and submit a signed written plan for obtaining the remaining vaccines following the ACIP schedule for minimum intervals and ages.
  - **Exempted:** student has on file either a:
    - *Medical exemption* form signed by a Doctor of Medicine (MD), Doctor of Osteopathic Medicine (DO), Advanced Practice Nurse (APN) or delegated Physician Assistant (PA) because of a medical contraindication to receiving a vaccine OR
    - *Non-medical exemption* (religious or personal belief) signed by the parent, guardian, emancipated student or student 18 years of age or older.
- [www.colorado.gov/vaccineexemption](http://www.colorado.gov/vaccineexemption)

## What does it mean to be In-Process?

When a school finds that a student who is attending school is not up-to-date on her/his required vaccines and does not have an exemption on file, the school will notify parents informing them of the specific vaccines required for the student to attend school. Within 14 days after receiving direct personal notification that the student's immunization record is not up-to-date according to Colorado Board of Health requirements, the parent/guardian or emancipated student must submit documentation that the next required immunization has been given as well as a signed written plan for obtaining the remaining required immunizations. Parents/guardians are to provide a written plan for the remaining vaccines following the **Advisory Committee on Immunization Practices (ACIP)** schedule. (If a parent chooses to use an alternate immunization schedule that does not follow the ACIP minimum intervals or ages, that parent will need to submit an exemption for that vaccine(s) until the student is up-to-date on her/his required vaccines). The school can send the CDPHE "notices" available at [www.colorado.gov/cdphe/immunization-forms](http://www.colorado.gov/cdphe/immunization-forms).

## What is required of the school when an enrolled student is not in compliance (not fully immunized, not in-process or has not submitted a medical or non-medical exemption) according to the School Immunization Law/Colorado Board of Health?

If a student attending school does not meet one of the three compliance requirements listed above, that student is not permitted to attend school.

## What is the difference between required and recommended vaccines?

The Colorado school-required immunization schedule (ACIP) is the Board of Health mandated immunization schedule for attendance in Colorado schools. The vaccines required for school attendance for kindergarten through 12th grades include Hepatitis B (HBV), Diphtheria, Tetanus and acellular pertussis (DTaP), Tetanus, Diphtheria, and acellular Pertussis (Tdap), Inactivated Polio Vaccine (IPV), Measles, Mumps and Rubella (MMR) and Varicella (Var).

The "recommended" immunization schedule is the schedule approved by the ACIP that provides protection against several other vaccine-preventable diseases. Examples of important recommended vaccines include: Meningococcal, Hepatitis A, Human papillomavirus (HPV) and Influenza.

## What is the four day grace period for vaccines given earlier than the recommended age or interval between vaccines?

ACIP allows a **four day grace period** for minimum intervals between doses of vaccine and for the minimum age a vaccine can be administered. Examples:

1. The first doses of MMR or Varicella can be accepted as valid if given up to four days before the first birthday. If the first doses of MMR or Varicella vaccines were given more than four days before the first birthday, those doses are NOT valid doses and the school is not able to accept them.
2. If DTaP or IPV are administered 4 days before the minimum age of 6 weeks, those doses can be counted as valid.
3. Important note: There is no 4 day grace period allowed between 2 live vaccines such as MMR, Varicella and MMRV. If 2 live vaccines are NOT administered on the same day, they must have a full 28 days between doses.

## What are CDPHE school immunization records?

Official school immunization records include:

- Certificate of Immunization or an “approved alternate” Certificate of Immunization approved by the Colorado Department of Public Health and Environment (CDPHE).
- Medical exemption form signed by a MD, DO, APN or delegated PA  
[www.colorado.gov/vaccineexemption](http://www.colorado.gov/vaccineexemption)
- Non-medical exemption (religious or personal belief) signed by the parent, guardian, emancipated student or student at or over 18 years of age. (A parent may submit a “Statement of Exemption” in lieu of the non-medical exemption form).  
[www.colorado.gov/vaccineexemption](http://www.colorado.gov/vaccineexemption)

**Sometimes an immunization record does not include the complete date of vaccine administration. If a full date is not available, what is the default date for recording a vaccine in the record?**

- Scenario #1: The vaccine administered is MMR, MMRV or Varicella and the dose in question was administered at 12 months of age during the birth month of the child (e.g. the parent’s record indicates a dose of MMR was administered on 12/2001 and the student’s birth date is 12/5/2000).
  - o Answer #1: The dose should only be counted as a valid dose if the month, day and year of the live vaccine administration are recorded. If the day the vaccine was administered is not noted, reasonable attempts should be made to obtain the exact day. If this information is not available, the dose SHOULD NOT BE COUNTED. The student should either have a lab titer drawn to see if she/he has antibodies or she/he should have the dose repeated.
- Scenario #2: If a dose of vaccine other than MMR, MMRV or Varicella is administered, what is the default date?
  - o Answer #2: If the day, month and year of the vaccine administration are known, the dose should be counted and recorded in the patient’s clinic record. If the day the vaccine was administered is not noted, reasonable attempts should be made to obtain the exact day. If this information is not available, the date of the dose should be recorded as the 15th of the month (e.g. the parent’s record indicates a dose of Hepatitis B was administered on 12/2001. If the exact day the dose was administered cannot be obtained through reasonable efforts, the dose of Hepatitis B should be recorded as 12/15/2001).

## DTaP/DT/Tdap/Td Vaccines

### What is the DTaP vaccine requirement for Colorado students?

DTaP is licensed for children 6 weeks through 6 years of age. Five doses of DTaP vaccine is required at school entry unless the fourth dose was given at 4 years of age. There must be at least four weeks between doses one and two, at least four weeks between doses two and three, at least four months between doses three and four and at least six months between doses four and five. The final dose must be given no sooner than 4 years of age (dose four may be given at 12 months of age provided there are at least four months between doses three and four). If a child has received six doses of DTaP before the age of 7 yrs, no additional doses of DTaP are required. DTaP is NOT licensed to be administered after a student turns 7 yrs of age. <https://www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm>

### Please clarify the definition of “fully vaccinated” and “under-vaccinated” for DTaP?

“Fully vaccinated” examples:

- having received 5 valid doses of DTaP with one dose on or after the fourth birthday and before the age of 7 years or
- having received 4 valid doses of DTaP before age 7 years if the fourth dose was administered on or after the fourth birthday and at least six months after dose #3.
- The minimum intervals between each dose must be met.

“Under-vaccinated” examples:

- A student who is now 8 years of age and only received 4 valid doses of DTaP at 2, 4, 6 and 13 months of age (This student should receive a Tdap now to complete the schedule and an additional dose of Tdap at 6th grade entry).
- A student who received 3 doses of DTaP between 2 months and 3 years of age, a Tdap at 7 years of age, and now is entering 6th grade. This student is to be given a Tdap to meet the requirement for 6th grade entry.

### A student has a history of 3 doses of DTaP, appropriately spaced, by 7 years of age. Is her DTaP series complete?

Although the child could be considered complete for tetanus and diphtheria toxoids if the first of the 3 doses of DTaP were administered on or after the 1<sup>st</sup> birthday, she is not complete for pertussis vaccine. ACIP states that children age 7 through 10 years who are not fully vaccinated against pertussis (defined as 5 doses of DTaP or 4 doses of DTaP if the fourth dose was administered on or after the fourth birthday) should receive a single dose of Tdap to provide protection against pertussis. The child should also receive an additional dose of Tdap at 11 or 12 years of age. See MMWR 2018;67(RR-2):27.

### A 10 year old “6th grader” gets a Tdap to catch up on an incomplete DTaP series. Will that Tdap dose also meet the 6th grade Tdap requirement?

Yes.

1. If the student is 10 years of age, the Tdap dose will meet the 6th grade Tdap requirement, even if given due to an incomplete DTaP series.
2. If the student was 7 - 9 years of age when they received the Tdap vaccine to catch up on an incomplete DTaP series, the student would get a booster at 11 yrs of age or at 6th grade entry.

## What is the tetanus/diphtheria/pertussis requirement for an “unvaccinated student” 7 years of age or older?

3 primary doses of tetanus/diphtheria-containing vaccine are to be administered. The first dose of Tdap should be administered now, followed by a dose of Td or Tdap 4 weeks later. A third dose of Td or Tdap is to be administered 6 months after the previous dose.

## I have students who received a series of DT vaccine (tetanus/diphtheria), but did not receive the series of DTaP tetanus/diphtheria/pertussis) vaccine. Have they met the school immunization requirement?

For a student under 7 years of age who received the age-appropriate doses of pediatric DT, the student has met the tetanus/diphtheria requirement but NOT the pertussis requirement. The parent will need to submit an exemption for pertussis in order to be compliant. In the event of a pertussis outbreak, the student may be required to be excluded from school.

## How can the tetanus/diphtheria vaccine requirement be met for students who are catching-up?

Students **7 - 10 years of age** who did not complete a DTaP or DT series before their seventh birthday should have evidence of 3 or 4 doses of a tetanus/diphtheria-containing vaccine (DTaP, DT, Td, Tdap).

1. If there is evidence of DTaP or DT given *on* or *after* 1 year of age, a total of **3 doses** of a tetanus/diphtheria-containing vaccine (DTaP/DT/Tdap/Td) are required. There is to be at least a 4 week interval between dose 1 and 2 and a 6 month interval between dose 2 and 3. Tdap is to be administered and if another dose is needed to complete the series, Tdap or Td are to be given.
2. If there is evidence of DTaP or DT given *before* 1 year of age, **4 doses** of a tetanus/diphtheria-containing vaccine are required. Tdap is to be administered. There is to be at least 4 weeks between dose 1 and 2, 4 weeks between dose 2 and 3 and 6 months between dose 3 and 4. If more doses are needed to complete the series, Tdap or Td can be given.

At least one of the doses in the 3 or 4 dose series for a student 7 yrs of age or older is to be a Tdap.

## What do I do when inadvertent doses of DTaP or Tdap have been given to a student (e.g. wrong age group)?

- Tdap given to a child younger than age 7 years as either dose 1, 2, or 3, is not valid. The clinic is to repeat with DTaP as soon as feasible.
- Tdap given to a fully vaccinated student 7 years as either dose 4 or 5 can be counted as valid for DTaP.
- Tdap given to a fully vaccinated student 7 through 9 years of age will not meet Colorado’s 6th grade Tdap requirement. A dose of Tdap is to be administered at 6th grade entry.
- Tdap given to a fully vaccinated student who is 10 or 11 years of age will meet Colorado’s 6th grade Tdap requirement.
- DTaP given to a fully vaccinated student 7 through 9 years of age will not meet the Tdap requirement for 6th grade entry in Colorado. A dose of Tdap at 6th grade entry will meet the requirement.
- DTaP given to an undervaccinated student 7 through 9 years of age will complete the DTaP series but will not meet the 6th grade entry requirements. A dose of Tdap is to be administered at 6th grade entry to meet Colorado’s Tdap requirement.
- DTaP given to a student 10 years of age or older will meet the Colorado’s 6th grade Tdap requirement.

## What is the Tdap vaccine requirement for Colorado students?

- One dose of Tdap vaccine is required for students at 6<sup>th</sup> grade entry. All students in 6<sup>th</sup> - 12<sup>th</sup> grades are to have one dose of Tdap.
- Fully vaccinated students 10 years of age entering 6<sup>th</sup> grade are to receive one dose of Tdap to be in compliance with the school requirement.
- If a student 7 - 9 years of age receives a Tdap to complete their DTaP series, the student is to receive an adolescent booster dose of Tdap at 11-12 years of age or at 6th grade entry.
- If a student 4 - 6 years of age is due for a 5th DTaP and is inadvertently given a Tdap, this dose counts as part of the DTaP primary series and an additional dose of Tdap is to be administered at 6th grade entry.

## Hepatitis B Vaccine (HBV)

### What is the requirement for HBV?

HBV is typically administered as a three dose series. Minimum intervals between doses must be followed and must be given at appropriate ages.

- There must be at least four weeks (28 days) between doses one and two, eight weeks (56 days) between doses two and three and 16 weeks (112 days) between doses one and three.
- The final dose must be administered when the child is at least 24 weeks of age (168 days) in order to be counted as a valid dose in the three dose hepatitis B series.
- The data show that when the final dose is given at 24 weeks of age or older, there is a better immune response. [Source](#)

Sometimes, you will see a student with four doses of Hepatitis B in an immunization record. This could be because the Hepatitis B component was part of a combination vaccine, such as Pediarix. Sometimes, with a combination vaccine that contains Hepatitis B, an additional HBV is required in order to meet the age and interval requirement.

There is a two dose series available for students 11 through 15 years of age. If the two dose series is administered, it is required that a student provides written documentation that the student has received two doses of Recombivax Hepatitis B vaccine using the adult dose (1.0 ml containing 10 µg of Hepatitis B surface antigen), with the second dose given four to six months after the first dose. The specific name of the vaccine, the exact dose of antigen per injection, and the dates of administration must be included in the documentation.

## Polio (IPV)

### What is the Polio requirement for Colorado students?

Four doses of Polio (IPV) vaccine are required for school entry in Colorado. There must be at least four weeks between doses 1 and 2, at least four weeks between doses 2 and 3, and at least six months between doses 3 and 4. The final dose must be given at 4 years of age or older and there must be at least six months between the last two doses.

Three doses of polio (IPV) will meet the requirement if the third dose was administered at or over 4 years of age, and at least six months after the previous dose.

It is required that the final dose of IPV be given at or over 4 years of age, regardless of the number of doses administered prior to 4 years of age. [Source](#)

### **What about students who met the Polio requirement prior to August 7, 2009?**

Students who completed the Polio requirement prior to August 7, 2009, (i.e., received four doses of IPV separated by at least four weeks even if under 4 years of age, or received three doses separated by at least four weeks and the last dose was given at or after 4 years of age) are in compliance with the Colorado school requirement for polio. They do NOT need an additional dose at or over 4 years of age.

[Source](#)

### **Are students 18 yrs and older who attend a Colorado school required to receive the full series of Polio vaccines?**

No. Once a student turns 18 years of age, there is no polio requirement.

### **What is the schedule when both oral polio vaccine (OPV) and inactivated polio vaccine (IPV) are noted on the immunization record?**

Students who have initiated the poliovirus vaccination series with one or more doses of OPV should receive inactivated polio vaccine (IPV) to complete the series.

Four valid doses of a combination of OPV or IPV is a complete series, but one dose must be given after age 4 years. OPV can only be counted as part of the polio series if it is tOPV (trivalent OPV).

Until April 1, 2016 every country giving oral polio vaccine used tOPV. Beginning 4/1/16, all countries using oral polio vaccine switched to bivalent OPV (bOPV). A dose of bOPV does not count as a valid dose in the U.S. series.

In some campaigns, monovalent oral polio vaccine (mOPV) is used. Any dose of OPV given after 4/1/16 **does not count** as a valid dose in the US. The child should receive doses of IPV to complete the series.

## **Measles, Mump, Rubella (MMR) Vaccine**

### **What is the MMR requirement for students?**

- All Colorado students (K - 12th grade) are required to receive 2 valid doses of MMR.
- The minimum age for the first dose of MMR is 12 months. CDC/Colorado will allow a school to accept a MMR dose if it was given no more than four days before the first birthday.

### **Some students present foreign immunization records that have doses of single antigen measles, mumps and rubella. Can we accept those doses?**

For international students who provide evidence of 2 valid doses of single antigen measles, 2 valid doses of single antigen mumps and 1 valid dose of single antigen rubella, the school immunization requirement for measles, mumps and rubella will be met. (A student who presents with 1 valid dose of measles antigen, 1 valid dose of mumps antigen and 0 dose of rubella antigen, the administration of 1 valid dose of MMR vaccine will meet the school immunization requirement).

### **What should I know about the intervals between two live vaccines (MMR & Varicella)?**

Live vaccines such as MMR and Varicella are typically given simultaneously (on the same day). If MMR and Varicella vaccines are NOT given simultaneously, there must be no less than a 28 day minimum interval between the 2 doses (there is no 4 day interval in this situation). The rationale is because the first live vaccine that was administered starts to build protective antibodies. If another live vaccine is introduced less than 28 days later, the second live vaccine can have a diminished capacity to develop protective antibodies. The second dose in this situation is not a valid dose and must be repeated. When two live vaccines such as MMR and Varicella are administered simultaneously, there is no issue with the competing antibody response. [Source](#)

## Varicella (chickenpox) Disease and Varicella Vaccine

### Are grades K through 12th grade, required to have two doses of Varicella (chickenpox vaccine)?

Yes, all students in kindergarten through 12th grade are required to have two valid doses of Varicella vaccine. The first dose of varicella can be given as early as 12 months of age. If a provider administers a dose earlier than 12 months of age, the four day grace period can apply. A dose administered more than four days before the first birthday cannot be accepted as a valid dose.

### What is the minimum interval between two doses of varicella vaccine?

For a student under 13 years of age, the interval between the 2 doses of varicella is 3 months. (If that interval is only 28 days between the 2 doses, it doesn't need to be repeated and will be counted as a valid dose).

### A parent reports their student had chickenpox disease; however there is no documentation of that disease. What is the best course of action?

When a parent reports a student had chickenpox disease but is not able to provide documentation, screening for chickenpox disease should be completed by a healthcare provider or school nurse.

**In obtaining a reliable history of chickenpox disease, the school nurse can complete a disease screening with the parent. A description of both primary infection and breakthrough disease is provided to assist in the screening for chickenpox disease.**

**Primary Infection (Chickenpox):** "In children, the rash is often the first sign of disease. The rash is generalized and pruritic (itching) and progresses rapidly from macules to papules to vesicular lesions before crusting. The rash typically appears first on the head, then on the trunk and then the extremities; the highest concentration of lesions is on the trunk. Lesions also occur on mucous membranes of the oropharynx, respiratory tract, vagina, conjunctiva, and the cornea. Lesions are usually 1 to 4 mm in diameters. The vesicles are superficial and delicate and contain clear fluid on an erythematous base. Vesicles may rupture or become purulent before they dry and crust. Successive crops appear over several days, with lesions present in several stages of development. Healthy children usually have 200 to 500 lesions in 2 to 4 successive crops and illness lasts, typically, 5 to 10 days. The clinical course is generally mild, with malaise, itching and a temperature up to 102 degrees F for 2 - 3 days." [Source](#)

**Breakthrough Disease:** "A case of wild-type varicella infection occurring more than 42 days after vaccination. Such disease is usually mild with a shorter duration of illness, fewer constitutional symptoms, and fewer than 50 skin lesions. Breakthrough cases with fewer than 50 lesions have been found to be one third as contagious as varicella in unvaccinated persons with 50 or more lesions, but breakthrough cases with 50 or more lesions can be just as contagious as cases in unvaccinated persons." [Source](#)

### Which questions are useful in screening for a history of chickenpox disease?

- *What were the symptoms your child experienced?*
  - Typical signs and symptoms include rash, fever, cough, fussiness, headache and decreased appetite.
- *Describe the rash your child had.*
  - Rash usually develops on the scalp and trunk of the body and then spreads to face arms and legs.
- *About how many lesions (pox) did your child have? Describe their characteristics.*



- Typically 200 - 500 itchy pox form in successive crops. Illness lasts for about 5 to 10 days.
- *Did other children in the school, neighborhood or community have chickenpox disease?*
  - Chickenpox is very contagious. If the parent believes her/his child was exposed to other kids with disease, this is helpful in screening for disease.

If the nurse or health care provider does not feel the report of disease is reliable, provide education to the parent and refer to a clinic for vaccine.

A positive varicella lab titer is proof of disease and becomes part of the immunization record.

**Please note:** Since you must have chickenpox disease in order to get shingles, a diagnosis of shingles is also evidence of chickenpox disease.

## Child Care and Preschool Required Immunizations

Many school nurses are now responsible for the health oversight of child care centers and preschools in their districts. The Colorado Department of Human Services licensing rule states:

“rule (7.702.33 N. Personnel policies, orientation, staff development) requires that within thirty (30) calendar days of employment and annually, all staff responsible for collection, review and maintenance of the child’s immunization records must complete the Colorado Department of Public Health and Environment (CDPHE) immunization course.”

You can access guidance to the PDIS test-taking site on the Colorado Immunization Branch’s Child Care Resources page at: <https://www.colorado.gov/pacific/cdphe/child-care-resources> Click on “Child Care/Preschool Immunization Course.”

### What vaccines are required in the child care and preschool setting children?

Hep B, DTaP, Polio, MMR, Varicella, PCV13 and Hib

### What is the Hib requirement for child care and preschool attendance?

The number of Hib doses required depends on the child’s current age and the age when the Hib vaccine was administered.

- If any dose is given at or over 15 months, the Hib requirement is met.
- For children who begin the series before 12 months, 3 doses are required, of which at least 1 dose must be administered at, or over, 12 months.
- If the 1<sup>st</sup> dose was given at 12 to 14 months, 2 doses are required.
- If the student’s current age is 5 years or older, no new or additional doses are required.
- The number of doses and the intervals may vary depending on the type of Hib vaccine.

Vaccine	Age at 1 <sup>st</sup> Dose (months)	Primary series	Booster
PRP-T*	2 - 6	3 doses, 8 weeks apart	12 - 15 months
ActHIB	7 - 11	2 doses, 4 weeks apart	12 - 15 months
Pentacel			
MenHibrix	12 - 14	1 dose	2 months later

	15 - 19	1 dose	-
PRP-OMP PedvaxHIB COMVAX	2 - 6	2 doses, 8 weeks apart	12 - 15 months
	7 - 11	2 doses, 4 weeks apart	12 - 15 months
	12 - 14	1 dose	2 months later
	15 - 19	1 dose	-

### What is the PCV13 requirement for child care and preschool attendance?

The number of doses of PCV13 depends on the student’s current age and the age when the 1<sup>st</sup> dose was administered.

- If 1<sup>st</sup> dose was administered between 2 to 6 months of age, the student will receive 3 doses (2, 4 & 6 months) at least 4 -8 weeks apart, and booster dose between 12 - 15 months, at least 8 weeks after the last dose.
- When reading a child’s immunization record for PCV13, if the child has had 2 doses of vaccine prior to age 12 months, 1 final dose is required over 12 months of age.
- If dosing started between 7 to 11 months of age, the student will receive 2 doses, at least 8 weeks apart, and a booster dose between 12 to 15 mos of age.
- If the 1<sup>st</sup> dose was given between 12 to 23 months of age, 2 doses, at least 8 weeks apart, are required.
- Any dose given at 24 months through 4 years of age, the PCV requirement is met.
- Once a child turns 5 years of age, there is no requirement for PCV13

### PCV13 catch-up schedule

<https://www.cdc.gov/vaccines/schedules/downloads/child/job-aids/pneumococcal.pdf>

### Foreign Immunization Records - a tool for translation assistance

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/foreign-products-tables.pdf>

## Vaccine Exemptions

Colorado school law requires all students attending Colorado schools and licensed child care to be vaccinated against certain diseases, or to submit a Certificate of Medical or Nonmedical exemption. Children in child care who are not up-to-date on required vaccines will be required to submit a Certificate of Nonmedical exemption at 2, 4, 6, 12 and 18 months of age. (This applies to parents who choose to delay their child’s vaccines). Once a Certificate is submitted at 18 months of age, another exemption will not need to be submitted until Kindergarten entry.

For students entering Kindergarten and through 12th grade, a Certificate of Nonmedical exemption will need to be submitted annually for each new school year. (This applies to parents who choose to delay their child’s vaccines).

Certificates of Medical exemption only need to be submitted once unless the student's information or school changes.

Beginning in the 2021-2022 school year, there will be two options for submitting a Certificate of Nonmedical Exemption:

- A parent will download the Certificate of Nonmedical exemption from the Vaccine Exemption page, complete the form and request a signature from their immunizing health care provider
- OR
- A parent will review the Online Immunization Education Module and follow the guidance in the module to receive a Certificate of Nonmedical exemption. This document will NOT need to be signed by an immunizing provider.

For the safety of unvaccinated children, students with a Certificate of Medical or Nonmedical exemption from one or more required vaccines may be kept out of child care or school during a disease outbreak.

For updated guidance regarding Colorado Certificates of Exemption, you can access the Vaccine Exemption page at [www.colorado.gov.vaccineexemption](http://www.colorado.gov.vaccineexemption) or the “Board of Health Rule 6 CCR 1009-2” on the CIB website at <https://www.colorado.gov/pacific/cdphe/schoolrequiredvaccines>

## Colorado Immunization Information System (CIIS) (the Immunization Registry)

### What is CIIS or the immunization registry? How do I access it?

The Colorado Immunization Information System (CIIS) is a confidential, secure, vaccination information system for Coloradans of all ages. Schools can use the immunization registry to check the immunization status of students, review recommended immunizations and print official school immunization records. Visit [www.ColoradollS.com](http://www.ColoradollS.com) for more information.

## Annual reporting of aggregate student Immunization data.

### What is the school requirement for reporting aggregate student data?

Some Colorado schools and licensed child cares must report *aggregate* immunization and exemption data to CDPHE by January 15th of each year, per the Colorado Board of Health rule 6 CCR 1009-2. Due to the SARS-CoV-2 pandemic, the report date is extended to March 1 2021.

<https://www.colorado.gov/pacific/cdphe/school-and-child-care-immunization-data-reporting>

No student names or personal information will be collected.

- Public, private and parochial schools with grades K - 12, child care centers, preschools and Head Start programs with more than 10 children are required to report.
- School-age child care centers, family child care homes, drop-in centers, day treatment centers, foster care homes, day camps and resident camps are not required to report.
- No individual student data should be reported; the summary data to be reported includes the number of students up-to-date for school-required vaccines, those in-process and those with an exemption, by antigen.
- The Immunization Summary Report for Schools with Grades K - 12 are available on [our website](#).
- The Immunization Summary Report for Licensed Child Care Facilities are available on [our website](#).

## **What guidance is given to health care providers about immunizations required for school entry?**

CDPHE sends to all Colorado schools and child care an annual "Parent Letter" which is to be sent to all parents and guardians of enrolled Colorado students by February 15th of every school year. . The letter provides guidance to both parents and health care providers regarding what is required for school-immunization compliance. Additionally, the Colorado Immunization Branch provides a Vaccine Line for health care providers to obtain clarification on all aspects of immunizations including school-required vaccines.

### **Colorado Board of Health Immunization Rules:**

<https://www.colorado.gov/pacific/cdphe/schoolrequiredvaccines>

### **Other reliable clinical resources include:**

CDC Vaccines & Immunizations

<http://www.cdc.gov/vaccines/default.htm>

CDC's Epidemiology & Prevention of Vaccine-Preventable Diseases:

<http://www.cdc.gov/vaccines/pubs/pinkbook/index.html>

The Immunization Action Coalition: Ask the Experts

<http://www.immunize.org/askexperts/>

CDC Experts at the National Immunization Program

[nipinfo@cdc.gov](mailto:nipinfo@cdc.gov) or 1-800-CDC-Info (1-800-232-4636)