

These **NEW** immunizations are required by June 30, 2009 for children who attend school or a child development center in the District of Columbia.

If your child attends:

Day Care, Preschool, or Head Start

(3 years of age and younger)

he/she will need

- ✓ Pneumococcal Vaccine (1-4 age appropriate doses)
- ✓ Chickenpox (Varicella) Vaccine
 - 1 dose on or after 1st birthday
 - Will not need if have healthcare provider diagnosed/verified chickenpox disease

Prekindergarten (4 years of age)

he/she will need

- ✓ Pneumococcal Vaccine (4 doses)
- ✓ Chickenpox (Varicella) Vaccine (2 doses)
 - 1st dose on or after 1st birthday
 - 2nd dose at least 3 months after 1st dose
 - Will not need if have health care provider diagnosed/verified chickenpox disease



Kindergarten thru Fifth Grade

he/she will need

- ✓ Pneumococcal Vaccine (4 doses)
 - Not needed if 5 years of age and older
- ✓ Chickenpox (Varicella) Vaccine (2 doses)
 - 1st dose on or after 1st birthday
 - 2nd dose at least 3 months after 1st dose
 - Will not need if have healthcare provider diagnosed/verified chickenpox disease

Sixth thru Twelfth Grade

he/she will need

- ✓ Chickenpox (Varicella) Vaccine (2 doses)
 - 1st dose on or after 1st birthday
 - 2nd dose at least 3 months after 1st dose if under 13 years old; if 13 years of age and older, 2nd dose 1 month after 1st
 - Will not need if have healthcare provider diagnosed/verified chickenpox disease
- ✓ Tdap (Tetanus, diphtheria, pertussis)
 - Booster if five years have passed since last dose of DTP/DTaP/Td beginning at age 11

You must be up-to-date by the start of the 2008-2009 school year for these immunizations:

DTP/DTaP/Td • Polio • MMR
Varicella • Hepatitis B • Hib

Before school starts for school year 2009-2010, the following immunizations will be required:

- Hepatitis A – 2 doses (Children born on or after January 1, 2005)
- Meningococcal Vaccine – 1 dose (Beginning at age 11 years)
- Human Papillomavirus Vaccine (HPV) – 3 doses (Female students enrolling in 6th grade for first time)

Note: All Varicella/chickenpox histories **must** be verified/diagnosed by a healthcare provider (MD, NP, PA, RN) and **must** include the month and year of disease.

If verification is by blood titers, please include a copy of the laboratory/serology report.

