



**Nevada Department of  
Health and Human Services**  
DIVISION OF PUBLIC AND  
BEHAVIORAL HEALTH



**NEVADA STATE  
IMMUNIZATION  
PROGRAM**

# **Nevada Division of Public and Behavioral Health 2024-2025 Annual Private School Immunization Reporting Instruction Packet**

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## I. Introduction

This instruction packet has been developed to help you with completing the immunization reporting survey.

- See Nevada's current immunization requirements at [https://dpbh.nv.gov/Programs/SIP/dta/School\\_Requirements/School\\_Requirements/](https://dpbh.nv.gov/Programs/SIP/dta/School_Requirements/School_Requirements/).

## II. Grades Reported

For all questions, include all current students enrolled in kindergarten, seventh (7<sup>th</sup>), and twelfth (12<sup>th</sup>) grades only.

- Per Nevada Revised Statute ([NRS 394.192](#)), each private school is **required** to report to the Division of Public and Behavioral Health the exact number of students who have completed the immunizations required for enrollment by December 31<sup>st</sup> of each year.
- Do **not** include information on pre-school or pre-K students in the responses.
- Children who are students of distant learning programs (such as online schools) that participate in any activities on a school campus, such as sports, **should** be included in your school's total count.
- Please review and validate the online information prior to submitting your school's immunization information.
- Please fill out all required sections. Do **not** leave any sections blank.
- You will not be able to complete the survey unless entry is made in all fields.
- **If your school's information is incorrect, you will be contacted by the Nevada State Immunization Program.**
- **If you do not submit your immunization information by December 31st, you will be contacted by the Nevada State Immunization Program.**

## III. Exclusion from Reporting

- Children who are entirely home-schooled and **do not** participate in any activities on a school campus **do not** need to be included in the school immunization reporting.

## IV. Access to Rate Reporting Surveys

To access the annual immunization reporting survey online:

- Go to [https://dpbh.nv.gov/Programs/Immunization/School\\_and\\_Childcare/School\\_and\\_Child\\_Care\\_Immunizations/](https://dpbh.nv.gov/Programs/Immunization/School_and_Childcare/School_and_Child_Care_Immunizations/)
- Scroll down to the middle of the page and click on "School Survey."
- Reports must be submitted online by December 31st of the reporting year.
- See the following instructions for school immunization reporting submission.

## V. Getting Started

- Collect immunization reports for all kindergarten, 7<sup>th</sup> grade, and 12<sup>th</sup> grade students.
- **SEE APPENDIX H** for Nevada immunization requirements and resources.

- **Each school will submit the total counts rather than immunization percentages.**
- Schools with multiple campuses must submit each school separately. For example, Sunshine School has three campuses and will submit immunization information separately for the Happy Campus, the Smile Campus, and the Bright Campus.
- Once you access the survey at the link above, you will be redirected to a separate page.
- Fill out all required sections. Do **not** leave any sections blank.
- You will not be able to complete the survey unless entry is made in all fields.

**VI. General Information**

➤ Enter in all general information.

AAA  
⊕ ⊖

## Nevada School Immunization Rate Reporting Survey

Please complete the survey below.

Thank you!

<b>First name</b> <small>* must provide value</small>	<input type="text"/>
<b>Last name</b> <small>* must provide value</small>	<input type="text"/>
<b>Job title</b> <small>* must provide value</small>	<input type="text" value=""/>
<b>Phone number</b> <small>* must provide value</small>	<input type="text"/> <small>Please enter phone number without parentheses or dashes.</small>
<b>Email address</b> <small>* must provide value</small>	<input type="text"/>
<b>Is your school public, private, or charter?</b> <small>* must provide value</small>	<p><input type="radio"/> public <input type="radio"/> private <input type="radio"/> charter</p> <p style="text-align: right;"><a href="#">reset</a></p>
<b>School's physical address</b> <small>* must provide value</small>	<input type="text"/>
<b>City</b> <small>* must provide value</small>	<input type="text" value=""/>
<b>Zip code</b> <small>* must provide value</small>	<input type="text"/>
<b>Do you have students enrolled in kindergarten?</b> <small>* must provide value</small>	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p style="text-align: right;"><a href="#">reset</a></p> <p><small>If your answer is yes, you will complete kindergarten questions.</small></p>

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## VII. Collecting Data

➤ Please collect immunization records for students enrolled in your school to complete the survey. ([SEE APPENDIX B](#))

➤ Use the private school tally sheets (kindergarten, 7th grade, and/or 12th grade) to help in evaluating the immunization status of your school. (SEE APPENDIX E, F, & G)

➤ Do not submit tally sheets to the Nevada State Immunization Program.

## VIII. Kindergarten Grade

- Answer the question, “Do you have students enrolled in kindergarten?”
- If you have students enrolled in kindergarten, click the “Yes” button.
- If you do not have students enrolled in kindergarten, click the “No” button.
- Click the “Next Page” button.
- If you clicked “Yes”, you will be directed to answer kindergarten questions.
- If you clicked “No”, you will be directed to the 7th grade section.

## IX. Students Enrolled in Kindergarten

- Please answer questions for the following vaccines only: DTaP, Hep A, MMR, Hep B, Polio, and Varicella.
  
- **(Question 1)**  
Total enrollment: the total number of kindergarten students in your school.
  
- **(Question 2a, 2b, 2c, 2d, 2e, 2f)**  
Up-to-date by vaccine: count the number of students who are up-to-date for each of the vaccines listed on the survey. Do not count medical exemptions, religious exemptions, and conditional enrollments as UTD.
  
- **(Question 3)**  
Total number medically exempt: the parent/guardian has provided a Nevada Division of Public and Behavioral Health State Medical Immunization Exemption Certificate signed by a licensed physician (MD or DO) or an Advanced Practice Registered Nurse (APRN) stating that the medical condition of the student will not permit the student to be immunized.
  
- [SEE APPENDIX H](#) for the Nevada Standardized Medical Immunization Exemption Certificate.
  
- **(Question 3a, 3b, 3c, 3d, 3e, 3f)**  
Medical exemptions by vaccine: count the number of students who have medical exemptions for each of the vaccines listed on the survey.
  
- **(Question 4)**  
Total number religiously exempt: a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate was provided by the parent/guardian who prohibits the immunization of the student due to religious beliefs.

- [SEE APPENDIX H](#) for the Nevada Standardized Religious Immunization Exemption Certificate.
- **(Question 4a, 4b, 4c, 4d, 4e, 4f)**
  - Religious exemptions by vaccine: count the number of students who have religious exemptions for each of the vaccines listed on the survey.
- **(Question 5)**
  - Total number exempt to all required vaccines: the student has a medical or religious exemption from all required vaccines. Count the number of students who are exempt from all required vaccines for kindergarten entry.
- **(Question 6)**
  - Total number with documented varicella disease: count the number of students who have had the varicella disease.
- **(Question 7)**
  - Total number conditionally enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.
- **(Question 8)**
  - Total number non-compliant: the student does not have required immunizations, a religious or medical exemption, and is not conditionally enrolled. Count the number of students who are non-compliant.

#### **X. Seventh (7<sup>th</sup>) Grade**

- Answer the question, “Do you have students enrolled in 7<sup>th</sup> grade?”
- If you have students enrolled in 7<sup>th</sup> grade, click the “Yes” button.
- If you do **not** have students enrolled in 7<sup>th</sup> grade, click the “No” button.
- Click the “Next Page” button.
- If you clicked “Yes”, you will be directed to answer 7<sup>th</sup> grade questions.
- If you clicked “No”, you will be directed to the 12<sup>th</sup> grade section.

#### **XI. Twelfth (12<sup>th</sup>) Grade**

- Answer the question, “Do you have students enrolled in 12<sup>th</sup> grade?”
- If you have students enrolled in 12<sup>th</sup> grade, click the “Yes” button.
- If you do **not** have students enrolled in 12<sup>th</sup> grade, click the “No” button.
- Click the “Next Page” button.
- If you clicked “Yes,” you will be directed to answer 12<sup>th</sup> grade questions.
- If you clicked “No,” you will be directed to the “Submit” button to submit your school’s information.

## XII. Students Enrolled in Seventh (7<sup>th</sup>) Grade and/or Twelfth (12<sup>th</sup>) Grade at Private Schools

- Please answer questions for the following vaccines only: Meningococcal, Tdap, MMR, Hep A, and Varicella.
- **(Question 1)**
  - Total enrollment: the total number of 7<sup>th</sup> and/or 12<sup>th</sup> grade students in your school.
- **(Question 2a, 2b, 2c, 2d, 2e)**
  - Up-to-date by vaccine: count the number of students who are up-to-date for each of the vaccines listed on the survey. **Do not** count medical exemptions, religious exemptions, and conditional enrollment as UTD.
- **(Question 3)**
  - Total number medically exempt: the parent/guardian has provided a Nevada Division of Public and Behavioral Health State Medical Immunization Exemption Certificate signed by a licensed physician (MD or DO) or an Advanced Practice Registered Nurse (APRN) stating that the medical condition of the student will not permit the student to be immunized.
- **(Question 3a, 3b, 3c, 3d, 3e)**
  - Medical exemptions by vaccine: count the number of students who have medical exemptions for each of the vaccines listed on the survey.
- **(Question 4)**
  - Total number religiously exempt: a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate was provided by the parent/guardian who prohibits the immunization of the student due to religious beliefs.
- **(Question 4a, 4b, 4c, 4d, 4e)**
  - Religious exemptions by vaccine: count the number of students who have religious exemptions for each of the vaccines listed on the survey.
- **(Question 5)**
  - Total number conditionally enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.
- **(Question 6)**
  - Total number of students non-compliant: the student does not have required immunizations, does not have a signed medical or religious exemption, and is not considered conditional.

## APPENDIX A: VACCINE ABBREVIATIONS

DTaP	Diphtheria, Tetanus, and Acellular Pertussis
Hep A/HAV	Hepatitis A
Hep B/HBV	Hepatitis B
IPV	Inactivated Polio
MenACWY/MCV4	Meningococcal
MMR	Measles, Mumps, and Rubella
MMRV	Measles, Mumps, Rubella, and Varicella (Chickenpox)
Tdap	Tetanus, Diphtheria, and Acellular Pertussis
VAR/CPOX	Varicella (Chickenpox)

## APPENDIX B: SAMPLE IMMUNIZATION RECORD

<b>DTaP/Td/Tdap</b>			
1	DTaP	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
4	DTaP	12/28/2012	1Y 3M 2D
5	DTaP-IPV	10/2/2015	4Y 0M 6D
<b>Polio</b>			
1	IPV	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
4	DTaP-IPV	10/2/2015	4Y 0M 6D
<b>MMR/Measles</b>			
1	MMR	9/28/2012	1Y 0M 2D
2	MMR	10/2/2015	4Y 0M 6D
<b>Hib</b>			
1	Hib	12/1/2011	0Y 2M 5D
2	Hib	2/3/2012	0Y 4M 8D
3	Hib	12/28/2012	1Y 3M 2D
<b>HEPB</b>			
1	Hep B, ped/adol	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
<b>HEPA</b>			
1	Hep A, ped/adol	9/28/2012	1Y 0M 2D
2	Hep A, ped/adol	3/29/2013	1Y 6M 3D
<b>Pneumococcal</b>			
1	PCV-13 (Prevnar 13)	12/1/2011	0Y 2M 5D
2	PCV-13 (Prevnar 13)	2/3/2012	0Y 4M 8D
3	PCV-13 (Prevnar 13)	3/29/2012	0Y 6M 3D
4	PCV-13 (Prevnar 13)	12/28/2012	1Y 3M 2D
<b>ROTA</b>			
1	Rotavirus (Rotarix)	12/2/2011	0Y 2M 5D
2	Rotavirus (Rotarix)	2/3/2012	0Y 4M 8D
<b>Varicella (CPOX)</b>			
1	CPOX (Varicella)	9/28/2012	1Y 0M 2D
2	CPOX (Varicella)	10/2/2015	4Y 0M 6D

## APPENDIX C: KINDERGARTEN GRADE QUESTIONS

Kindergarten	
<b>Note:</b> For the below questions, UTD (up to date) is defined as: counting the # of students who are up to date for each of the vaccines listed on the survey. DO NOT count medical exemptions, religious exemptions, and conditional enrollment as UTD.	
(1) Total # of students enrolled in kindergarten <i>* must provide value</i>	<input type="text"/>
(2a) Total # of kindergarten students UTD for DTaP (Diphtheria, tetanus, and acellular pertussis) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2b) Total # of kindergarten students UTD for IPV (Polio) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2c) Total # of kindergarten students UTD for Hep B (Hepatitis B) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2d) Total # of kindergarten students UTD for Hep A (Hepatitis A) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2e) Total # of kindergarten students UTD for MMR (Measles, mumps, and rubella) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2f) Total # of kindergarten students UTD for Varicella (Chickenpox) <i>* must provide value</i>	<input type="text"/> REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.

<p><b>(3) Total # of kindergarten students medically exempt from any required vaccines</b></p> <p>* must provide value</p>	<input type="text"/> This can include a medical exemption of 1 or more vaccines.
<p><b>(3a) Total # of kindergarten students medically exempt from DTaP</b></p> <p>* must provide value</p>	<input type="text"/> DTaP: Diphtheria, tetanus and acellular pertussis
<p><b>(3b) Total # of kindergarten students medically exempt from IPV</b></p> <p>* must provide value</p>	<input type="text"/> IPV: Polio
<p><b>(3c) Total # of kindergarten students medically exempt from Hep B</b></p> <p>* must provide value</p>	<input type="text"/> Hep B: Hepatitis B
<p><b>(3d) Total # of kindergarten students medically exempt from Hep A</b></p> <p>* must provide value</p>	<input type="text"/> Hep A: Hepatitis A
<p><b>(3e) Total # of kindergarten students medically exempt from MMR</b></p> <p>* must provide value</p>	<input type="text"/> MMR: Measles, mumps and rubella
<p><b>(3f) Total # of kindergarten students medically exempt from Varicella</b></p> <p>* must provide value</p>	<input type="text"/> Varicella: Chickenpox
<p><b>(4) Total # of kindergarten students religiously exempt from any required vaccines</b></p> <p>* must provide value</p>	<input type="text"/> This can include a religious exemption of 1 or more vaccines.
<p><b>(4a) Total # of kindergarten students religiously exempt from DTaP</b></p> <p>* must provide value</p>	<input type="text"/> DTaP: Diphtheria, tetanus and acellular pertussis
<p><b>(4b) Total # of kindergarten students religiously exempt from IPV</b></p> <p>* must provide value</p>	<input type="text"/> IPV: Polio
<p><b>(4c) Total # of kindergarten students religiously exempt from Hep B</b></p> <p>* must provide value</p>	<input type="text"/> Hep B: Hepatitis B
<p><b>(4d) Total # of kindergarten students religiously exempt from Hep A</b></p> <p>* must provide value</p>	<input type="text"/> Hep A: Hepatitis A
<p><b>(4e) Total # of kindergarten students religiously exempt from MMR</b></p> <p>* must provide value</p>	<input type="text"/> MMR: Measles, mumps and rubella
<p><b>(4f) Total # of kindergarten students religiously exempt from Varicella</b></p> <p>* must provide value</p>	<input type="text"/> Varicella: Chickenpox
<p><b>(5) Total # of kindergarten students exempt from all required vaccines</b></p> <p>* must provide value</p>	<input type="text"/> This means they selected all vaccines on the religious exemption form.

<b>(6) Total # of kindergarten students with documented Varicella disease</b> <small>* must provide value</small>	<input type="text"/>
<b>(7) Total # of kindergarten students conditionally enrolled</b> <small>* must provide value</small>	<input type="text"/> Conditionally Enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.
<b>(8) Total # of kindergarten students non-compliant</b> <small>* must provide value</small>	<input type="text"/> Non-compliant: the student does not have required immunizations, does not have a signed medical or religious exemption form, and is not considered conditional.
<b>Do you have students enrolled in 7th grade?</b> <small>* must provide value</small>	<input type="radio"/> Yes <input type="radio"/> No <a href="#">reset</a> If your answer is yes, you will complete 7th grade questions.
<input data-bbox="483 827 672 863" type="button" value=" &lt;&lt; Previous Page "/> <input data-bbox="1023 827 1211 863" type="button" value=" Next Page &gt;&gt; "/>	

## APPENDIX D: SEVENTH (7<sup>th</sup>) AND TWELFTH (12<sup>th</sup>) GRADE QUESTIONS

### Seventh Grade

**Note:** For the below questions, UTD (up to date) is defined as: counting the # of students who are up to date for each of the vaccines listed on the survey. DO NOT count medical exemptions, religious exemptions, and conditional enrollment as UTD.

<p><b>(1) Total # of students enrolled in 7th grade</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/>
<p><b>(2a) Total # of 7th grade students UTD for MenACWY (Meningococcal)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.</small>
<p><b>(2b) Total # of 7th grade students UTD for Varicella (Chickenpox)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.</small>
<p><b>(2c) Total # of 7th grade students UTD for Tdap (Tetanus, diphtheria, and acellular pertussis)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.</small>
<p><b>(2d) Total # of 7th grade students UTD for MMR (Measles, mumps, and rubella)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.</small>
<p><b>(2e) Total # of 7th grade students UTD for Hep A (Hepatitis A)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.</small>
<p><b>(3) Total # of 7th grade students medically exempt from any required vaccines</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>This can include a medical exemption of 1 or more vaccines.</small>
<p><b>(3a) Total # of 7th grade students medically exempt from MenACWY (Meningococcal)</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/>
<p><b>(3b) Total # of 7th grade students medically exempt from Varicella</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>Varicella: Chickenpox</small>
<p><b>(3c) Total # of 7th grade students medically exempt from Tdap</b> <small>* must provide value</small></p>	<input style="width: 90%; height: 20px;" type="text"/> <small>Tdap: Tetanus, diphtheria and acellular pertussis</small>

<b>(3d) Total # of 7th grade students medically exempt from MMR</b> <small>* must provide value</small>	<input type="text"/> MMR: Measles, mumps and rubella
<b>(3e) Total # of 7th grade students medically exempt from Hep A</b> <small>* must provide value</small>	<input type="text"/> Hep A: Hepatitis A
<b>(4) Total # of 7th grade students religiously exempt from any required vaccines</b> <small>* must provide value</small>	<input type="text"/> This can include a religious exemption of 1 or more vaccines.
<b>(4a) Total # of 7th grade students religiously exempt from MenACWY (Meningococcal)</b> <small>* must provide value</small>	<input type="text"/>
<b>(4b) Total # of 7th grade students religiously exempt from Varicella</b> <small>* must provide value</small>	<input type="text"/> Varicella: Chickenpox
<b>(4c) Total # of 7th grade students religiously exempt from Tdap</b> <small>* must provide value</small>	<input type="text"/> Tdap: Tetanus, diphtheria and acellular pertussis
<b>(4d) Total # of 7th grade students religiously exempt from MMR</b> <small>* must provide value</small>	<input type="text"/> MMR: Measles, mumps and rubella

<b>(4e) Total # of 7th grade students religiously exempt from Hep A</b> <small>* must provide value</small>	<input type="text"/> Hep A: Hepatitis A
<b>(5) Total # of 7th grade students religiously exempt from all required vaccines</b> <small>* must provide value</small>	<input type="text"/> This means they selected all vaccines on the religious exemption form.
<b>(6) Total # of 7th grade students conditionally enrolled</b> <small>* must provide value</small>	<input type="text"/> Conditionally Enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.
<b>(7) Total # of 7th grade students non-compliant</b> <small>* must provide value</small>	<input type="text"/> Non-compliant: the student does not have required immunizations, does not have a signed medical or religious exemption form, and is not considered conditional.

<b>Do you have students enrolled in 12th grade?</b> <small>* must provide value</small>	<input type="radio"/> Yes <input type="radio"/> No
	<small>reset</small>
	<small>If your answer is yes, you will complete 12th grade questions.</small>



# APPENDIX F: SEVENTH (7<sup>th</sup>) GRADE TALLY SHEET

Date:

Note: The Nevada State Immunization Program (NSIP) developed this tool to assist in evaluating the immunization status of your school and completing the Nevada school immunization reporting survey.

**Do not submit to NSIP.**

Child	Grade	Up-to-Date						Medical Exemption						Religious Exemption						Conditional	CIT not UTD	
		UTD to All	Mening	VAR	Tdap	MMR	Hep A	MedEx	Mening	VAR	Tdap	MMR	Hep A	RelEx	Mening	VAR	Tdap	MMR	Hep A			
A																						
B																						
C																						
D																						
E																						
F																						
G																						
H																						
I																						
J																						
K																						
L																						
M																						
N																						
O																						

## APPENDIX G: TWELFTH (12<sup>th</sup>) GRADE TALLY SHEET

Date:

Note: The Nevada State Immunization Program (NSIP) developed this tool to assist in evaluating the immunization status of your school and completing the Nevada school immunization reporting survey.

**Do not submit to NSIP.**

Child	Grade	Up-to-Date						Medical Exemption						Religious Exemption						Conditional	CIT not UTD		
		UTD to All	Mening	VAR	Tdap	MMR	Hep A	MedEx	Mening	VAR	Tdap	MMR	Hep A	RelEx	Mening	VAR	Tdap	MMR	Hep A				
A																							
B																							
C																							
D																							
E																							
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N																							
O																							

## APPENDIX H: IMMUNIZATION REQUIREMENTS RESOURCES

As of the [2019-2020 school year](#), it is necessary for children being admitted to early education programs, preschool, and kindergarten in Nevada to receive all required vaccines at the youngest recommended age per the recommendation of the Centers for Disease Control and Prevention (CDC) Advisory Committee on

Immunization Practices (ACIP) [Immunization Schedule](#). For example, the 5<sup>th</sup> dose of DTaP is recommended between 4 and 6 years of age. The 5<sup>th</sup> dose of DTaP vaccine is required at 4 years of age if the child is enrolled in a school in Nevada.

If a child turns an age that meets the youngest recommended age to receive the required vaccines (i.e. DTaP at 4 years old), after enrollment, child care, and/or accommodation facility entry, the child has 30 days to complete the required immunizations pursuant to Nevada Revised Statute ([NRS 432A.230](#) and [NRS 432A.235](#)).

### **Resources for Immunization Requirements and COVID-19 Response**

Immunization requirements and COVID-19 resources are available to provide equitable access to vaccinations:

- Connect with local health care providers, pharmacies, community/public health nurses, or county health districts for access to vaccines or visit <https://www.vaccines.gov/> for COVID-19 and flu vaccines.
- Current Nevada Division of Public and Behavioral Health school, child care, and accommodation facility requirements:
  - [https://dpbh.nv.gov/Programs/SIP/dta/School\\_Requirements/School\\_Requirements/](https://dpbh.nv.gov/Programs/SIP/dta/School_Requirements/School_Requirements/)
- Nevada school/child care facility immunizations resources and links to Technical Bulletins:
  - [https://dpbh.nv.gov/Programs/Immunization/School\\_and\\_Childcare/School\\_and\\_Child\\_Care\\_Immunizations/](https://dpbh.nv.gov/Programs/Immunization/School_and_Childcare/School_and_Child_Care_Immunizations/)
- Call the Nevada Statewide COVID-19 Contact Center in English or Spanish at 1 (800) 401-0946.
- Nevada Division of Public and Behavioral Health Technical Bulletins for COVID-19, monkeypox, and other public health topics
  - [https://dpbh.nv.gov/Resources/Technical\\_Bulletins-New/](https://dpbh.nv.gov/Resources/Technical_Bulletins-New/)
- Nevada State Immunization Program Facebook announcements:
  - <https://www.facebook.com/NevadaStateImmunizationProgram>
- Nevada Health Care Quality and Compliance child care listserv email list:
  - <https://dpbh.nv.gov/Reg/HealthFacilities/dta/Lists/Listservs/>

## **Exemptions**

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As of July 2021, medical and religious immunization exemptions must be submitted on a standardized Nevada Division of Public and Behavioral Health form (see the [Immunization Exemption Requirement Technical Bulletin](#)). Children may be exempt from immunization requirements for the following reasons:

- **Medical Exemption:** Requires a Nevada Division of Public and Behavioral Health State Medical Immunization Exemption Certificate signed by a licensed physician (MD or DO) or an Advanced Practice Registered Nurse (APRN) stating that the medical condition of the student will not permit the student to be immunized.
- **Religious Exemption:** Requires a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate signed by the parent or guardian who prohibits the immunization of the child due to religious beliefs.

The standardized immunization exemption forms and resources can be found at:

- [https://dpbh.nv.gov/Programs/SIP/dta/School\\_Requirements/School\\_Requirements/](https://dpbh.nv.gov/Programs/SIP/dta/School_Requirements/School_Requirements/)

### **Exclusion**

Per [NRS 432A.230](#) and [432A.235](#), unless excused because of a religious belief or medical condition, a child must be up-to-date, or the child may not be admitted to any child care and/or accommodation facility within Nevada.