



NEW 7TH GRADE VACCINATION REQUIREMENTS

GUIDANCE FOR SCHOOL NURSES

&

PUBLIC HEALTH NURSES

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1) What are the new vaccination requirements for students entering 7th grade in Georgia?

All students born on or after January 1, 2002 and entering, advancing or transferring into 7th grade in Georgia need proof of an adolescent pertussis (whooping cough) booster vaccination (called “Tdap”) and an adolescent meningococcal vaccination (MCV4).

Proof of both vaccinations must be documented on the Georgia Immunization Certificate (Form 3231).

2) Who is affected by the new 7th grade vaccination requirements?

All public and private schools are affected by the law, including but not limited to

- Charter schools
- Community schools
- Juvenile court schools
- Other alternative school settings (excluding homeschool)

Students who are affected by the law include but are not limited to:

- International or exchange students
- Children in foster care (see pg. 11)
- Homeless students (see pg. 10)
- Students transferring from outside of Georgia to a school in Georgia at any time during the school year
- Students whose parent or guardian serves in the United States Military

Students who are NOT affected but who are still strongly recommended to receive Tdap and meningococcal vaccination include those

- Home school students

3) Are students transferring into 8th through 12th grades (from either out of state or within Georgia) subject to the new 7th grade vaccination requirements?

Yes, all new entrants are subject to the new Tdap and meningococcal vaccination requirements.

A new entrant is defined as: any child entering any school in Georgia for the first time or entering after having been absent from a Georgia school for more than twelve months or one school year.

4) I have discovered that a new entrant into 8th through 12th grade at my school has not yet met the new requirement but was mistakenly thought to have done so. What should I do?

Notify the parents or guardians that the student is required to meet the Tdap and meningococcal vaccination requirement and, after 30 school days from the notification, may be excluded until the requirement is met. (O.C.G.A § 20-2-771 (b))

5) What vaccines are necessary to meet the 7th grade vaccination requirement?

Students affected by the new requirements need documentation of one dose of Tdap and one dose of meningococcal vaccine (MCV4) to begin classes in the new school year.

Tdap Requirement		
Meets the Requirement	Vaccine	When given?
YES, meets the requirement	Tdap (Adacel, Boostrix)	Given on or after the 7 th birthday
YES, meets the requirement	DTaP (TriHiBit, Pediarx, Daptacel, Infanrix, Tripedia Pentacel, Kinrix)	In adolescents (aged 11-18 years) who inadvertently receive a pediatric DTaP, that dose should be considered the adolescent Tdap and <u>does</u> meet the 7 th grade requirement
NO, does not meet requirement.	Tdap (Adacel, Boostrix)	Given before the 7 th birthday
NO, does not meet requirement.	Td; DT; DTaP or DTP given before the 7 th birthday; History of pertussis disease; results of blood tests for immunity to pertussis	
Meningococcal Requirement		
Meets the Requirement	Vaccine	When given?
YES, meets the requirement	MCV4 (Menactra, Menveo)	Given on or after the 10 th birthday
NO, does not meet requirement	MCV4 (Menactra, Menveo)	Given before the 10 th birthday
NO, does not meet requirement	MPSV4 (Menomune)	
NO, does not meet requirement	History of meningitis; Results of blood tests for immunity to meningitis	

6) What if a student received a Tdap booster shot prior to their 10th birthday?

Children who were born on or after January 1, 2002 and received a dose of Tdap on or after their 7th birthday will be considered to have met the school requirement.

7) What if a student received a pertussis shot (Tdap or DTaP) before their 7th birthday?

Vaccination before the 7th birthday does not fulfill the requirement, even if given immediately before the 7th birthday.

8) What if a student (11-18 years of age) received a DTaP on or after their 11th birthday?

A dose of DTaP or DTP inadvertently given at age 11 years or older meets the requirement, but these vaccines are not licensed for use or recommended for children 7 years of age or older.

9) What if a student had pertussis in the past?

Any protection or immunity to pertussis that a child received from having had pertussis as an infant/child will have worn off by middle school, leaving that child vulnerable to catching pertussis. Booster vaccination with Tdap is recommended by state and national authorities and required for school.

Past illness with pertussis is not an exemption to the school requirement. Tdap vaccination is required even for those who have had pertussis.

10) Instead of getting a Tdap booster vaccination to meet the requirement, can a student get a blood test to check for protection (immunity) against pertussis?

No. Testing for immunity to pertussis is not reliable and does not meet the school requirement.

11) What if a student received a meningococcal vaccination before their 10th birthday?

A meningococcal vaccination (MCV4) administered before the 10th birthday does not fulfill the requirement, even if given immediately before the 10th birthday. The student should receive another meningococcal vaccination after the 10th birthday to fulfill the requirement.

12) What if a student had meningitis as an infant or child?

A history of meningitis does not meet the school requirement. A meningococcal vaccination is needed to both protect a child and to meet the school requirement.

13) Instead of getting a meningococcal vaccination to meet the requirement, can a student get a blood test to check for protection (immunity) against meningitis?

No. Testing for immunity to meningococcal disease is not reliable and will not meet the school requirement.

14) Should teachers, other school staff and family members also get the Tdap vaccine?

Although school staff and parents are not required to receive the Tdap vaccine, GDPH recommends that all school staff and parents get vaccinated with Tdap now if they haven't done so already. This will protect them against the ongoing threat of pertussis as well as help protect their close contacts, including young infants for whom pertussis is most severe and sometimes fatal.

15) What are the diseases that the Tdap vaccine prevents?

Pertussis – also known as whooping cough, is a contagious disease that causes violent coughing fits that make it hard to breathe. It spreads easily when someone with the disease coughs or sneezes. The symptoms can last for months. Whooping cough is particularly dangerous for young babies.

Tetanus – causes a severe, painful tightening (spasms) of muscles, including of the jaw ('lockjaw'), which can limit swallowing and breathing.

Diphtheria – is a throat infection that can lead to breathing problems, paralysis, heart failure and death.

16) What are the diseases that the meningococcal vaccine prevents?

Quadrivalent meningococcal conjugate vaccine (MCV4) prevents meningitis caused by Serogroups A, C, Y and W-135.

17) What are Tdap, Td and related vaccines?

A) Vaccines for adolescents and adults:

- 1) Tdap** (Boostrix, Adacel) vaccine is a booster shot to protect adolescents and adults against tetanus, diphtheria and pertussis (whooping cough). The name **Tdap** stands for
- T** Tetanus toxoid
 - d** reduced diphtheria toxoid
 - ap** acellular pertussis vaccine

Tdap is routinely administered on or after the 10th birthday. A dose of Tdap vaccine given on or after the 7th birthday meets the new school requirement.

2) Td (Decavac) vaccine, invented before Tdap, protects persons 7 years and older against tetanus and diphtheria. Td vaccine does not protect against pertussis and so does not meet the new school Tdap requirement.

B) Vaccines for younger children:

3) DTaP (Pediarix, TriHiBit, Daptacel, Infanrix, Tripedia, Pentacel, Kinrix) vaccine protects infants and younger children against the same diseases – tetanus, diphtheria and pertussis (whooping cough) – as the Tdap booster shot given at older ages. The DTaP vaccine is intended for children younger than 7 years of age. (**NOTE:** In adolescents (aged 11-18 years) who inadvertently receive a pediatric DTaP, that dose should be considered the adolescent Tdap and does meet the 7th grade requirement)

4) DTP (or DPT) is an older version of the DTaP vaccine that is still given to young children outside of the United States. DTP does not meet the 7th grade requirement.

5) DT vaccine protects infants and younger children against tetanus and diphtheria. DT does not protect against pertussis. DT does not meet the new school Tdap requirement. DT does not meet the 7th grade requirement.

18) What are meningococcal related vaccines?

1) MCV4 (Menactra, Menveo). MCV4 is recommended for routine vaccination of all adolescents and vaccination of certain high risk children and adults. A dose of MCV4 does meet the 7th grade school requirement.

2) A dose of MPSV4 (Menomune) does not meet the 7th grade school requirement.

19) Where can a student get vaccinated?

Children should visit their health care provider to get their Tdap or meningococcal vaccination. Local Health Departments also offer the Tdap and meningococcal vaccine. To find a Health Department, please visit <http://dph.georgia.gov/public-health-districts>.

20) Are there other vaccinations for preteen or teenage children?

Yes, preteens and teens are also recommended to receive vaccines against flu (influenza), HPV (human papillomavirus, a cause of cervical cancer), and any vaccine they may have missed during childhood, including two doses of MMR and varicella. The

recommended vaccine schedule may be found at <http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>. Schools should encourage parents to discuss these vaccinations with their health care provider. Health care providers should use every opportunity, including sport physicals, to immunize against these diseases.

21) When should children get vaccinated with Tdap?

The Centers for Disease Control and Prevention (CDC) recommends that:

- Adolescents 11-12 years old get Tdap.
- Adolescents 13-19 years old, who haven't already received Tdap, should also receive it

22) Why should children get vaccinated with Tdap?

In addition to it being a requirement for school, children who get a Tdap booster shot will be better protected during their school years. Vaccination helps protect others within the home, in the community, and at school. Vaccinations also help prevent school closures.

23) Why was the Tdap requirement added?

The vaccination requirement is intended to reduce the spread of whooping cough in Georgia. In recent years the United States has seen an increase in whooping cough. In 2012, Georgia had over 300 cases of whooping cough reported.

Prior to entering kindergarten, most children are fully protected against diphtheria, tetanus, and pertussis after receiving the DTaP vaccine in early childhood. However, immunity to these diseases wears off, leaving adolescents vulnerable once again. A booster dose of Tdap during adolescence helps to protect students and their close contacts, including young infants for whom pertussis is most severe and sometimes fatal.

24) How long do children have to wait after their last tetanus shot before getting their required dose of Tdap?

According to state and national recommendations, the dose of Tdap required for the school law may be given at any time after the last tetanus shot.

25) When should children get vaccinated with the meningococcal vaccine?

The Centers for Disease Control and Prevention (CDC) recommends that children age 11-12 years be routinely vaccinated with a meningococcal vaccination and receive a booster dose at age 16 years.

26) Why should children get vaccinated with the meningococcal vaccine?

Meningococcal disease is a serious bacterial illness. It is a leading cause of bacterial meningitis in children 2 through 18 years old in the United States. Meningitis is an infection of the covering of the brain and the spinal cord. High fever, headache, vomiting, stiff neck and a rash are symptoms of meningococcal disease. Meningitis can cause shock, coma, and death within hours of the first symptoms.

Among people who develop meningitis, 10 to 15 percent die, in spite of treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur. This is why preventing the disease through use of meningococcal vaccination is important.

27) Why was the meningococcal vaccine added?

Vaccination is one of the most effective ways to prevent most meningococcal diseases and this requirement will help protect students. Seventy-six percent of meningococcal cases among 11-19 year olds are vaccine preventable. In addition to it being a requirement for school, children who get a meningococcal shot will be better protected during their school years.

28) What can schools accept as proof of vaccination?

Proof of Tdap and meningococcal vaccination must be documented on a Georgia immunization certificate (Form 3231).

29) May schools use GRITS to view or print immunization certificates (Form 3231)?

Schools that use GRITS are able to check the records of students whose medical providers also use GRITS. The Tdap and meningococcal requirement documentation is available through GRITS. Schools that do not already use GRITS may inquire with the GRITS Help Desk at 404-463-0810 about becoming authorized users of GRITS.

30) What should schools do with previous copies of Georgia Immunization Records (Form 3231) when retaining a new copy printed in GRITS for the Tdap and meningococcal requirement?

Compare the records. If all information on previous copies of the 3231 is found on the new 3231, old copies may be destroyed. If not, or if you are unsure, keep the old copies as well in the permanent record.

31) Does GRITS have immunization records for all students?

Any person who administers a vaccine or vaccines licensed for use by the United States

Food and Drug Administration (FDA) to a person is required to enter the vaccination into GRITS. However, not all health care providers use GRITS, and some students' records in GRITS are incomplete. GRITS has many records, but not all records.

32) How do I gain access to GRITS?

To gain access to the information in the GRITS system you must contact the GRITS Enrollment Coordinator at 404-463-0810 or e-mail immreg@dhr.state.ga.us.

33) Where may I obtain more information about GRITS?

For more information about GRITS, please visit <http://dph.georgia.gov/georgia-immunization-registry-grits>.

34) Is there a grace period/extension to get the Tdap and/or meningococcal vaccination AFTER school starts?

According to Georgia law (O.C.G.A. § 20-2-771 (b)), if a child does not have documentation of having received a Tdap and meningococcal vaccination, the responsible official of any school or facility may grant a 30 day waiver of the certification requirement for a justified reason. The waiver may be extended from the date of first admittance or of first attendance, whichever is earlier, for up to 90 days provided documentation is on file at the school or facility from the local health department or a health care provider specifying that a vaccination appointment has been scheduled. The waiver may not be extended beyond 90 days; and upon expiration of the waiver, the child shall not be admitted to or be permitted to attend the school or facility unless the child submits a certificate of immunization.

35) What if the student is homeless and subject to the McKinney-Vento Act?

Children affected by the McKinney-Vento Homeless Assistance Act are not exempt from the new 7th grade vaccination requirements. GDPH has notified local health departments in Georgia to promptly identify and immunize students affected by the McKinney-Vento Act. GDPH recommends that schools work closely with local health departments as needed to give Tdap and meningococcal vaccinations to unimmunized homeless children. Local health departments can provide information about clinics and other accommodations for urgently needed vaccinations.

Excerpt from the McKinney-Vento Homeless Assistance Act: 42 U.S.C. Section 11432(g):
*"If the child or youth needs to obtain immunizations or immunization or medical records, the enrolling school shall **immediately** refer the parent or guardian of the child or youth to the local educational liaison designated by the school district who shall assist in obtaining necessary immunizations or immunization or medical records."*

36) What if the student is in foster care?

Children in foster care are not exempt from the new 7th grade vaccination requirements. Children in foster care who are transferring mid-year from another school in Georgia will have been subject to the 7th grade vaccination requirements at the prior school. GDPH recommends that schools work closely with local health departments as needed to give Tdap and meningococcal vaccines to unimmunized children in foster care. Local health departments can provide information about clinics and other accommodations for urgently needed vaccinations.

37) What about students in special education or children with individualized education programs (IEPs)?

Children in special education and children with IEPs are not exempt from the Tdap and meningococcal school vaccination requirements.

38) What exemptions are available under Georgia law?

Georgia law (Section 20-2-771) provides for two types of exemptions from vaccination requirements.

- **Medical:** A medical exemption for a vaccine should be completed on the GA DPH Certificate of Immunization (Form 3231) only when there is a physical disability or condition that contraindicates immunization for that particular vaccine. There must be an annual review of the medical exemption and certificates must be reissued with or without indication of the medical exemption. O.C.G.A. § 20-2-771
- **Religious Exemption:** For a child to be exempt from immunizations on religious grounds, the parent or guardian must furnish the school/facility with a notarized statement stating that immunization conflicts with his or her religious beliefs. There is not a standard form for religious exemption. The notarized statement must be kept on file in lieu of an immunization certificate. O.C.G.A. § 20-2-771

Note: Exemptions to immunization should not be taken because of convenience. Unimmunized students are at greater risk of contracting diseases and spreading them to their families, schools and communities. Schools should maintain an up-to-date list of students with exemptions, so that these students can be excluded from school quickly if an outbreak occurs.

39) What information will schools need to report to GDPH for the Tdap/meningococcal requirements?

Schools with students in 7th grade will need to report each fall to GDPH the numbers of students in each grade that have met the Tdap and meningococcal requirements by 1)

being immunized; 2) receiving a medical exemption 3) declaring a religious exemption.

40) How can my school get ready for the Tdap requirement?

- Get the word out now: Remind parents and guardians of all current 6th grade students to be vaccinated with Tdap now if they haven't received it yet to protect them against the ongoing threat of pertussis and to help meet the Tdap requirement. Families should not wait until the fall to get their children immunized with Tdap.
- Repeat these messages throughout the school year using school:
 - Newsletters
 - Websites
 - Email and phone message systems
 - Other school communications.
- Plan admissions procedures for the upcoming school year:
 - Information and training materials on how to document the Tdap requirement are available at <insert website>
 - If not already using GRITS, consider becoming a user – call the GRITS Help Desk at <insert phone number>

41) Where can I go for more information?

For additional information and resources for schools, check <http://dph.georgia.gov/immunization-section> , which is updated frequently.

42) What should I do if I learn that a student at my school might have pertussis or meningitis?

Contact your local health department or 1-866-PUB-HLTH (1-866-782-4584) immediately for assistance.

43) I have additional questions about pertussis, diagnostic testing, disease reporting, treatment and prophylaxis and infection control measures.

Please visit <http://dph.georgia.gov/pertussis> for information about diagnostic testing, disease reporting, treatment, prophylaxis and infection control measures.

44) I have additional questions about meningitis.

Please visit <http://dph.georgia.gov/neisseria-meningitidis> for additional information.