To: All Immunization Providers

Re: VACCINE RECOMMENDATIONS AND REQUIREMENTS FOR SCHOOL ENTRY
(2019-2020 School Year)

In preparation for the upcoming school year, the Immunization Program is forwarding to all Immunization Providers, the 2019-2020 Vaccine Requirements for School Entry. The Virgin Islands Code Title 17, Chapter 10, Subchapter 116-1 states “all children registering for kindergarten and for any public, parochial or private schools must have a valid certificate of immunizations for such diseases as Diphtheria, Pertussis, Tetanus, Measles, Poliomyelitis, and all other diseases as are required by the standard listing issued annually by the Commissioner of Health”.

Title 17, Chapter 10, Subchapter 116-2 states “No principal or other person in charge of a kindergarten or other schools shall knowingly admit or retain any pupil who has not submitted acceptable evidence of immunization according to the schedule specified by the Commissioner of Health, except when they are exemptions as herein stated”.

The following vaccines are recommended by the Department of Health as well as the Advisory Committee on Immunization Practice (ACIP), the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP):

Hepatitis B, Rotavirus, Diphtheria, Tetanus, Pertussis, Haemophilus Influenzae type b, Pneumococcal (Prevnar) Inactivated Poliovirus, Measles, Mumps, Rubella, Varicella, Hepatitis A, and Influenza.

Please note that the Influenza vaccine is being recommended for all children in childcare facilities. All children 6 months old and above are encouraged to receive the influenza vaccine by December 31, 2019, (unless child is exempt – see guidelines below).
Through ongoing assessment of our coverage rates it has been determined that less than 10% of the Virgin Islands children are vaccinated against influenza. Conditions in childcare facilities also promote the spread of influenza: there are a large number of people together who are in close contact, and there is poor respiratory hygiene (e.g., covering a cough). Even more, the highest rates of infection are in children less than 5 years old.

**CDC recommends that everyone 6 months of age and older get a seasonal flu vaccine.** Vaccination is especially important for certain people who are at high risk or who are in close contact with high risk persons, including the following groups:

- Children younger than 5 years of age, and children of any age with a long-term health condition like asthma, diabetes, or disorders of the brain or nervous system. These children are at higher risk of serious flu complications (like pneumonia) if they get the flu. For the complete list of those at high risk, visit [People at High Risk of Developing Flu-Related Complications](#).

- Adults who meet any of the following criteria listed below should get a seasonal flu vaccine:
  - Are in close contact with children younger than 5 years of age (people who live with them).
  - Are out-of-home caregivers (nannies, daycare providers, etc.) of children younger than 5 years of age.
  - Live with or have other close contact with a child or children of any age with a chronic health problem (asthma, diabetes, etc.).
  - Are health care workers

**The following immunizations are “required” for school entry in the United States Virgin Islands for the school year 2019-2020.**

- Hepatitis B, Diphtheria, Tetanus, Pertussis, Polio, Measles, Mumps
- Rubella, Varicella, and Meningococcal

- One (1) dose of Tetanus, Diphtheria, Acellular Pertussis Vaccine (Tdap) is required for children 11 years of age and above (eligibility for vaccination will be determined by health care provider).

- Two (2) doses of Varicella vaccine are required for children in kindergarten through the 10th grade – both new and existing students who are entering/registering/repeating/ (eligibility to be determined by healthcare provider).

- One (1) dose of Meningococcal conjugate vaccine (MCV4) for children 11 to 15 years of age, (eligibility to be determined by healthcare provider). A second dose of Meningococcal conjugate vaccine (MCV4) will be required for children 16 to 18 years of age, (eligibility to be determined by healthcare provider).

- Please note that effective this 2019-2020 school year, two (2) doses of Varicella will be required for children in kindergarten through 11th grade.
For more information concerning number of doses recommended based upon the child’s age and immunization history, please refer to the attached “Recommended Immunization Schedule for Children and Adolescents Aged 18 Years and Younger”.

- Before being issued immunization clearance form for school registration or being admitted to school, all children shall receive the required vaccine(s) (and total number of doses), at the minimum age recommended in the attached immunization schedule; however, for each child, eligibility to receive the required vaccine will be determined by the clinic nurse or healthcare provider.
- Any child who received the immunization clearance form at the time of the clinic visit, but has not completed the required vaccine series (due to the time intervals required between doses), must return to the MCH clinic or their healthcare provider to complete the required vaccine series by the vaccination date(s) indicated and documented by the immunization provider in the child’s immunization record.

Please call the Department of Health MCH Program at (340) 777-8804 for St. Thomas/St. John or (340) 514-6839 on St. Croix if you have any questions concerning the vaccines recommended for infants and children specified above.

Please note: Exemptions may be granted for school-aged children based on the principles and teachings of a recognized religious organizations/church and if the vaccines/medical agents are medically contraindicated (please see VI Code Title 17, Chapter 10, Subchapter 116-3 & 116-4).

Sincerely,

[Signature]

Justa Encarnacion, RN, BSN, MBA/HCM
Commissioner of Health

[Date] 9/12/19
# Table 1

**Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger**

United States, 2019

These recommendations must be read with the Notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Table 1. To determine minimum intervals between doses, see the catch-up schedule (Table 2). School entry and adolescent vaccine age groups are shaded in gray.

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<thead>
<tr>
<th>Vaccine</th>
<th>Birth</th>
<th>1 mo</th>
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<th>4 mos</th>
<th>6 mos</th>
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<th>18 mos</th>
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<th>2-3 yrs</th>
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<tr>
<td>Hepatitis B (HepB)</td>
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<td>Rotavirus (RV) RV1 (2-dose series); RV5 (3-dose series)</td>
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<td>Diphtheria, tetanus, &amp; acellular pertussis (DTaP; &lt;7 yrs)</td>
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<td>2&lt;sup&gt;nd&lt;/sup&gt; dose</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt; dose</td>
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<td><em>Haemophilus influenzae</em> type b (Hib)</td>
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<td>Pneumococcal conjugate (PCV13)</td>
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<td>Inactivated poliovirus (IPV; &lt;18 yrs)</td>
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<td>Influenza (IIV)</td>
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<td>Influenza (LAIV)</td>
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<td>Measles, mumps, rubella (MMR)</td>
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<td>Varicella (VAR)</td>
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<td>Hepatitis A (HepA)</td>
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<td>Meningococcal (MenACWY-D ≥9 mos; MenACWY-CRM ≥2 mos)</td>
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<td>Tetanus, diphtheria, &amp; acellular pertussis (Tdap; ≥7 yrs)</td>
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<td>Human papillomavirus (HPV)</td>
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<td>Meningococcal B</td>
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<td>Pneumococcal polysaccharide (PPSV23)</td>
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- **Range of recommended ages for all children**
- **Range of recommended ages for catch-up immunization**
- **Range of recommended ages for certain high-risk groups**
- **Range of recommended ages for non-high-risk groups that may receive vaccine, subject to individual clinical decision-making**
- **No recommendation**

02/22/19

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