



**GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES**
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**VIRGIN ISLANDS DEPARTMENT OF HEALTH
IMMUNIZATION PROGRAM**

ST. CROIX OFFICE
CHARLES HARWOOD COMPLEX
3500 ESTATE RICHMOND
CHRISTINASTED, ST. CROIX, VI. 00820-4370
TEL: (340)-718-1311

ST. THOMAS OFFICE
1303 HOSPITAL GROUND, SUITE 10
CHARLOTTE AMALIE
ST. THOMAS, VI 00802-6722
TEL: (340) 776-1113

June 2, 2025

To: All Parochial and Private Schools

Re: REQUIRED VACCINE RECOMMENDATIONS FOR 2025-2025 SCHOOL YEAR

This is a reminder to all parents or guardians with children enrolled in the United States Virgin Islands private and parochial school systems that each child must be immunized against communicable diseases except for those children who are exempt. All children registering for kindergarten and for any parochial or private schools must have a valid certificate of immunization 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.

The following immunizations are “required” for school entry in the United States Virgin Islands for the school year 2025-2026.

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 11th grade—both new and existing students who are entering/registering/repeating/ (eligibility to be determined by healthcare provider).**
- **Please note that effective this 2025-2026 school year, two (2) doses of Varicella will be required for children in kindergarten through 11th grade.**

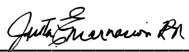
For more information concerning number of doses recommended based upon the child's age and immunization history, please refer to the attached "Recommended Child and Adolescent Immunization Schedule for ages 18 years and younger."

- 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 have **not** completed the required vaccine series (due to the time intervals required between doses), **must** return to the Maternal and Child Health (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.

If you have any questions regarding the vaccines required for school entry, please call the Department of Health Maternal Child and Health Clinic in St. Thomas/St. John (340) 777-8804 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, notarized personal statement, and if the vaccines/medical agents are medically contraindicated.

Sincerely,

 5/16/2025

Justa Encarnacion, RN BSN, MBA/HCM Date
Commissioner
Virgin Islands Department of Health

Pc: Principals, Administrators, and School Nurses

Table 1

Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger, United States, 2025

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. To determine minimum intervals between doses, see the catch-up schedule (Table 2).

Vaccine and other immunizing agents	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16 yrs	17–18 yrs	
Respiratory syncytial virus (RSV-mAb [Nirsevimab])	1 dose depending on maternal RSV vaccination status (See Notes)										1 dose (8 through 19 months); See Notes							
Hepatitis B (HepB)	1st dose	← 2nd dose →			← 3rd dose →													
Rotavirus (RV): RV1 (2-dose series), RV5 (3-dose series)			1st dose	2nd dose	See Notes													
Diphtheria, tetanus, acellular pertussis (DTaP <7 yrs)			1st dose	2nd dose	3rd dose			← 4th dose →				5th dose						
Haemophilus influenzae type b (Hib)			1st dose	2nd dose	See Notes		← 3rd or 4th dose (See Notes) →											
Pneumococcal conjugate (PCV15, PCV20)			1st dose	2nd dose	3rd dose		← 4th dose →											
Inactivated poliovirus (IPV)			1st dose	2nd dose	← 3rd dose →						4th dose		See Notes					
COVID-19 (1vCOV-mRNA, 1vCOV-aP5)					1 or more doses of 2024–2025 vaccine (See Notes)													
Influenza (IIV3, cclIV3)					1 or 2 doses annually													
Influenza (LAIV3)	OR								1 or 2 doses annually		OR 1 dose annually							
Measles, mumps, rubella (MMR)					See Notes	← 1st dose →			2nd dose									
Varicella (VAR)						← 1st dose →			2nd dose									
Hepatitis A (HepA)					See Notes	2-dose series (See Notes)												
Tetanus, diphtheria, acellular pertussis (Tdap ≥7 yrs)													1 dose					
Human papillomavirus (HPV)													See Notes					
Meningococcal (MenACWY-CRM ≥2 mos, MenACWY-TT ≥2years)					See Notes										1st dose		2nd dose	
Meningococcal B (MenB-4C, MenB-FHbp)											See Notes							
Respiratory syncytial virus vaccine (RSV [Abrysvo])											Seasonal administration during pregnancy (See Notes)							
Dengue (IDENACVD: 9–16 yrs)											Seropositive in endemic dengue areas (See Notes)							
Mpox																		

Range of recommended ages for all children Range of recommended ages for catch-up vaccination Range of recommended ages for certain high-risk groups or populations Recommended vaccination can begin in this age group Recommended vaccination based on shared clinical decision-making No Guidance/Not Applicable