

# WEST ORANGE PUBLIC SCHOOLS

179 Eagle Rock Avenue

West Orange, New Jersey 07052

Department of Student Support Services

(973) 669-5400 ext. 20538 Fax: (973) 669-8601

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## HEALTH AND IMMUNIZATION REQUIREMENTS FOR SCHOOL ATTENDANCE

With this packet, you are receiving a set of health forms that must be returned at your registration appointment. **Please note the immunization requirements. The State requires your child to be immunized to qualify for school attendance.** Should you have any questions concerning these health requirements, please contact the school nurse.

**H-85-14: HEALTH HISTORY CARD** - Two blue emergency cards will be sent home, either in the packet you receive from the school in August or on the first day of school, and **MUST** be returned on the next day. The blue cards are two-sided, please complete both sides and sign the back. These blue emergency cards are our lifeline to you in case of emergency, accident, or illness. Be sure to record the name and telephone number of the person(s) we should contact in the event we cannot reach you. Two new cards must be completed every year.

### PUPIL HEALTH EXAMINATION

It is good practice to have your child receive a complete physical examination once a year. This form must be completed by the primary care physician and returned to the school nurse. The information will be used to keep your child's medical record current. It may be completed when your child is examined for camp or at any other routine visit during the year. If your child was recently examined, ask the provider to complete the form at this time. A physical is required by students in pre-kindergarten, kindergarten, fourth, sixth, and ninth grades, plus new enrollees in all other grade levels; documentation is required in September. **New enrollees, medical documentation, including immunization records, are required at time of registration, or prior to the first day of school attendance.** Forms can be obtained on the district website.

### SCOLIOSIS SCREENING

Students in grades five, seven, nine, and eleven will be screened in school for curvature of the spine unless exempt by parental note.

### TUBERCULIN TESTING (new students)

Pupils will be Mantoux-tested if in the categories cited by the State Department of Health guidance. The school nurse will notify you if your child is required to be tested.

### NJDOE MINIMUM IMMUNIZATION REQUIREMENTS

The following document identifies the minimum immunization requirements as required by New Jersey Administrative Code, N.J.A.C:8:57-4.

#### PRESCHOOL REQUIREMENTS

Written Documentation of:

- Four (4) Doses of D.P.T. or D.T.A.P. Vaccine
- Three (3) Doses of Polio Vaccine
- One (1) Dose of H.I.B. **administered after 12 months of age**
- One (1) Dose of M.M.R. **administered after 12 months of age**
- One (1) Dose of Varivax **administered after 12 months of age**
- One (1) Dose of Influenza Vaccine (annually)
- One (1) Dose of PCV Pneumococcal Vaccine on or after the first birthday

#### KINDERGARTEN REQUIREMENTS

Written Documentation of:

- Four (4) Doses of D.P.T. or D.T.A.P., **with one dose administered on or after the fourth birthday, OR** any five (5) doses.
- Three (3) Doses of Polio, **with one dose administered on or after the fourth birthday or four doses appropriately spaced, OR** any 4 doses
- Two (2) Doses of M.M.R. **administered on or after the first birthday**
- Three (3) Doses of Hepatitis B vaccine administered at appropriate intervals
- One (1) Dose of Varivax administered after 12 months of age or laboratory, physician or parental documentation of disease

#### SIXTH GRADE REQUIREMENTS

Written Documentation of:

- Meningococcal Vaccine – Every child born on or after January 1, 1997, when turning 11 years old.**
- Tdap Booster – Every child born on or after January 1, 1997, when turning 11 years old.**