



## STUDENT HEALTH DOCUMENTATION

### A. Vaccine Information

As a State of New Hampshire educational institution, we are required to maintain up-to-date student health records and comply with New Hampshire State law. Each newly enrolled student must provide a copy of a recent physical examination for his/her health file in the Health Office. Immunization records must be up-to-date and provided to the Health Office.

The State of New Hampshire *REQUIRES* the immunizations listed below for students *before* entering school. Reference these under the *Forms and Policies* link at our school website.

All students entering PK (ages 3-5) will have:

- 1) **MMR-measles-mumps-rubella:** 1 dose. The first dose just be administered on or after the 1st birthday.
- 2) **DTAP/DtaP/DT/Td:** 4 doses. The 3rd and 4th dose must be separated by at least 6 months.
- 3) **OPV or IPV- Polio:** 3 doses. Any OPV dose(s) given on or after April 1, 2016 does not count toward the polio vaccine requirement and the series must be completed with IPV.
- 4) **HIB-Haemophilus Influenzae Type B(Hib):** 1 dose on or after 15 months of age OR 4 doses with the last dose administered on or after 12 months of age. Not required for children  $\geq$  5 years of age.
- 5) **Hepatitis B:** 3 doses given at acceptable intervals.  
**Varicella- Chicken Pox:** 1 dose. This dose must be administered on or after age 12 months. OR laboratory confirmation of chicken pox disease.

All students entering Kindergarten through Grade 12 will have:

- 1) **MMR-measles-mumps-rubella:** 2 doses. The first dose must be administered on or after the 1st birthday.
- 2) **DTP/DTaP/DT/Td/Tdap.**
  - a. **6 years and under:** 4 or 5 doses, with the last dose given on or after the 4th birthday.
  - b. **7 years and older:** 3, 4, or 5 doses with the last dose given on or after the 4th birthday. A dose of Tdap will be considered as one of these requirements.
  - c. **Grades 7-12: 1 dose of Tdap is required for entry into 7th grade. A Tdap vaccine given on or after the 7th birthday meets the school requirement for Grade 7.**
- 3) **OPV or IPV- Polio:**
  - a. **Grades K-8: 3 or 4 doses** with the last dose given on or after the 4th birthday and the last 2 doses separated by 6 months or more.
  - b. **Grades 9-12:** 3 doses, with the last dose given on or after the 4th birthday OR 4 doses regardless of age at administration.
- 4) **Hepatitis B** - 3 doses at acceptable intervals
- 5) **Varicella- Chicken Pox:**
  - a. **Grades K-11:** 2 doses with the first dose administered on or after the 1st birthday OR laboratory confirmation of immunity
  - b. **Grade 12:** 2 doses with the first dose administered on or after the 1st birthday OR laboratory confirmation of immunity OR history of chickenpox disease.

## **B. Documentation of immunity by laboratory test or Religious Exemption**

Documentation of immunity by laboratory test in lieu of vaccination will be accepted as an alternative to documented vaccination.

Religious exemptions may be granted for all vaccines, but the New Hampshire Certificate of Religious Exemption form must be signed by the parent and notarized. This form may be obtained from the CCA Health Office or on-line at the link below. It will be kept with the student's health records.

LINK: <http://www.dhhs.nh.gov/dphs/immunization/documents/exemption.pdf>.

## **C. New Student History and Physical**

A recent History and Physical, H&P, from a healthcare provider (licensed physician, physician assistant, or advanced practice registered nurse) is required at enrollment. A *School/Camp Form* may be substituted.

Call your healthcare provider's office and ask for this information to be mailed or faxed to CCA (603-226-9696), Attention: *CCA Health Office*. By Law, we must have current physical status information on file at CCA prior to the first day of school.

**Additional H&P's thereafter will be requested every two years or with any change in a student's health status.** An updated copy is always appreciated whenever your student has their annual physical.

## **D. High School Sports Participation**

The *New Hampshire Interscholastic Athletic Association (NHIAA)* requires that all students participating in JV and Varsity sports provide evidence that they are cleared by their doctor to participate in sports activities. Again, most offices provide a *Camp/School Form* that compiles a student's health status and indicates approval to participate.

Call your provider's office and ask for this information to be mailed or faxed to CCA (603-226-9696), Attention: *CCA Health Office*. By Law, we must have current physical status information on file at CCA prior to participating on a team.

NOTE: Cases will arise where a healthcare provider requires an updated physical to clear your student to participate, so please address this ahead so that timing issues will not affect their ability to participate.

## **E. Chronic Health Issues**

- 1) If your student has a chronic health condition that may require supportive care or may require emergency care during the school day, please contact your student's classroom teacher by letter, e-mail, or phone. You will need to set up an appointment to discuss your child's health condition and individual health care plan. If you would like to have the CCA School Nurse there, please include that in your request.
- 2) This includes conditions such as asthma, allergies/anaphylaxis, diabetes, seizures, migraine headaches, ADHD, etc.
- 3) Confidentiality is very important and is taken very seriously. However, release of pertinent medical information to certain school staff is necessary for a student's well being at times. This can be vital for students with a chronic health condition and will be discussed at your appointment.
- 4) If your student has asthma or allergies, or is taking a Prescription medication, please download and submit the appropriate form(s) from our website under the *Forms and Policies* link by the first day of school. This *may include* one or more of the following:
  - a. Prescription Medication Administration form (necessary if student is on prescription med.)
  - b. Asthma Information Form (identifying specifics of student's condition)
  - c. Permission to Carry an Inhaler Form
  - d. Allergy Information Form (identifying allergens and reaction concerns)
  - e. Permission to Administer Epinephrine

*If you have any questions, please email , Michelle Alosa RN, School Nurse, at [malosa@concordchristian.org](mailto:malosa@concordchristian.org)*