Immunization Worksheet for Day Care for Children Less Than 1 Year of Age

Completion Instructions on the Reverse Side | **Do Not Return This Form** | **Keep For Your Records**

Day Care _____

Room _____ ☐ am ☐ pm Total Enrollment _____ Prepared By _____

1		2	3	4	5	6	7	8	9	10	11
Total Number of Children		Children Without Immunization Record	Medical Exemptions	Diphtheria, Tetanus, Pertussis (DTaP)	Polio	Haemophilus Influenzae Type B (Hib)	Hepatitis B	Pneumococcal (PCV)	Completely Immunized	In Process	Homeless Children
				Refer to page 2 of this worksheet for the appropriate number of doses required	Refer to page 2 of this worksheet for the appropriate number of doses required	Refer to page 2 of this worksheet for the appropriate number of doses required	Refer to page 2 of this worksheet for the appropriate number of doses required	Refer to the PCV chart in the School Survey Instruction Booklet for appropriate doses	Children who meet all the requirements for columns 4-8		Children who are considered homeless under McKinney Vento
Name	DOB										
Sub-total this page											
Summary Totals											
Number of children this page _____											

* Completely immunized – Enter an "X" in the Completely Immunized box for those children who meet all requirements for columns 4 through 8. Children counted in column 2 should not be counted in column 9.

INSTRUCTIONS FOR DAY CARE FOR CHILDREN LESS THAN 1 YEAR OF AGE IMMUNIZATION SURVEY WORKSHEET

- Use this worksheet to help you fill out the survey form. **DO NOT RETURN TO US.**
- Make photocopies of this worksheet before filling it out if you know you will need more.
- Only transfer "Summary Totals" from the front of the last worksheet to the survey form.
- The immunization status of all children less than 1 year of age in day care should be included on this worksheet.
- Keep a separate list of those children who have been granted a medical exemption.
- **Intervals between doses of vaccine must be in accordance with the Advisory Committee for Immunization Practices (ACIP) Recommended Immunization Schedules for Persons 0 Through 18 Years of Age.**

TO COMPLETE THIS FORM

Column 1. Enter the name (last, first, middle initial) and birthday (month, day, year) for each child on a separate line.

Column 2. Enter an "X" in the Children Without Immunization Record box for those children who do not have an immunization record or other proof of immunity on file. **Do not count students who do not have an immunization record in columns 4 through 10. Do not count children who have medical exemptions in this column.**

Column 3. Enter an "X" in the Medical Exemptions box for those children who have a medical exemption from a physician licensed to practice medicine in the State of New York.

Column 4. Enter an "X" in the Diphtheria, Tetanus and Pertussis (DTaP) box for those children who have received the appropriate number of doses of DTaP vaccine for their age. Children starting the vaccine series on time should receive doses at 2 months, 4 months and 6 months of age. For children who are behind or started late, refer to the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind in the School Survey Instruction Booklet available at http://www.health.ny.gov/prevention/immunization/schools.

Column 5. Enter an "X" in the Polio box for those children who have received the appropriate number of doses of polio vaccine for their age. Children starting the vaccine series on time should receive doses at 2 months, 4 months and 6 to 18 months of age. For children who are behind or started late, refer to the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind in the School Survey Instruction Booklet available at http://www.health.ny.gov/prevention/immunization/schools.

Column 6. Enter an "X" in the Haemophilus influenza type B (Hib) box for those children who have received the appropriate number of doses of Hib vaccine for their age. Children who start the vaccine series on time should receive doses at 2 months, 4 months, and 6 months of age. For children who are behind or started late, refer to the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind in the School Survey Instruction Booklet available at http://www.health.ny.gov/prevention/immunization/schools.

Column 7. Enter an "X" in the Hepatitis B box for those children who have received the appropriate number of doses of Hepatitis B vaccine for their age or who have demonstrated serological evidence of immunity to hepatitis B disease. Children who start the vaccine series on time should receive doses at birth, 1 to 2 months and 6 to 18 months of age. For children who are behind or started late, refer to the Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind in the School Survey Instruction Booklet available at http://www.health.ny.gov/prevention/immunization/schools.

Column 8. Enter an "X" in the Pneumococcal (PCV) box who have received the appropriate number of doses of pneumococcal vaccine for their age. Children who start the vaccine series on time should receive doses at 2 months, 4 months and 6 months of age. Refer to the PCV vaccine chart in the School Survey Instruction Booklet available at http://www.health.ny.gov/prevention/immunization/schools/.

Column 9. Enter an "X" in the Completely Immunized box for those children who meet all requirements for columns 4 through 8. Children counted in column 2 should not be counted in column 9.

Column 10. Enter an "X" in the In Process box for those children who are not age appropriately immunized and who have received at least the first dose of each required vaccine series and have age appropriate appointments to complete the series according to the ACIP catch-up schedule.

Column 11. Enter an "X" in the Homeless Children box for those children who are considered homeless under McKinney Vento.

TABULATING THE DATA

Add the number of "Xs" in each column and enter the sub-totals on each page.
Add the sub-totals for each page and enter the summary totals on the last page.
Transfer all totals by grade onto the Survey Summary Form