



Kindergarten Survey

Basic Questions

Name of person filling out IDR survey:

Email of person filling out IDR survey:

What best describes the role of the person filling out this survey?

Do Kindergarten students receive vision screening?

How many students are enrolled in kindergarten?

Are there any enrolled kindergarten students who do not have an immunization record or an exemption on file?

For the following questions, count each student only once.

DTaP/DTP/DT/Td

How many students have received either a total of 4-5 doses with one dose at 4 years of age or older, or a total of 6 doses?

How many of the students who do NOT meet the requirements are exempt?

Polio

How many students have received either a total of 4 doses OR a total of 3 doses with the 3rd dose given at 4 years of age or older?

How many of the students who do NOT meet the requirements are exempt?

MMR

How many students have received 2 doses, both given at 12 months of age or older?

How many of the students who do NOT meet the requirements are exempt?

Hepatitis B

How many students have completed the Hepatitis B series with at least 3 doses with the 3rd dose given at 24 weeks or older?

How many of the students who do NOT meet the requirements are exempt?

Varicella (Chickenpox)

1 dose of Varicella vaccine is required for school entry. Parental recall of chickenpox disease is no longer acceptable. Children with reported history of chickenpox should be referred to their healthcare provider for a medical exemption with attached laboratory evidence of immunity.

How many students have received 2 doses of Varicella vaccine?

How many students have received ONLY 1 dose of Varicella vaccine?

How many students have a medical exemption form containing either physician confirmation and/or laboratory evidence of chickenpox disease?

How many of the students who do NOT meet the requirements have a personal belief exemption?

Final Questions

The questions below must be answered if any students were listed as exempt to one or more vaccines in previous questions. Count each student only once in answering the first 3 questions below.

What is the total number of students who have a Personal Belief Exemption form on file?

What is the total number of students who have a Temporary Medical exemption form on file?

What is the total number of students who have a Permanent Medical OR Laboratory Evidence of Immunity exemption form on file?

What is the total number of students who have Personal Belief Exemptions from every state required immunization?

Comments and clarifications

The County Health Department assisted me in the submission of this Kindergarten IDR.

Yes No

If yes, please name County Health Department nurse/staff member who assisted you, date(s) of assistance, and number of hours of assistance provided.