

## MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

### Immunization Exemptions and Vaccine Preventable Disease Exclusion Guidelines in School Settings

#### Definition of Allowable Exemptions

There are two situations in which children who are not appropriately immunized may be admitted to school:

- 1) a **medical exemption** is allowed if a physician submits documentation attesting that an immunization is medically contraindicated; and
- 2) a **religious exemption** is allowed if a parent or guardian submits a written statement that immunizations conflict with their sincere religious beliefs.

The law states that medical exemptions must be presented at the beginning of each school year. MDPH additionally requires annual renewal of religious exemptions in writing at the beginning of each school year.

**Philosophical exemptions are not allowed by law in Massachusetts, even if signed by a physician. Only medical and religious exemptions are acceptable. These exemptions must be kept in the students' files at school (105 CMR 220.000 and M.G.L. c.76, ss. 15, 15C and 15D).**

#### Policies for Exclusion at School Entry

While the laws and regulations state that **unimmunized** children who do not meet criteria for medical or religious exemption “shall **not** be admitted to school,” policies around enforcement of exclusion for unimmunized or partially immunized children are developed by individual schools/school districts.

The only exception for exclusion of unimmunized or partially immunized children who do not have documentation of a medical or religious exemption is in the case of homeless children and children in foster care, whereby they cannot be denied entry to school if they do not have their immunization records. The federal Every Student Succeeds Act states that if a homeless or foster care child or youth arrives lacking immunizations or medical records, refer the parent/guardian to the district's Homeless Education Liaison/foster care point of contact, who has the responsibility to obtain relevant academic records, immunizations or medical records and to ensure that homeless/foster care students are attending school while the records are obtained. The student must be enrolled and permitted to attend public school in the interim.

#### Exclusion During Disease Outbreaks

In situations when one or more cases of a vaccine-preventable or any other communicable disease are present in a school, all susceptibles, **including those with medical or religious exemptions**, are subject to exclusion as described in the Reportable Diseases and Isolation and Quarantine Requirements (105 CMR 300.000).

The reporting and control of diseases identified as posing a risk to the public health is prescribed by state regulation and law. The Isolation and Quarantine Requirements establish isolation and quarantine requirements for cases of certain diseases and their contacts in certain high-risk situations, including the school setting. The following table outlines several of the more common childhood vaccine-preventable diseases identified in the requirements that may occur in schools and the corresponding exclusion requirements.

## Exclusion Guidelines for Select Vaccine-Preventable Diseases in a School Setting

Depending on the specific circumstances related to the exposure, case and/or contact with respect to any disease or condition listed in 105 CMR 300.200 (A) or (B), additional control measures may be required.

See [105 CMR 300.000](#) for the complete Isolation and Quarantine Requirements

Disease	Case and <u>Symptomatic</u> Contacts	<u>Asymptomatic</u> Contacts
<b>Measles</b>	Exclude student/staff through 4 days after onset of rash. (Count the day of rash onset as day zero.)	<p>If one case: exclude susceptibles<sup>1</sup> from work or classes from the 5<sup>th</sup> through the 21<sup>st</sup> day after their exposure.</p> <p>If multiple cases or continuous (two or more days) exposure: exclude susceptibles<sup>1</sup> through the 21<sup>st</sup> day after rash onset in the last case.</p> <p>These restrictions remain even if the contact received immune globulin (IG).</p>
<b>Mumps</b>	Exclude student/staff through 5 days after onset of gland swelling. (Count the initial day of gland swelling as day zero.)	<p>If one case: exclude susceptibles<sup>2</sup> from work or classes from the 12<sup>th</sup> through the 25<sup>th</sup> day after their exposure.</p> <p>If multiple cases: exclude susceptibles<sup>2</sup> through the 25<sup>th</sup> day after the onset of the last case at the school or workplace.</p>
<b>Rubella</b>	Exclude student/staff through 7 days after rash onset. (Count the day of rash onset as day zero.)	<p>If one case: exclude susceptibles<sup>3</sup> from work or classes from the 7<sup>th</sup> through the 23<sup>rd</sup> day after last exposure.</p> <p>If multiple cases: exclude susceptibles<sup>3</sup> through the 23<sup>rd</sup> day after the onset of the last case at the school or workplace.</p>
<b>Pertussis</b>	Exclude student/staff until 21 days from onset of cough or 5 days after initiation of appropriate antibiotic therapy.	<p>If a susceptible<sup>4</sup> is exposed within the last 21 days, s/he should receive antibiotic prophylaxis but no exclusion is generally required in the school setting.</p> <p>In certain situations deemed to be high risk, the MDPH may require exclusion of asymptomatic contacts not receiving antibiotic prophylaxis and/or other contacts, and/or may extend the exclusion period beyond 21 days up to a maximum of 42 days.</p>

<b>Disease</b>	<b>Case and <u>Symptomatic Contacts</u></b>	<b><u>Asymptomatic Contacts</u></b>
<b>Varicella</b>	<p>If vesicles are present, exclude until all lesions have dried and crusted over, or until no new lesions appear, usually by the 5<sup>th</sup> day after rash onset. (Count the day of rash onset as day zero.)</p> <p>If no vesicles are present, exclude until the lesions have faded (i.e. the skin lesions are in the process of resolving; lesions do not need to be completely resolved) or no new lesions appear within a 24-hour period, whichever is later.</p>	<p>Susceptibles<sup>5</sup> shall be excluded from work or classes from the 8<sup>th</sup> through the 21<sup>st</sup> day after their exposure to the case while infectious.</p> <p>If the exposure was continuous, susceptibles shall be excluded from the 8<sup>th</sup> through the 21<sup>st</sup> day after the case's rash onset.</p> <p>Anyone receiving varicella zoster immune globulin (VARIZIG<sup>®</sup>) or intravenous immune globulin (IVIG) shall extend their exclusion to 28 days post exposure.</p>

## Definition of Susceptibles

<sup>1</sup> **Measles** - Susceptibles include all those born in or after 1957 without: 1) written documentation of 2 doses of measles-containing vaccine; or 2) laboratory evidence of immunity or laboratory confirmation of disease. In an outbreak setting, all those with 0 or 1 dose **may** avoid exclusion if they promptly receive a dose. Those born in the United States before 1957 are considered immune; however, this should **not** be considered evidence of immunity for health sciences students and health care workers.\*

<sup>2</sup> **Mumps** - Susceptibles include all those born in or after 1957 without: 1) written documentation of 2 doses of mumps-containing vaccine; or 2) laboratory evidence of immunity or laboratory confirmation of disease. In an outbreak setting, those with 0 or 1 dose **may** avoid exclusion if they promptly receive a dose. Those born in the United States before 1957 are considered immune; however, this should **not** be considered evidence of immunity for health sciences students and health care workers.\*

<sup>3</sup> **Rubella** - Susceptibles include all those born in or after 1957 without: 1) written documentation of 1 dose of rubella-containing vaccine; or 2) laboratory evidence of immunity or laboratory confirmation of disease. In an outbreak situation, those with 0 doses **may** avoid exclusion if they promptly receive a dose. Those born in the United States before 1957 are considered immune; however, this should **not** be considered evidence of immunity for health sciences students and health care workers.\*

<sup>4</sup> **Pertussis** - Susceptibles include all those exposed, regardless of their age, immunization status, or past history of disease.

<sup>5</sup> **Varicella** - Susceptibles include all those born in the United States in or after 1980 without: 1) written documentation of 2 doses of varicella vaccine; or 2) laboratory evidence of immunity or laboratory confirmation of disease; or 3) a health care provider diagnosis of varicella or health care provider verification of history of varicella disease; or 4) history of herpes zoster based on health care provider diagnosis. In an outbreak situation, those with 0 or 1 doses **may** avoid exclusion if they promptly receive a dose. Those born in the United States before 1980 are considered immune; however, this should **not** be considered evidence of immunity for health sciences students or health care workers.\*

\* Health care workers and health sciences students should have 2 doses of MMR and varicella, laboratory evidence of immunity or laboratory confirmation of disease.

Pregnant and immunocompromised persons: It is **not** recommended to use year of birth as evidence of immunity for pregnant women and immunocompromised persons. For their own protection, these individuals – regardless of their year of birth or other documentation of immunity – should be referred to their health care providers for evaluation.

These are exclusion guidelines for typical school settings only. There are other guidelines for non-school settings. In addition, MDPH may need to implement more rigorous criteria for immunity and other control measures depending on the situation and the individuals exposed and these recommendations are outlined in other MDPH documents.

There are two additional references that may be helpful to school health personnel:

- The *Guide to Surveillance and Reporting* can be obtained on the MDPH Website at <http://www.mass.gov/eohhs/gov/departments/dph/programs/id/epidemiology/rdiq/> and
- The *Comprehensive School Health Manual* can be obtained at <http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/primarycare-healthaccess/school-health/publications/comprehensive-school-health-manual.html>