**Massachusetts School Immunization Survey Step-by-Step Instructions – 2023/2024 Grade 7**

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| **Before You Start** | |
| **Surveys must be completed no later than January 26, 2024**   * Collect all student immunization records for the grade you are completing the survey for. * Use the MIIS to search for students missing immunization records. * Please fill out the Immunization Survey Worksheet prior to completing the online immunization survey. It will make the process quicker and easier if you use this worksheet to generate the totals for each question. * Note: You can save your progress and return to the survey at a later time. | |
| **Step 1** | |
| * Select the school that you are filling out the survey for. * Depending on the school you select, the bubble-question may automatically populate with “Kindergarten,” “Grade 7,” or “Grade 12” based on your school profile in MIIS. If “Grade 7” or “Grade 12” is selected, a separate drop-down menu will appear asking if your school houses students, select “Yes” or “No”. * If the proper survey grade is selected, click “Next”. * If the proper survey grade is NOT selected, then click the bubble for the correct grade. If you select a grade not associated with that school in the MIIS, a pop-up message will appear, click “OK” and then click “Next” to continue to the survey for the grade you have selected. * If you need to fill out multiple surveys, then select one of the grade options and then repeat this process after you complete the first survey. | |
| **Step 2** | |
| **Question 1** | |
| **How many students are enrolled in Grade 7?** | * Insert the total number of students enrolled in this grade level. * This should be equal to the number of students listed on the Immunization Survey Worksheet. |
| **Question 2** | |
| **How many students in Grade 7 have no school immunization record? (Exemptions count as a record)** | * Insert the total number of students that have NO RECORD AT ALL. * This DOES NOT include students with exemptions on file or incomplete records. * This should equal the Total of the “No Record” column on the Immunization Survey Worksheet. |
| **Step 3** | |
| **Question 3** | |
| **How many of the students have the required doses of MMR vaccine?** | * Insert the number of students that have received 2 or more doses of MMR vaccine, administered on or after the student’s 1st birthday and separated by at least 28 days. * This is the number of students that are compliant with the requirement, NOT the total number of doses. This number should NOT be greater than the total number of students minus the number of students with no records (Question 1 minus Question 2). * This should equal the Total of the “C” column under MMR in the Immunization Survey Worksheet. |
| **Question 4** | |
| **How many of the students have laboratory evidence of immunity to measles, mumps, and rubella?**  **(Do not count students who have 2 doses of MMR vaccine.)** | * Insert the number of students that have documented immunity to measles, mumps, AND rubella on file with your school. * If a student has BOTH the required 2 doses of MMR vaccine and laboratory evidence, then disregard the laboratory evidence and ONLY count them as vaccinated in Question 3. * If a student has BOTH laboratory evidence of immunity and only 1 dose of vaccine, then disregard the vaccine and ONLY count them as laboratory evidence in Question 4. * This should equal the Total of the “L” column under MMR in the Immunization Survey Worksheet. |
| **Question 5** | |
| **How many of the students have a medical exemption to MMR vaccine?** | * Insert the number of students with a medical exemption to MMR vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 2 doses of MMR vaccine and an exemption on file, then ONLY count them as vaccinated in Question 3 and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence in Question 4 and disregard the exemption. * This should equal to the Total of the “M” column under MMR in the Immunization Survey Worksheet. |
| **Question 6** | |
| **How many of the students have a religious exemption to MMR vaccine?** | * Insert the number of students with a religious exemption to MMR vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 2 doses of MMR vaccine and an exemption on file, then ONLY count them as vaccinated in Question 3 and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence in Question 4 and disregard the exemption. * This should equal to the Total of the “R” column under MMR in the Immunization Survey Worksheet. |
| **NOTE:** **The total of Questions 3-6 should NOT be more than the Total number of students from Question 1 minus the number of students with no record from Question 2. Each student should only be counted ONCE.** | |
| **Question 7** | |
| **How many of the students have the required doses of Hepatitis B vaccine?** | * Insert the number of students that have 3 or more doses of Hepatitis B vaccine. * This is the number of students that are compliant with the requirement, NOT the total number of doses. This number should NOT be greater than the total number of students minus the number of students with no records (Question 1 minus Question 2). * This should equal the Total of the “C” column under Hep B in the Immunization Survey Worksheet. |
| **Question 8** | |
| **How many of the students have laboratory evidence of immunity to Hepatitis B?**  **(Do not count students who have 3 doses of Hepatitis B vaccine.)** | * Insert the number of students that have documented immunity to Hepatitis B on file with your school. * If a student has BOTH the required 3 doses of Hep B and laboratory evidence, then disregard the laboratory evidence and ONLY count them as vaccinated in Question 7. * If a student has BOTH laboratory evidence of immunity and fewer than 3 doses of vaccine, then disregard the vaccine and ONLY count them as laboratory evidence in Question 8. * This should equal the Total of the “L” column under Hep B in the Immunization Survey Worksheet. |
| **Question 9** | |
| **How many of the students have a medical exemption to Hepatitis B vaccine?**  **Medical exemption to Hep B (cont.)** | * Insert the number of students with a medical exemption to Hep B vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 3 doses of Hep B and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence and disregard the exemption. * This should equal to the Total of the “M” column under Hep B in the Immunization Survey Worksheet. |
| **Question 10** | |
| **How many of the students have a religious exemption to Hepatitis B vaccine?** | * Insert the number of students with a religious exemption to Hep B vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is over <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 3 doses of Hep B and an exemption on file, then ONLY count them as vaccinated Question 7 and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence in Question 8 and disregard the exemption. * This should equal to the Total of the “R” column under Hep B in the Immunization Survey Worksheet. |
| **NOTE**: **The total of Questions 7-10 should NOT be more than the Total number of students from Question 1 minus the number of students with no record from Question 2. Each student should only be counted ONCE.** | |
| **Question 11** | |
| **How many of the students have the required doses of Varicella vaccine?** | * Insert the number of students that have 2 doses of Varicella vaccine, administered on or after the student’s 1st birthday and separated by at least 28 days. * This is the *number of students* that are compliant with the requirement, NOT the total number of doses. This number should NOT be greater than the total number of students minus the number of students with no records (Question 1 minus Question 2). * This should equal the Total of the “C” column under Varicella in the Immunization Survey Worksheet. |
| **Question 12** | |
| **How many of the students have a physician-certified history of chickenpox disease?**  **(Do not count students who have 2 doses of Varicella vaccine.)** | * Insert the number of students that have a physician-certified history of chickenpox disease on file with your school. * A reliable history of chickenpox disease requires a diagnosis of chickenpox or interpretation of parent/guardian description of chickenpox by a physician, nurse practitioner, physician assistant or designee. * If a student has BOTH a history of disease and the required 2 doses, then disregard the history of disease and ONLY count them as vaccinated in Question 11. . * If a student has BOTH a history of disease and only 1 dose of vaccine, then disregard the vaccine and ONLY count them as history of disease. * If a student has BOTH a history of disease and laboratory evidence of immunity, then disregard the laboratory evidence and ONLY count them as history of disease in Question 12. This should equal the Total of the “D” column under Varicella in the Immunization Survey Worksheet. |
| **Question 13** | |
| **How many of the students have laboratory evidence of immunity to Varicella?**  **(Do not count students who have 2 doses of Varicella vaccine or history of chickenpox disease.)** | * Insert the number of students that have documented laboratory evidence of immunity to Varicella on file with your school. * If a student has BOTH laboratory evidence of immunity and the required 2 doses, then disregard the laboratory evidence and ONLY count them as vaccinated. * If a student has BOTH laboratory evidence of immunity and only 1 dose of vaccine, then disregard the vaccine and ONLY count them as laboratory evidence. * If a student has BOTH laboratory evidence of immunity and a history of disease, then disregard the laboratory evidence ONLY count them as history of disease. * This should equal the Total of the “L” column under Varicella in the Immunization Survey Worksheet. |
| **Question 14** | |
| **How many of the students have a medical exemption to Varicella vaccine?** | * Insert the number of students with a medical exemption to Varicella vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 2 doses and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * If a student has BOTH an exemption and history of disease, then ONLY count them as history of disease and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence and disregard the exemption. * This should equal the Total of the “M” column under Varicella in the Immunization Survey Worksheet. |
| **Question 15** | |
| **How many of the students have a religious exemption to Varicella vaccine?** | * Insert the number of students with a religious exemption to Varicella vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is over <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 2 doses and an exemption on file, then ONLY count them as vaccinated in Question 11 and disregard the exemption. * If a student has BOTH an exemption and history of disease, then ONLY count them as history of disease in Question 12 and disregard the exemption. * If a student has BOTH an exemption and laboratory evidence, then ONLY count them as laboratory evidence in Question 13 and disregard the exemption. * This should equal to the Total of the “R” column under Varicella in the Immunization Survey Worksheet. |
| **NOTE: The total of Questions 11-15 should NOT be more than the Total number of students from Question 1 minus the number of students with no record from Question 2. Each student should only be counted ONCE.** | |
| **Question 16** | |
| **How many of the students have the required doses of Tdap vaccine?** | * Insert the number of students that have received 1 dose of Tdap vaccine. NOTE: Do not count students who received Td vaccine, this does not meet the requirement. * This is the number of students that are compliant with the requirement, NOT the total number of doses. This number should NOT be greater than the total number of students minus the number of students with no records (Question 1 minus Question 2). * This should equal the Total of the “C” column under Tdap in the Immunization Survey Worksheet. |
| **Question 17** | |
| **How many of the students have a medical exemption to Tdap vaccine?** | * Insert the number of students with a medical exemption to Tdap vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated in Question 16 and disregard the exemption. * This should equal the Total of the “M” column under Tdap in the Immunization Survey Worksheet. |
| **Question 18** | |
| **How many of the students have a religious exemption to Tdap vaccine?**  **Religious exemption to Tdap (cont.)** | * Insert the number of students with a religious exemption to Tdap vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated in Question 16 and disregard the exemption. * This should equal to the Total of the “R” column under Tdap in the Immunization Survey Worksheet. |
| **NOTE: The total of Questions 16-18 should NOT be more than the Total number of students from Question 1 minus the number of students with no record from Question 2. Each student should only be counted ONCE.** | |
| **Question 19** | |
| **How many of the students have the required doses of MenACWY vaccine?** | * Insert the number of students that have received 1 dose of MenACWY vaccine. NOTE: Students who have received MenB vaccine do not meet the requirement. * This is the number of students that are compliant with the requirement, NOT the total number of doses. This number should NOT be greater than the total number of students minus the number of students with no records (Question 1 minus Question 2). * This should equal the Total of the “C” column under MenACWY in the Immunization Survey Worksheet. |
| **Question 20** | |
| **How many of the students have a medical exemption to MenACWY vaccine?** | * Insert the number of students with a medical exemption to MenACWY vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * This should equal the Total of the “M” column under MenACWY in the Immunization Survey Worksheet. |
| **Question 21** | |
| **How many of the students have a religious exemption to MenACWY vaccine?** | * Insert the number of students with a religious exemption to MenACWY vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * This should equal to the Total of the “R” column under MenACWY in the Immunization Survey Worksheet. |
| **NOTE: The total of Questions 19-21 should NOT be more than the Total number of students from Question 1 minus the number of students with no record from Question 2. Each student should only be counted ONCE.** | |
| **Question 22** | |
| **How many of the students have had all of the required vaccines for school entry?** | * Insert the number of students who have all required doses of vaccine (or laboratory evidence/disease):   + 2 MMR   + 3 Hep B   + 2 Varicella   + 1 Tdap   + 1 MenACWY * Students with an exemption should NOT be counted here. * This should equal the Total of the “Complete series” column in the Immunization Survey Worksheet. |
| **Question 23** | |
| **How many of the students have a medical exemption to one or more required vaccines?** | * Insert the number of students who have a medical exemption to one or more required vaccines on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * NOTE: This question is asking for the number of students, not the total number of medical exemptions. If a student has medical exemptions to multiple vaccines, this only counts as 1. |
| **Question 24** | |
| **How many of the students have a religious exemption to one or more required vaccines?** | * Insert the number of students who have a religious exemption to one or more required vaccines on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is over <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * NOTE: This question is asking for the number of students, not the total number of religious exemptions. If a student has religious exemptions to multiple vaccines, this only counts as 1. |
| **Question 25** | |
| **Does your school ask for an annual renewal of religious exemptions?** | * This question is asking if the school staff/nurse collects religious exemptions EACH YEAR for students admitted to the school with religious exemptions. * This is an MDPH recommendation. |
| **Question 26** | |
| **How many of the students with a medical exemption have no vaccines at all?** | * Out of the total number of students with a medical exemption, how many have no vaccines at all (i.e. are completely unimmunized)? * Do not count students with no record here. |
| **Question 27** | |
| **How many of the students with a religious exemption have no vaccines at all?** | * Out of the total number of students with a religious exemption, how many have no vaccines at all (i.e. are completely unimmunized)? * Do not count students with no record here. |
| *If you selected “Yes” for “Does your school include housing” in Step 1, the following questions will appear.* | |
| **Question 28** | |
| **Total number of full-time Grade 7 residential students?** | * Insert the total number of full-time grade 7 residential students. * This should be equal to the number of residential students listed on the Immunization Survey Worksheet. |
| **Question 29** | |
| **How many of the students have the required doses of MenACWY vaccine?** | * Insert the number of students that have received 1 dose of MenACWY vaccine. NOTE: Students who have received MenB vaccine do not meet the requirement. * This is the number of students that have received 1 dose MenACWY. This number should NOT be greater than the total number of full-time residential students in grade 7 * This should equal the Total of the “C” column under Residential School MenACWY in the Immunization Survey Worksheet. |
| **Question 30** | |
| **How many of the students have a medical exemption to MenACWY vaccine?** | * Insert the number of students with a medical exemption to MenACWY vaccine on file with your school. * A medical exemption is a statement from a physician stating that a vaccine is medically contraindicated for a student and must be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * This should equal the Total of the “M” column under Residential School MenACWY in the Immunization Survey Worksheet. |
| **Question 31** | |
| **How many of the students have a religious exemption to MenACWY vaccine?** | * Insert the number of students with a religious exemption to MenACWY vaccine on file with your school. * A religious exemption is a statement from a student or parent/guardian, if the student is <18 years of age, stating that a vaccine is against sincerely held religious beliefs and should be renewed annually at the start of the school year. * If a student has BOTH the required 1 dose and an exemption on file, then ONLY count them as vaccinated and disregard the exemption. * This should equal to the Total of the “R” column under Residential School MenACWY in the Immunization Survey Worksheet. |
| **Question 32** | |
| **How many of the students have a signed waiver to MenACWY vaccine?** | * Insert the number of students with a signed waiver to MenACWY vaccine on file with your school. * For residential students only, a student or parent/guardian, if the student is <18 years of age may submit the MDPH Meningococcal Vaccine Waiver in lieu of receiving MenACWY vaccine. * If a student has BOTH the required 1 dose and a waiver on file, then ONLY count them as vaccinated and disregard the waiver. * If a student has BOTH the waiver and an exemption on file, then ONLY count them under the exemption and disregard the waiver. * This should equal to the Total of the “W” column under Residential School MenACWY in the Immunization Survey Worksheet. |
| **NOTE: The total of Questions 28-32 should NOT be more than the Total number of students from Question 28. Each student should only be counted ONCE.** | |
| **Step 4** | |
| * Review/update your contact information and school address and supply your school principal’s name. * Once you have reviewed this information, click **“Submit Survey.”** | |