### Massachusetts Department of Public Health

### Immunization Division

# Child Care Center/Preschool/Nursery

# Immunization Requirement Summary

## The following chart was developed to assist you in determining which immunizations are required:

|  |  |
| --- | --- |
| **If a child is this age:** | **he/she should have received:** |
| 3 - 4 months | 1 DTaP, 1 polio, 2 HepB, 1 Hib1 |
| 5 - 6 months | 2 DTaP, 2 polio, 2 HepB, 2 Hib1 |
| 7 - 17 months | 3 DTaP, 2 polio, 2 HepB, 3 Hib1 |
| > 18 months | 4 DTaP, 3 polio, 3 HepB, 4 Hib1, 1 MMR, 1 Varicella2 |

1. The number of primary doses of Hib vaccine required is determined by vaccine product and age the series begins. Please refer to the M*DPH Immunization Schedule* for further information.
2. One dose of varicella vaccine or physician-certified reliable history of chickenpox disease is required. A physician- certified reliable history of chickenpox disease consists of 1) physician interpretation of parent/guardian description of chickenpox; 2) physician diagnosis of chickenpox; or 3) serologic proof of immunity.

## Children whose schedule has been interrupted and are in the process of being immunized (i.e., awaiting the next DTaP dose and in the waiting period) may remain in child care until the next dose is due. Those who exceed the specified interval (waiting period) must be excluded.

**Other vaccines recommended, but not required for child care or preschool entry, include: influenza vaccine, pneumococcal conjugate (PCV13), hepatitis A, and rotavirus vaccine.**

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