



Nevada Division of Public and Behavioral Health 2023-2024 Annual Private School Immunization Reporting Instruction Packet

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Introduction

This instruction packet has been developed to help you with completing the immunization reporting survey.

> See Nevada's current immunization requirements at https://dpbh.nv.gov/Programs/SIP/dta/School Requirements/ School Requirements/.

II. **Grades Reported**

For all questions, include all current students enrolled in kindergarten, seventh (7th). and twelfth (12th) grades only.

- > Per Nevada Revised Statute (NRS) 394.192, each private school is required to report to the Division of Public and Behavioral Health the exact number of students who have completed the immunizations required for enrollment by December 31St of each year.
- Do **not** include information on pre-school or pre-K students in the responses.
- > Children who are students of distant learning programs (such as online schools) that participate in any activities on a school campus, such as sports, **should** be included in your school's total count.
- > Please review and validate the online information prior to submitting your school's immunization information.
- > Please fill out all required sections. Do **not** leave any sections blank.
- > You will not be able to complete the survey unless entry is made in all fields.
- If your school's information is incorrect, you will be contacted by the **Nevada State Immunization Program.**
- If you do not submit your immunization information by December 31St, you will be contacted by the Nevada State Immunization Program.

III. **Exclusion from Reporting**

> Children who are entirely home-schooled and **do not** participate in any activities on a school campus **do not** need to be included in the school immunization reporting.

IV. Access to Immunize Nevada Website

To access the annual immunization reporting survey online:

- ➤ Go to https://www.immunizenevada.org/submit-rates.
- Click on the appropriate link.
- Reports must be entered online by December 31St of the reporting year. See the following instructions for school immunization reporting submission.

V. **Getting Started**

- Collect student immunization reports for all kindergarten, 7th grade, and 12th grade students.
- > SEE APPENDIX H for Nevada immunization requirements and resources.

- Each school will submit the total counts rather than immunization percentages.
- Schools with multiple campuses must submit each school separately. For example, Sunshine School has three campuses and will submit immunization information separately for the Happy Campus, the Smile Campus, and the Bright Campus.
- ➤ Go to https://www.immunizenevada.org/submit-rates.
- Click on the "Submit Immunization Rates for a School" link.

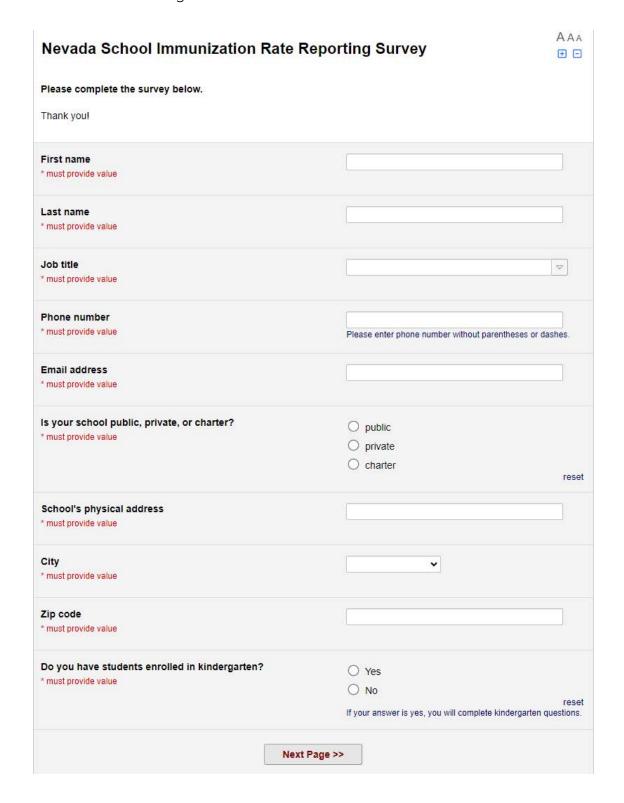
Submit immunization rates — it's Submit Rates important, it's easy, and it's the law.



- > You will be re-directed to a separate page.
- Fill out all required sections. Do **not** leave any sections blank.
- You will not be able to complete the survey unless entry is made in all fields.

VI. General Information

> Enter in all general information.



VII. Collecting Data

- Please collect immunization records for students enrolled in your school to complete the survey. (SEE APPENDIX B)
- Use the private school tally sheets (kindergarten, 7th grade, and/or 12th grade) to help in evaluating the immunization status of your school. (SEE APPENDIX E, F, & G)
- > Do **not** submit tally sheets to the Nevada State Immunization Program.

VIII. Kindergarten Grade

- Answer the question, "Do you have students enrolled in kindergarten?"
- If you have students enrolled in kindergarten, click the "Yes" button.
- > If you do **not** have students enrolled in kindergarten, click the "No" button.
- Click the "Next Page" button.
- > If you clicked "Yes", you will be directed to answer kindergarten questions.
- If you clicked "No", you will be directed to the 7th grade section.

IX. Students Enrolled in Kindergarten

➤ Please answer questions for the following vaccines only: DTaP, Hep A, MMR, Hep B, Polio, and Varicella.

> (Question 1)

Total enrollment: the total number of kindergarten students in your school.

> (Question 2a, 2b, 2c, 2d, 2e, 2f)

• <u>Up-to-date by vaccine</u>: count the number of students who are up-to-date for each of the vaccines listed on the survey. **Do not** count medical exemptions, religious exemptions, and conditional enrollments as UTD.

> (Question 3)

- <u>Total number medically exempt</u>: the parent/guardian has provided a Nevada Division of Public and Behavioral Health State Medical Immunization Exemption Certificate signed by a licensed physician (MD or DO) or an Advanced Practice Registered Nurse (APRN) stating that the medical condition of the student will not permit the student to be immunized.
- **SEE APPENDIX H** for the Nevada Standardized Medical Immunization Exemption Certificate.

Question 3a, 3b, 3c, 3d, 3e, 3f)

• <u>Medical exemptions by vaccine</u>: count the number of students who have medical exemptions for each of the vaccines listed on the survey.

Question 4)

• <u>Total number religiously exempt</u>: a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate was provided by the parent/guardian who prohibits the immunization of the student due to religious beliefs.

SEE APPENDIX H for the Nevada Standardized Religious Immunization Exemption Certificate.

Ouestion 4a. 4b. 4c. 4d. 4e. 4f)

Religious exemptions by vaccine: count the number of students who have religious exemptions for each of the vaccines listed on the survey.

> (Question 5)

Total number exempt to all required vaccines: the student has a medical or religious exemption from all required vaccines. Count the number of students who are exempt from all required vaccines for kindergarten entry.

> (Question 6)

Total number with documented varicella disease: count the number of students who have had the varicella disease.

> (Question 7)

Total number conditionally enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.

(Question 8)

Total number non-compliant: the student does not have required immunizations, a religious or medical exemption, and is not conditionally enrolled. Count the number of students who are noncompliant.

Seventh (7th) Grade X.

- Answer the question, "Do you have students enrolled in 7th grade?"
- If you have students enrolled in 7th grade, click the "Yes" button.
- If you do *not* have students enrolled in 7th grade, click the "No" button.
 Click the "Next Page" button.
- If you clicked "Yes", you will be directed to answer 7th grade questions.
- If you clicked "No", you will be directed to the 12th grade section.

XI. Twelfth (12th) Grade

- Answer the question, "Do you have students enrolled in 12th grade?"
- If you have students enrolled in 12th grade, click the "Yes" button.
- If you do **not** have students enrolled in 12th grade, click the "No" button.
 Click the "Next Page" button.
- If you clicked "Yes," you will be directed to answer 12th grade questions. If you clicked "No," you will be directed to the "Submit" button to submit your school's information.

XII. Students Enrolled in Seventh (7th) Grade and/or Twelfth (12th) Grade at Private Schools

Please answer questions for the following vaccines only: Meningococcal, Tdap, MMR, Hep A, and Varicella.

> (Question 1)

• <u>Total enrollment</u>: the total number of 7th and/or 12th grade students in your school.

Question 2a, 2b, 2c, 2d, 2e)

<u>Up-to-date by vaccine</u>: count the number of students who are up-to-date for each of the vaccines listed on the survey. **Do not** count medical exemptions, religious exemptions, and conditional enrollment as UTD.

> (Question 3)

Total number medically exempt: the parent/guardian has provided a
Nevada Division of Public and Behavioral Health State Medical
Immunization Exemption Certificate signed by a licensed physician
(MD or DO) or an Advanced Practice Registered Nurse (APRN) stating
that the medical condition of the student will not permit the student to
be immunized.

> (Question 3a, 3b, 3c, 3d, 3e)

• <u>Medical exemptions by vaccine</u>: count the number of students who have medical exemptions for each of the vaccines listed on the survey.

➤ (Question 4)

 <u>Total number religiously exempt</u>: a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate was provided by the parent/guardian who prohibits the immunization of the student due to religious beliefs.

(Question 4a, 4b, 4c, 4d, 4e)

• Religious exemptions by vaccine: count the number of students who have religious exemptions for each of the vaccines listed on the survey.

> (Question 5)

• <u>Total number conditionally enrolled</u>: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.

> (Question 6)

 <u>Total number of students non-compliant</u>: the student does not have required immunizations, does not have a signed medical or religious exemption, and is not considered conditional.

APPENDIX A: VACCINE ABBREVIATIONS

DTaP	Diphtheria, Tetanus, and Acellular Pertussis
Hep A/HAV	Hepatitis A
Hep B/HBV	Hepatitis B
IPV	Inactivated Polio
MenACWY/MCV4	Meningococcal
MMR	Measles, Mumps, and Rubella
MMRV	Measles, Mumps, Rubella, and Varicella (Chickenpox)
Tdap	Tetanus, Diphtheria, and Acellular Pertussis
VAR/CPOX	Varicella (Chickenpox)

APPENDIX B: SAMPLE IMMUNIZATION RECORD

	DTaP/	/Td/Tdap	
1	DTaP	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
4	DTaP	12/28/2012	1Y 3M2D
5	DTaP-IPV	10/2/2015	4Y 0M 6D
	p	olio	
1	IPV	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
4	DTaP-IPV	10/2/2015	4Y 0M 6D
	MMR,	/Measles	
1	MMR	9/28/2012	1Y 0M 2D
2	MMR	10/2/2015	4Y 0M 6D
-		Hib	3
1	Hib	12/1/2011	0Y 2M 5D
2	Hib	2/3/2012	0Y 4M 8D
3	Hib	12/28/2012	1Y 3M 2D
	H	IEPB	
1	Hep B, ped/adol	12/1/2011	0Y 2M 5D
2	DTaP-Hep B-IPV	2/3/2012	0Y 4M 8D
3	DTaP-Hep B-IPV	3/29/2012	0Y 6M 3D
		X2	
	H	IEPA	
1	Hep A, ped/adol	9/28/2012	1Y 0M 2D
2	Hep A, ped/adol	3/29/2013	1Y 6M 3D
	Pneur	nococcal	X.
1	PCV-13 (Prevnar 13)	12/1/2011	0Y 2M 5D
2	PCV-13 (Prevnar 13)	2/3/2012	0Y 4M 8D
3	PCV-13 (Prevnar 13)	3/29/2012	0Y 6M 3D
4	PCV-13 (Prevnar 13)	12/28/2012	1Y 3M 2D
	R	ОТА	
1	Rotavirus (Rotarix)	12/2/2011	0Y 2M 5D
2	Rotavirus (Rotarix)	2/3/2012	0Y 4M 8D
	Varice	lla (CPOX)	7
1	CPOX (Varicella)	9/28/2012	1Y 0M 2D
2	CPOX (Varicella)	10/2/2015	4Y 0M 6D

APPENDIX C: KINDERGARTEN GRADE QUESTIONS

Kindergarten	
Note: For the below questions, UTD (up to date) is defined as: of the vaccines listed on the survey. DO NOT count medical exe	
(1) Total # of students enrolled in kindergarten * must provide value	
(2a) Total # of kindergarten students UTD for DTaP (Diphtheria, tetanus, and acellular pertusis) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2b) Total # of kindergarten students UTD for IPV (Polio) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2c) Total # of kindergarten students UTD for Hep B (Hepatitis B) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2d) Total # of kindergarten students UTD for Hep A (Hepatitis A) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2e) Total # of kindergarten students UTD for MMR (Measles, mumps, and rubella) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2f) Total # of kindergarten students UTD for Varicella (Chickenpox) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.

(3) Total # of kindergarten students medically exempt from any required vaccines * must provide value	This can include a medical exemption of 1 or more vaccines.
(3a) Total # of kindergarten students medically exempt from DTaP * must provide value	DTaP: Diphtheria, tetanus and acellular pertussis
(3b) Total # of kindergarten students medically exempt from IPV * must provide value	IPV: Polio
(3c) Total # of kindergarten students medically exempt from Hep B must provide value	Hep B: Hepatitis B
(3d) Total # of kindergarten students medically exempt from Hep A * must provide value	Hep A: Hepatitis A
(3e) Total # of kindergarten students medically exempt from MMR must provide value	MMR: Measles, mumps and rubella
(3f) Total # of kindergarten students medically exempt from Varicella must provide value	Varicella: Chickenpox
(4) Total # of kindergarten students religiously exempt from any required vaccines * must provide value	This can include a religious exemption of 1 or more vaccines.
(4a) Total # of kindergarten students religiously exempt from DTaP * must provide value	DTaP: Diphtheria, tetanus and acellular pertussis
(4b) Total # of kindergarten students religiously exempt from IPV * must provide value	IPV: Polio
(4c) Total # of kindergarten students religiously exempt from Hep B must provide value	Hep B: Hepatitis B
(4d) Total # of kindergarten students religiously exempt from Hep A * must provide value	Hep A: Hepatitis A
(4e) Total # of kindergarten students religiously exempt from MMR * must provide value	MMR: Measles, mumps and rubella
(4f) Total # of kindergarten students religiously exempt from Varicella must provide value	Varicella: Chickenpox
(5) Total # of kindergarten students exempt from all required vaccines * must provide value	This means they selected all vaccines on the religious exemption form.

(6) Total # of kindergarten students with documented Varicella disease * must provide value							
Thest provide value							
(7) Total # of kindergarten students conditionally enrolled							
* must provide value	Conditionally Enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.						
(8) Total # of kindergarten students non-compliant							
* must provide value	Non-compliant: the student does not have required immunizations, does not have a signed medical or religious exemption form, and is not considered conditional.						
Do you have students enrolled in 7th grade?	○ Yes						
* must provide value	○ No						
	rese If your answer is yes, you will complete 7th grade questions.						
<< Previous Page	Next Page >>						

APPENDIX D: SEVENTH (7th) AND TWELFTH (12th) GRADE QUESTIONS

Seventh Grade	
Note: For the below questions, UTD (up to date) is defined as: c of the vaccines listed on the survey. DO NOT count medical exe enrollment as UTD.	
(1) Total # of students enrolled in 7th grade * must provide value	
(2a) Total # of 7th grade students UTD for MenACWY (Meningococcal) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2b) Total # of 7th grade students UTD for Varicella (Chickenpox) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2c) Total # of 7th grade students UTD for Tdap (Tetanus, diphtheria, and acellular pertussis) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2d) Total # of 7th grade students UTD for MMR (Measles, mumps, and rubella) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(2e) Total # of 7th grade students UTD for Hep A (Hepatitis A) * must provide value	REMINDER: The students counted as UTD will not have any exemptions or be conditionally enrolled.
(3) Total # of 7th grade students medically exempt from any required vaccines * must provide value	This can include a medical exemption of 1 or more vaccines.
(3a) Total # of 7th grade students medically exempt from MenACWY (Meningococcal) * must provide value	
(3b) Total # of 7th grade students medically exempt from Varicella * must provide value	Varicella: Chickenpox
(3c) Total # of 7th grade students medically exempt from Tdap * must provide value	Tdap: Tetanus, diphtheria and acellular pertussis

(3d) Total # of 7th grade students medically exempt from MMR	
* must provide value	MMR: Measles, mumps and rubella
(3e) Total # of 7th grade students medically exempt from Hep	
A * must provide value	Hep A: Hepatitis A
(4) Total # of 7th grade students religiously exempt from any required vaccines	
* must provide value	This can include a religious exemption of 1 or more vaccines.
(4a) Total # of 7th grade students religiously exempt from MenACWY (Meningococcal) * must provide value	
(4b) Total # of 7th grade students religiously exempt from	
Varicella * must provide value	Varicella: Chickenpox
(4c) Total # of 7th grade students religiously exempt from	
Tdap * must provide value	Tdap: Tetanus, diphtheria and acellular pertussis
(4d) Total # of 7th grade students religiously exempt from	
MMR * must provide value	MMR: Measles, mumps and rubella
(4e) Total # of 7th grade students religiously exempt from Hep A	Hep A: Hepatitis A
must provide value	
5) Total # of 7th grade students religiously exempt from all equired vaccines must provide value	This means they selected all vaccines on the religious exemption form.
6) Total # of 7th grade students conditionally enrolled	
must provide value	Conditionally Enrolled: the student does not have required immunizations due to the minimum age requirements and/or dose intervals and is in the process of completing the series of shots.
7) Total # of 7th grade students non-compliant	
must provide value	Non-compliant: the student does not have required immunizations, does not have a signed medical or religious exemption form, and is not considered conditional.
Oo you have students enrolled in 12th grade?	○ Yes
must provide value	○ No
	If your answer is yes, you will complete 12th grade questions.
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APPENDIX E: KINDERGARTEN GRADE TALLY SHEET

Date:

Note: The Nevada State Immunization Program developed this tool to assist in evaluating the immunization status of your school and completing the Nevada school immunization reporting survey.

Do <u>not</u> submit to NSIP.

				Up	-to-Date	2			Medical Exemption								Religious Exemption										
Child	Grade	UTD to All	DTaP	IPV	НерВ	Нер А	MMR	VAR	MedEx	DTaP	IPV	НерВ	Нер А	MMR	VAR	RelEx	DTaP	IPV	Нер В	Нер А	MMR	VAR	Exempt to all	VAR Dise ase	Conditional	Non-Compliant	CIT not UTD
A																											
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APPENDIX F: SEVENTH (7th) GRADE TALLY SHEET

Date:

Note: The Nevada State Immunization Program (NSIP) developed this tool to assist in evaluating the immunization status of your school and completing the Nevada school immunization reporting survey.

Do not submit to NSIP.

Do not submit to NSIP.		Up-to-Date Medical Exemption Religious Exemption															1				
				Up-to	-Date					Medical E	xemption										
Child Gra	rade U	TD to All	Mening	VAR	Tdap	MMR	Нер А	MedEx	Mening	VAR	Tdap	MMR	Нер А	RelEx	Mening	VAR	Tdap	MMR	Нер А	Conditional	CIT not UTD
A																					
	-																				
В																					
С	-+																				
D																					
	-																				
E																					
_																					
r e	_																				
G																					
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Н	-+																			-	
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М																					
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APPENDIX G: TWELFTH (12th) GRADE TALLY SHEET

Date:

Note: The Nevada State Immunization Program (NSIP) developed this tool to assist in evaluating the immunization status of your school and completing the Nevada school immunization reporting survey.

Do not submit to NSIP.

				Up-to	-Date					Medical I	Exemption										
Child	Grade	UTD to All	Mening	VAR	Tdap	MMR	Нер А	MedEx	Mening	VAR	Tdap	MMR	Нер А	RelEx	Mening	VAR	Tdap	MMR	Нер А	Conditional	CIT not UT
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APPENDIX H: IMMUNIZATION REQUIREMENTS RESOURCES

As of the <u>2019-2020 school year</u>, it is necessary for children being admitted to early education programs, preschool, and kindergarten in Nevada to receive all required vaccines at the youngest recommended age per the recommendation of the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) Immunization Schedule. For example, the 5th dose of DTaP is recommended between 4 and 6 years of age. The 5th dose of DTaP vaccine is required at 4 years of age if the child is enrolled in a school in Nevada.

If a child turns an age that meets the youngest recommended age to receive the required vaccines (i.e. DTaP at 4 years old), after enrollment, child care, and/or accommodation facility entry, the child has 30 days to complete the required immunizations pursuant to Nevada Revised Statute (NRS) 432A.230 and NRS 432A.235.

Resources for Immunization Requirements and COVID-19 Response

Immunization requirements and COVID-19 resources are available to provide equitable access to vaccinations:

- Connect with local health care providers, pharmacies, community/public health nurses, or county health districts for access to vaccines or visit https://www.vaccines.gov/ for COVID-19 and flu vaccines.
- Current Nevada Division of Public and Behavioral Health school, child care, and accommodation facility requirements:
 - o https://dpbh.nv.gov/Programs/SIP/dta/School_Requirements/School_Requirements/
- Nevada school/child care facility immunizations resources and links to Technical Bulletins:
 https://dpbh.nv.gov/Programs/Immunization/School_and_Childcare/School_and_Child_Care_Immunizations/
- Call the Nevada Statewide COVID-19 Contact Center in English or Spanish at 1 (800) 401-0946.
- Nevada Division of Public and Behavioral Health Technical Bulletins for COVID-19, monkeypox, and other public health topics
 - https://dpbh.nv.gov/Resources/Technical_Bulletins-New/
- Nevada State Immunization Program Facebook announcements:
 - o https://www.facebook.com/NevadaStateImmunizationProgram
- Nevada Health Care Quality and Compliance child care listserv email list:
 - ${\tt o_https://dpbh.nv.gov/Reg/HealthFacilities/dta/Lists/Listservs/}$

Exemptions

As of July 2021, medical and religious immunization exemptions must be submitted on a standardized Nevada Division of Public and Behavioral Health form (see the Immunization Exemption Requirement Technical Bulletin). Children may be exempt from immunization requirements for the following reasons:

- **Medical Exemption**: Requires a Nevada Division of Public and Behavioral Health State Medical Immunization Exemption Certificate signed by a licensed physician (MD or DO) or an Advanced Practice Registered Nurse (APRN) stating that the medical condition of the student will not permit the student to be immunized.
- **Religious Exemption**: Requires a Nevada Division of Public and Behavioral Health State Religious Immunization Exemption Certificate signed by the parent or guardian who prohibits the immunization of the child due to religious beliefs.

The standardized immunization exemption forms and resources can be found at:

- https://www.immunizenevada.org/sites/default/files/2022-02/IN_211093_Immunization_Exemption_Letter_v8_F.pdf for FAQ letter
- https://dpbh.nv.gov/Programs/SIP/dta/School_Requirements/School_Requirements/
- https://www.immunizenevada.org/immunization-laws

Exclusion

Per NRS 432A.230 and 432A.235, unless excused because of a religious belief or medical condition, a child must be up-to-date, or the child may not be admitted to any child care and/or accommodation facility within Nevada.