

CITY OF PHILADELPHIA DEPARTMENT OF PUBLIC HEALTH DIVISION OF DISEASE CONTROL IMMUNIZATION PROGRAM

Summary: Philadelphia and Pennsylvania Immunization Requirements For School Entry, 2007- 08

Grades	Vaccines	Requirements*
K – 1	Diphtheria & Tetanus Pertussis	4 Doses: at least one after 4 th birthday (DTaP/DTP/DT/Td) 4 Doses: at least one after 4 th birthday (DTaP or DTP) * 3 Doses (OPV/IPV) 2 Doses: both after 1 st birthday (MMR or MMRV) 2 Doses: both after 1 st birthday (MMR or MMRV) * 2 Doses: both after 1 st birthday (MMR or MMRV) * 3 Doses properly spaced (HBV) 2 Doses: both after 1 st birthday (Varicella or MMRV) or documentation of chickenpox immunity proven by laboratory testing or a written statement of prior chickenpox disease from a healthcare provider *
2-12	Diphtheria & Tetanus Polio	3 Doses: at least one after 4 th birthday (DTaP/DTP/DT/Td/Tdap) 3 Doses (OPV/IPV) 2 Doses: both after 1 st birthday (MMR or MMRV) 1 Dose after 1 st birthday (MMR or MMRV) 1 Dose after 1 st birthday (MMR or MMRV) 3 Doses properly spaced (HBV) 1 Dose after 1 st birthday (Varicella or MMRV) (2 doses if the 1 st dose was given after the 13 th birthday. MMRV is not licensed for use after the 13th birthday; single antigen Varicella vaccine should be used instead.)**

References:

^{*} Philadelphia Board of Health Regulations Governing the Health of Newborns, Children and Adolescents, published 2007, and the Pennsylvania School Immunization Law § 23.83.

^{**} or documentation of a history of chickenpox immunity proven by laboratory testing or a written statement of history of chickenpox disease from a parent, guardian or physician.