

INTRODUCTION

The Individual Vaccine Requirements Summary (IVRS) is a companion piece to the [Vaccines Required charts](#) for child care/preschool and school entry. The purpose of the summary is to assist school and child care staff and those working with student information systems to understand state immunization requirements and the immunization schedule.

According to the Washington Administrative Code [WAC 246-105-030](#) and [WAC 246-105-040](#) before any child can begin attending school, preschool, or child care in Washington State they are required by law to have documentation of full immunity (documentation of vaccination or proof of acquired immunity) against the following diseases at the ages and intervals in the [CDC Recommended Child and Adolescent Immunization Schedule 2024 \(PDF\)](#):

Requirements are listed in alphabetical order by vaccine. In each section, you will find detailed information about the immunization schedule, the exceptions to the schedule and the catch-up schedule. Exceptions may apply when the routine recommendations are not followed.

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VACCINES REQUIRED FOR CHILD CARE ATTENDANCE

Vaccines Required for Child Care 							
	Hepatitis B	DTaP (Diphtheria, Tetanus, Pertussis)	Hib (<i>Haemophilus influenzae</i> type B)	Polio	PCV (Pneumococcal Conjugate)	MMR (Measles, mumps rubella)	Varicella (Chickenpox)
By 3 Months	2 doses	1 dose	1 dose	1 dose	1 dose	Not routinely given before 12 months of age	Not routinely given before 12 months of age
By 5 Months	2 doses	2 doses	2 doses	2 doses	2 doses		
By 7 Months	2 doses	3 doses	2 or 3 doses (depending on vaccine)	2 doses	3 doses		
By 16 Months	2 doses	3 doses	3 or 4 doses** (depending on vaccine)	2 doses	4 doses**	1 dose	1 dose
By 19 Months	3 doses	4 doses	3 or 4 doses** (depending on vaccine)	3 doses	4 doses**	1 dose	1 dose
By 7 years or preschool/ school entry at ≥ 4 years*	3 doses	5 doses**	Not routinely given to children age 5 years and older	4 doses**	Not routinely given to children age 5 years and older	2 doses	2 doses

*Children attending Preschool-12th grade must meet the immunization requirements for their grade in school.

**Vaccine doses may be acceptable with fewer than listed depending on when they were given.

Children entering child care must get the required doses listed in this chart to be in compliance with immunization requirements. School-aged children (Preschool-12) in before and after-school programs must meet the immunization requirements for their grade in school, see the school chart on the next page. The requirements follow ages and intervals in the [CDC Recommended Child and Adolescent Immunization Schedule 2024 \(PDF\)](#).

To read the chart, find the row that is closest, but is not older than the child's age. Follow the row across to find the number of vaccine doses required by that age. For example, if a child is 6 ½ months old (not yet 7 months old), look at the row "By 5 months". A 6 ½ month old child needs a total of 2 doses of DTaP vaccine. By the time the child reaches 7 months, they will need 3 total doses (look at the DTaP column and row "By 7 months").

VACCINES REQUIRED FOR SCHOOL, GRADES Preschool-12

Vaccines Required for School in Washington State



	DTaP/Tdap (Diphtheria, Tetanus, Pertussis)	Hepatitis B	Hib (<i>Haemophilus influenzae</i> type B)	MMR (Measles, mumps, rubella)	PCV (Pneumococcal Conjugate)	Polio	Varicella (Chickenpox)
Preschool Age 19 months to less than 4 years on September 1 st **	4 doses DTaP	3 doses	3 or 4 doses* (depending on vaccine)	1 dose	4 doses*	3 doses	1 dose
Preschool/Transitional Kindergarten 4 years of age or older on September 1 st ***	5 doses DTaP*	3 doses	3 or 4 doses* (depending on vaccine) <i>Not required at 5 years of age or older</i>	2 doses	4 doses* <i>Not required at 5 years of age or older</i>	4 doses*	2 doses
Kindergarten through 6th grades	5 doses DTaP*	3 doses	Not Required	2 doses	Not Required	4 doses*	2 doses
7th through 12th grades****	5 doses DTaP* <i>Plus Tdap at age >10 years</i>	3 doses	Not Required	2 doses	Not Required	4 doses*	2 doses

*Vaccine doses may be acceptable with fewer than listed depending on when they were given.

**Students who turn 4 after 09/01 do not need to meet the requirements for Preschool/Transitional Kindergarten age >4 years until the next school year.

***Must have additional DTaP, IPV, MMR, and varicella vaccine by the first day of school or within 30 days after the 4th birthday, whichever is later.

****Students in adult transition programs need to follow the Grade 12 requirements.

Students entering school must get the required doses listed in this chart to be in compliance with the immunization requirements. School-aged children (Preschool-12) in before and after-school programs must meet the immunization requirements for their grade in school. The requirements follow the ages and intervals in the [CDC Recommended Child and Adolescent Immunization Schedule 2024 \(PDF\)](#)..

To find the doses required, look at the row that includes the student's grade and the column for the required vaccine. For example, a student entering Kindergarten needs 2 doses of MMR vaccine. The requirements and rules vary depending on the student's grade.

DIPHTHERIA, TETANUS, PERTUSSIS (DTaP, DT, Td, Tdap)

All children/students entering child care, preschool, and school through 12th grade must have documentation of vaccination against diphtheria, tetanus and pertussis disease or proof of acquired immunity ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Routine schedule for DTaP vaccine: 2 months, 4 months, 6 months, 15-18 months, and 4-6 years of age (before preschool/school entry).

Routine schedule for Tdap vaccine: 1 dose at 11-12 years of age.

Child Care By Age	DTaP (Diphtheria, Tetanus, Pertussis)
By 3 Months	1 dose
By 5 Months	2 doses
By 7 Months	3 doses
By 16 Months	3 doses
By 19 Months	4 doses
By 7 years or preschool/school entry at ≥ 4 years	5 doses

School By Grade	DTaP/Tdap (Diphtheria, Tetanus, Pertussis)
Preschool Age 19 months to <4 years on Sept. 1 st	4 doses DTaP
Preschool/Kindergarten (Including Transitional Kindergarten) Age =4 years on Sept. 1 st	5 doses DTaP
Kindergarten through 6th Age ≥5 years on Sept. 1 st	5 doses DTaP
Grade 7 through 12	5 doses DTaP Plus Tdap at age ≥10 years

DIPHTHERIA, TETANUS, PERTUSSIS (DTaP, DT, Td, Tdap), continued

Rules of Vaccination and Exceptions

Routine schedule for DTaP vaccine: 2 months, 4 months, 6 months, 15-18 months, and 4-6 years of age (before preschool/school entry). Routine schedule for Tdap vaccine: 1 dose at 11-12 years of age.

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Diphtheria, Tetanus, and Pertussis¹ (DTaP and Tdap)	DTaP Dose 1	6 weeks	
	DTaP Dose 2	10 weeks	4 weeks after dose 1
	DTaP Dose 3	14 weeks	4 weeks after dose 2
	DTaP Dose 4	12 months	6 months after dose 3 ³
	DTaP Dose 5	4 years	6 months after dose 4 ⁴
	Tdap Booster ⁵	10 years ^{5a}	None ^{5b}

1. Doses administered ≤4 days before the minimum age or interval are considered valid^{5a}.
2. DTaP is licensed for children through age 6. If catch-up doses are needed at age 7 and older, Tdap is used followed by additional doses of Tdap or Td if needed. DTaP contains more vaccine antigen than Tdap (the capital letters indicate a larger dose). DT has not been available in the U.S. since 2024. DT doses are not valid in the DTaP series.
3. In the 5-dose DTaP schedule a 6-month interval is recommended between dose 3 and dose 4, but a minimum interval of 4 months is acceptable on record review.
4. DTaP Dose 5 is not needed if dose 4 is given at age 4 or older and at least 6 months after the previous dose.
5. A Tdap booster dose is required for all students in grades 7th-12th.
 - a. The 4-day grace period **cannot** be applied to the minimum age of 10 years.
 - b. Students who received a Td instead of a Tdap must get a dose of Tdap or have an exemption to Pertussis in place.
 - c. The Tdap booster can be given regardless of the interval since the last tetanus or diphtheria toxoid containing vaccine.
6. DTaP or Tdap given in error:
 - a. If Tdap was given instead of DTaP for:
 - dose 1, dose 2, or dose 3, the dose is invalid and must be repeated with DTaP.
 - dose 4 or dose 5; the Tdap dose can be counted as valid, it does NOT need to be repeated with DTaP.
 - b. If DTaP was given instead of Tdap the dose can be counted as valid.
7. Health care provider documentation of a blood antibody titer sufficient for immunity to diphtheria and tetanus is acceptable.
8. There is currently no acceptable proof of immunity for pertussis by blood antibody titer or history of disease, documentation of vaccine doses or an exemption is required. Pertussis disease does not provide lifelong immunity.

DIPHTHERIA, TETANUS, PERTUSSIS (DTaP, DT, Td, Tdap), continued**Catch-Up Schedule for children/students who did not complete the primary DTaP schedule:****Vaccine needed depends on age when it will be administered:**

- Age 6 weeks through 6 years: DTaP is used
- Age 7+ years: Tdap is used followed by Tdap or Td (if more doses needed)

The number of doses needed depends on:

- Current age of the child
 - If they are 7 or older, it also depends on the age at which the first dose was administered

Current Age 4-6 years (if they turn 7 before series completion change to the age 7+ rules below):

- Need a total of 4 doses of DTaP
 - Dose 1, 2, and 3 must be at least 4 weeks apart
 - Dose 4 must be at:
 - at age 4+, AND
 - at least 6 months after the previous dose
 - Note: Tdap given in error instead of DTaP can count as dose 4

Current Age 7+ years:

- Had DTaP dose 1 before 12 months of age:
 - Needs a total of 4 doses of DTaP (used before age 7), Tdap or Td (used age 7+)
 - One dose must be a Tdap at age 7+ years
 - Dose 1, 2, and 3 must be at least 4 weeks apart
 - Dose 4 (or final dose) must be at least 6 months after the previous dose
- Had or will have dose 1 at age 12 months or older:
 - Needs a total of 3 doses of DTaP (used before age 7), Tdap or Td (used age 7+)
 - One dose must be a Tdap at age 7+ years
 - Dose 1, 2, must be at least 4 weeks apart
 - Dose 3 (or final dose) must be at least 6 months after the previous dose
 - If had no doses before age 7 complete the 3 doses with Tdap followed by 2 additional Tdap or Td (either can be used) at the intervals above.

Additional catch-up guidance:

- [2023: Tetanus, Diphtheria, and Pertussis-Containing Vaccines--Catch-up Guidance for Children 4 months through 6 years of age](#) (PDF)
- [2024: Tetanus, Diphtheria, and Pertussis-Containing Vaccines--Catch-up Guidance for Children 7 through 9 years of age](#) (PDF)
- [2024: Tetanus, Diphtheria, and Pertussis-Containing Vaccines--Catch-up Guidance for Children 10 through 18 years of age](#) (PDF)

HEPATITIS B

All children/students entering child care, preschool, and school through 12th grade must have documentation of vaccination against hepatitis B disease or proof of acquired immunity, ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Routine schedule for hepatitis B vaccine: birth, 1-2 months, and 6-18 months of age.

Child Care By Age	Hepatitis B
By 3 Months	2 doses
By 5 Months	2 doses
By 7 Months	2 doses
By 16 Months	2 doses
By 19 Months	3 doses
By 7 years or preschool/school entry at ≥ 4 years	3 doses

School By Grade	Hepatitis B
Preschool Age 19 months to <4 years on Sept. 1 st	3 doses
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	3 doses
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	3 doses
Grade 7 through 11	3 doses
Grade 12	3 doses

HEPATITIS B, continued

Rules of Vaccination and Exceptions

Routine schedule for hepatitis B vaccine: birth, 1-2 months, and 6-18 months of age.

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Hepatitis B (Hep B)	Dose 1	Birth	
	Dose 2	4 weeks	4 weeks after dose 1
	Dose 3 or final dose	24 weeks ²	8 weeks after dose 2 AND 16 weeks after dose 1

- Doses administered ≤ 4 days before the minimum age or interval are considered valid.
- If dose 3 of hepatitis B vaccine was given before 24 weeks:
 - The series moves to a 4-dose series.
 - Another dose is needed at ≥ 24 weeks of age.
 - Dose 3 does not complete the series, it is considered an extra dose and is not included in the minimum intervals, when 4 doses are administered, substitute "dose 4" for "dose 3" in the minimum interval calculations above.
 - Children vaccinated with Pediarix (DTaP, IPV, HepB) or Vaxelis (DTaP, IPV, HepB, Hib) combination vaccines receive an extra hepatitis B dose at 4 months of age.
- Health care provider documentation of a blood antibody titer sufficient for immunity to hepatitis B is acceptable.

Hepatitis B Catch-Up Schedule

- Students through age 19 complete the 3-dose series with the minimum intervals above with the ped/adol formulation of Engerix-B or Recombivax HB regardless of their height or weight. People 20 years of age and older receive the adult dose.
- Students age 11 through 15 may complete the series with 2 adult strength doses of Recombivax HB®.
 - Each dose must be administered at age 11 through 15 years of age.
 - Minimum interval between dose 1 and dose 2 is ≥ 4 months.
 - Both doses must have documentation that they are the adult strength dose of Recombivax HB®.
- Students age 18 years or older
 - May receive a 2-dose series of HepB (HepBisav-B®) at least 4 weeks apart, or
 - May receive the combined HepA and HepB vaccine, Twinrix®, as a 3-dose series (0, 1, and 6 months) or 4-dose series (3 doses at 0, 7, and 21–30 days, followed by a booster dose at 12 months).

HAEMOPHILUS INFLUENZAE TYPE B (Hib)

All children/students entering child care, preschool, and school must have documentation of vaccination against *Haemophilus influenzae* type b (Hib) disease ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Hib vaccine is not required for Kindergarten through 12th grade school entry.

Routine schedule for Hib vaccine: 2 months, 4 months, 6 months, and 12-15 months of age.

Child Care By Age	Hib <i>(Haemophilus influenzae type B)</i>
By 3 Months	1 dose
By 5 Months	2 doses
By 7 Months	2 or 3 doses (depending on vaccine)
By 16 Months	3 or 4 doses (depending on vaccine)
By 19 Months	3 or 4 doses (depending on vaccine)
By 7 years or preschool/school entry at ≥ 4 years	Not routinely given to children age 5 years and older

School By Grade	Hib <i>(Haemophilus influenzae type B)</i>
Preschool Age 19 months to <4 years on Sept. 1 st	3 or 4 doses (depending on vaccine)
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	3 or 4 doses (depending on vaccine) (Not required at age ≥ 5 years)
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	Not Required
Grade 7 through 10	Not Required
Grade 12	Not Required

HAEMOPHILUS INFLUENZAE TYPE B (Hib), continued

Rules of Vaccination and Exceptions

The routine schedule for Hib depends on the vaccines used:

- ActHib, Hiberix, Pentacel (PRP-T) are a 3-dose series at age 2, 4, and 6 months with a booster at 12-15 months for a total of 4 doses.
- PedvaxHib (PRP-OMP) is a 2-dose series at age 2 and 4 months with a booster at 12-15 months for a total of 3 doses. Vaxelis contains PRP-OMP Hib antigen and is a 3-dose series at 2, 4, and 6 months. It is not licensed for the 4th booster dose.

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
<i>Haemophilus Influenzae type B (Hib)</i>	Dose 1	6 weeks	
	Dose 2	10 weeks	4 weeks after dose 1
	Dose 3 ^{2,3}	14 weeks	4 weeks after dose 2
	Dose 3 or 4 Booster Dose ⁴	12 months	8 weeks after previous dose

1. Doses administered ≤ 4 days before the minimum age or interval are considered valid.
2. Children who receive PedvaxHib for doses 1 and 2 do not need a 3rd dose at age 6 months.
3. Children who receive ActHib, Hiberix, Pentacel, or Vaxelis for dose 1 or 2 need a third dose of any Hib vaccine at 6 months of age.
4. Any Hib vaccine can be used for the 12–15 months booster dose.
5. **Exception:** unvaccinated children 7 months of age and older may not require a full series of 3 or 4 doses. The number of doses a child needs to complete the series depends on the child's current age. **See the Hib Doses Required Chart on the next page to determine the total number of doses required.**
6. For information on the catch-up schedules see:
 - a. [Catch-Up Guidance for Healthy Children 4 Months 4 years of age-Haemophilus influenzae type b Vaccines: ActHIB, Hiberix, Pentacel, Vaxelis, or Unknown- Revised January 2025](#) (PDF)
 - b. [Catch-up Guidance for Children 4 months through 4 years of age-Haemophilus Influenzae type b-PedvaxHIB - January 2025](#) (PDF)
7. Hib vaccine is not recommended for children ≥ 5 years of age unless the child has a high-risk medical condition. Children ≥ 5 years of age are not required to have doses of Hib vaccine.
8. Health care provider documentation of a blood antibody titer sufficient for immunity to Hib is acceptable.

HAEMOPHILUS INFLUENZAE TYPE B (Hib), continued

Hib Doses Required Chart for Children 12 through 14 Months of Age

The final booster dose should be given ≥ 12 months and ≥ 8 weeks after the previous dose.

Doses <12 months	Dose 12 through 14 months	Status
2 or more	1	Complete IF final dose ≥ 8 weeks after previous dose
2 or more	0	Needs final dose ≥ 8 weeks after previous dose
1	0	Needs dose 2 ≥ 4 weeks after dose 1 and dose 3 ≥ 8 weeks after dose 2
1	1	Needs final dose 3 ≥ 8 weeks after dose 2
0	1	Needs final dose 2 ≥ 8 weeks after previous dose
0	2	Complete IF ≥ 8 weeks between doses
0	0	Needs dose 1 now and dose 2 ≥ 8 weeks after dose 1

Hib Doses Required Chart for Children 15 through 59 Months of Age

The final booster dose should be given ≥ 12 months and ≥ 8 weeks after the previous dose.

Doses <12 months	Dose 12 through 14 months	Dose 15 through 59 months	Status
2 or more	1	0	Complete IF final dose ≥ 8 weeks after previous dose
1 or more	0	1	Complete
1 or more	1	1	Complete IF final dose ≥ 8 weeks after previous dose
1 or more	0	0	Needs final dose now
1	1	0	Needs final Dose ≥ 8 weeks after previous dose
0	1	0	Needs final Dose ≥ 8 weeks after previous dose
0	2	0	Complete IF ≥ 8 weeks between doses
0	1	1	Complete IF ≥ 8 weeks between doses
0	0	1	Complete
0	0	0	Needs one final dose now

MEASLES, MUMPS, RUBELLA (MMR)

All children/students entering child care, preschool, and school through 12th grade must have documentation of vaccination against measles, mumps and rubella disease or proof of acquired immunity ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Routine schedule for MMR vaccine: 12-15 months and 4-6 years of age (before preschool/school entry).

Child Care By Age	MMR (Measles, Mumps Rubella)
By 3 Months	Not routinely given before 12 months of age
By 5 Months	
By 7 Months	
By 16 Months	1 dose
By 19 Months	1 dose
By 7 years or preschool/school entry at ≥ 4 years	2 doses

School By Grade	MMR (Measles, Mumps Rubella)
Preschool Age 19 months to <4 years on Sept. 1 st	1 dose
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	2 doses
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	2 doses
Grade 7 through 11	2 doses
Grade 12	2 doses

MEASLES, MUMPS, RUBELLA (MMR), continued

Rules of Vaccination and Exceptions

Routine schedule for MMR vaccine: 12-15 months and 4-6 years of age (before preschool/school entry).

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Measles, Mumps, and Rubella (MMR or MMRV)	Dose 1	12 months	
	Dose 2	13 months	4 weeks (28 days) after dose 1

- The 4-day grace period can be applied to the minimum age and between doses of the same live vaccine, such as MMR and MMR. The 4-day grace period **cannot** be applied between doses of different live vaccines, such as between MMR and varicella or MMRV (measles, mumps, rubella, and varicella) and MMR.
 - MMR administered ≥ 5 days before the 1st birthday cannot be counted as a valid dose.
- If not given on the same day, the minimum interval between MMR and other injected or intranasal live virus vaccines such as Varicella, FluMist and Yellow Fever must be ≥ 28 days.
 - A second live virus vaccine given < 28 days after another live vaccine may not produce the desired immune response and is therefore not valid and must be repeated.
- There are no single antigen vaccines for measles, mumps, and rubella available in the U.S. Only MMR and MMRV vaccine is available.
- Health care provider documentation of a blood antibody titer sufficient for immunity to measles, mumps, and rubella (must have immunity to all three) is acceptable.
- A history of measles, mumps, or rubella disease without blood antibody titer sufficient for immunity is not acceptable.

PNEUMOCOCCAL CONJUGATE (PCV)

All children/students entering child care, preschool, and school must have documentation of vaccination against pneumococcal disease ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Pneumococcal vaccine is not required for Kindergarten through 12th grade school entry.

Routine schedule for Pneumococcal Conjugate Vaccine (PCV): 2 months, 4 months, 6 months, and 12-15 months of age

Child Care By Age	PCV (Pneumococcal Conjugate)
By 3 Months	1 dose
By 5 Months	2 doses
By 7 Months	3 doses
By 16 Months	4 doses
By 19 Months	4 doses
By 7 years or preschool/school entry at ≥ 4 years	Not routinely given to children age 5 years and older

School By Grade	PCV (Pneumococcal Conjugate)
Preschool Age 19 months to <4 years on Sept. 1 st	4 doses
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	4 doses (Not required at age ≥ 5 years)
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	Not Required
Grade 7 through 11	Not Required
Grade 12	Not Required

PNEUMOCOCCAL CONJUGATE (PCV), continued

Rules of Vaccination and Exceptions

Routine schedule for Pneumococcal Conjugate Vaccine (PCV): 2 months, 4 months, 6 months, and 12-15 months of age

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Pneumococcal Conjugate (PCV13, PCV15 or PCV20)	Dose 1	6 weeks	
	Dose 2	10 weeks	4 weeks after dose 1
	Dose 3	14 weeks	4 weeks after dose 2
	Dose 4	12 months	8 weeks after previous dose

1. Doses administered ≤ 4 days before the minimum age or interval are considered valid.
2. **Exception:** Unvaccinated children 7 months of age and older may not require a full series of 4 doses. The number of doses a child needs to complete the series depends on the child's current age and risk factor. **See the PCV Doses Required Chart on the next page to determine the total number of doses required.**
3. For information on the catch-up schedules see: [Catch-Up Guidance for Healthy Children 4 Months through 4 Years of Age Pneumococcal Conjugate Vaccine: PCV-Revised January 2025](#) (PDF)
4. PCV is not recommended for children ≥ 5 years of age unless the child has a high-risk medical condition. Children ≥ 5 years of age are not required to have doses of PCV vaccine.

PNEUMOCOCCAL CONJUGATE (PCV), continued

PCV Doses Required Chart for Children 12 through 23 Months of Age

The final booster dose should be given ≥ 12 months and ≥ 8 weeks after the previous dose.

Doses <12 months	Doses ≥ 12 months	Status
0	0	Needs dose 1 now and dose 2 ≥ 8 weeks after dose 1
0	1	Needs final dose 2 ≥ 8 weeks after dose 1
0	2	Complete IF doses separated by ≥ 8 weeks
1	0	Needs dose 2 ≥ 4 weeks after dose 1 and dose 3 ≥ 8 weeks after dose 2
1	1	Needs final dose 3 ≥ 8 weeks after dose 2
1	2	Complete IF dose 3 ≥ 8 weeks after dose 2
2 or more	0	Needs final dose ≥ 8 weeks after previous dose
2 or more	1	Complete IF final dose ≥ 8 weeks after previous dose

PCV Doses Required Chart for Children 24 through 59 Months of Age

The final booster dose should be given ≥ 12 months and ≥ 8 weeks after the previous dose.

Doses <12 months	Dose 12 through 23 months	Dose 24 through 59 months	Status
0	0	0	Needs one final dose now
0	1	0	Needs final dose 2 ≥ 8 weeks after dose 1
0	2	0	Complete IF ≥ 8 weeks between doses
0	1	1	Complete IF ≥ 8 weeks between doses
0	0	1	Complete
1	1	0	Needs final dose 3 ≥ 8 weeks after dose 2
1 or more	1	1	Complete IF final dose ≥ 8 weeks after previous dose
1 or more	0	0	Needs final dose now
1 or more	0	1	Complete
2 or more	1	0	Complete IF last dose ≥ 8 weeks after previous dose

POLIO (IPV, OPV)

All children/students entering child care, preschool, and school through 12th grade must have documentation of vaccination against polio disease or proof of acquired immunity, ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Routine schedule for IPV vaccine: 2 months, 4 months, 6-18 months, and 4-6 years (before preschool/school entry).

Child Care By Age	Polio
By 3 Months	1 dose
By 5 Months	2 doses
By 7 Months	2 doses
By 16 Months	2 doses
By 19 Months	3 doses
By 7 years or preschool/school entry at ≥ 4 years	4 doses

School By Grade	Polio
Preschool Age 19 months to <4 years on Sept. 1 st	3 doses
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	4 doses
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	4 doses
Grade 7 through 11	4 doses
Grade 12	4 doses

POLIO (IPV, OPV), continued

Rules of Vaccination and Exceptions

Routine schedule for IPV vaccine: 2 months, 4 months, 6-18 months, and 4-6 years (before preschool/school entry).

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Polio (IPV ⁴ , OPV ⁴ , fIPV ⁶)	Dose 1	6 weeks	
	Dose 2	10 weeks	4 weeks after dose 1
	Dose 3	14 weeks	4 weeks after dose 2
	Dose 4 ³ or final dose	4 years ^{2a}	6 months after the previous dose ^{2a}

- Doses administered ≤ 4 days before the minimum age or interval are considered valid.
- Polio final dose recommendations changed on August 7, 2009. This date is used in the polio immunization requirement and by the WAIS to calculate doses needed in the forecast.
 - If dose 4 was administered before 08/07/2009:
 - Minimum age is 18 weeks of age
 - Minimum interval from previous dose is 4 weeks.
- Exception: Dose 4 is not required if dose 3 was given on or after the 4th birthday AND given:
 - 6 months after previous dose (if administered on or after 08/07/2009)
 - 4 weeks after previous dose (if administered before 08/07/2009)
- The United States has only used IPV for polio vaccination since the year 2000.
- Students vaccinated outside of the United States may have had doses of OPV.
 - OPV doses given on or after 04/01/2016 do not protect against poliovirus type 2 and are not valid in the U.S schedule.
 - <https://www.cdc.gov/mmwr/volumes/66/wr/mm6601a6.htm>
 - <https://www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm>
 - Do not consider doses of OPV administered on or after 04/01/2016 when calculating minimum intervals between doses.
- fIPV: Some countries use fractional IPV (1/5 full dose) administered intradermally
 - 2 doses of fractional IPV (fIPV) are considered valid and counted as 1 full intramuscular dose of IPV towards series completion.
 - If a person received only 1 dose of fIPV, this dose is not counted towards series completion.
 - The following countries include 2 fractional doses of IPV (fIPV) as part of their routine immunization schedule. IPV doses administered in these countries and recorded as "IPV" should be assumed to be fractional IPV (fIPV) doses, not full IPV doses:
 - Bangladesh, Cuba, Ecuador, India, Nepal, Sri Lanka
- This site can be helpful in determining current polio schedules and date of IPV introduction in other countries: [WHO Immunization Data portal - All Data](#)



INDIVIDUAL VACCINE REQUIREMENTS SUMMARY

Guidelines on Immunizations Required for Child Care and School Entry in Washington State

8. For additional catch-up guidance see: [Catch-Up Guidance for Children 4 Months through 17 Years of Age Inactivated Polio Vaccine \(IPV\)-Revised January 2025](#) (PDF)
9. Guidance for documenting polio vaccine in the WAIS:
 - a. [Documenting Polio Vaccinations in the WAIS](#) (PDF)
 - b. [2026 Best Practices for Entering Historical Vaccines in the WAIS \(YouTube\)](#) |
 - c. [Presentation slides \(PDF\)](#)
10. Health care provider documentation of a blood antibody titer sufficient for immunity is acceptable only if there is documentation of immunity to all three types of polioviruses. Testing for poliovirus type 2 has not been widely available since 2016.

VARICELLA

All children/students entering child care, preschool, and school through 12th grade must have documentation of vaccination against varicella (chickenpox) disease or proof of acquired immunity ([WAC 246-105-030](#) and [WAC 246-105-040](#)).

Routine schedule for varicella vaccine: 12-15 months and 4-6 years of age (before preschool/school entry).

Child Care By Age	Varicella (Chickenpox)
By 3 Months	Not routinely given before 12 months of age
By 5 Months	
By 7 Months	
By 16 Months	1 dose
By 19 Months	1 dose
By 7 years or preschool/school entry at ≥ 4 years	2 doses

School By Grade	Varicella (Chickenpox)
Preschool Age 19 months to <4 years on Sept. 1 st	1 dose
Preschool/Kindergarten (Including Transitional Kindergarten) Age ≥ 4 years on Sept. 1 st	2 doses
Kindergarten through 6th Age ≥ 5 years on Sept. 1 st	2 doses
Grade 7 through 11	2 doses
Grade through 12	2 doses

VARICELLA, continued

Rules of Vaccination and Exceptions

Routine schedule for varicella vaccine: 12-15 months and 4-6 years of age (before preschool/school entry).

Routine Schedule	Dose#	Minimum Age ¹	Minimum Interval from Previous Dose ¹
Varicella (<i>varicella or MMRV</i>)	Dose 1	12 months	
	Dose 2	13 months	• Age 12 months through 12 years: ○ 3 months after dose 1³ • Age 13 and older: ○ 4 weeks after dose 1

1. A 4-day grace period can be applied between doses of the same live vaccine such as varicella and varicella. The 4-day grace period **cannot** be applied between doses of different live vaccines if not given on the same day, such as between MMR and varicella or MMRV and varicella.
 - a. varicella administered ≥ 5 days before the 1st birthday cannot be counted as a valid dose.
2. If not given on the same day, the minimum interval between Varicella and other live virus vaccines such as MMR, FluMist and Yellow Fever is ≥ 28 days.
 - a. A second live virus vaccine given < 28 days after another live vaccine may not produce the desired immune response and is therefore not valid and must be repeated.
3. Children age 12 months through 12 years:
 - a. A minimum interval of 3 months between dose 1 and dose 2 is used when scheduling dose 2.
 - b. A minimum interval of 4 weeks can be accepted when reviewing immunization records.
4. Health care provider documentation of a blood antibody titer sufficient for immunity to varicella is acceptable.

Varicella Disease Verification Details

Health care provider documentation of history of varicella disease is acceptable to meet the requirement for full immunity.

The following are acceptable as provider verification of disease:

- CIS printed from the WAIS or MyIR indicating history of varicella (chickenpox) disease.
- Hardcopy CIS with history of varicella (chickenpox) disease checked and signed by a healthcare provider.
- A letter from a health care provider that verifies history of varicella (chickenpox) disease.

LIST OF CHANGES TO THIS DOCUMENT FROM THE PREVIOUS VERSION

Page(s)	Content
4	Updated Requirements Chart to remove the school year.
19	Added information about fIPV
Throughout	Moved minimum ages and intervals into a table format
Throughout	Edited for clarity