

## Immunization Requirements

**Diphtheria/Tetanus/Pertussis (DTaP, DTP, Tdap)**- A minimum of four doses with the fourth dose given on or after the fourth birthday

**Polio (IPV or OPV)**- A minimum of three doses with the third dose given on or after the fourth birthday

**Hepatitis A** - A series of two doses with the first dose given on or after the first birthday

**Hepatitis B**- A series of three doses

**MMR (Measles, Mumps & Rubella)** - Two doses with the first dose given on or after the first birthday

**Varicella (Chicken Pox)** - Two doses with the first dose given on or after the first birthday OR validation of date (month and year) that the student had the disease

**For PreK students only**

**2 additional immunization series are required**

**Hib**- Haemophilus influenza type b vaccine

**PCV**- Pneumococcal conjugate vaccine

*You may contact the clinic if you have questions regarding PreK immunizations.*

**Proof of immunization will be required to enroll student**

Please fax or email your child's immunization records to our school nurse, Allyson Shaul for review.

Fax # 936-709-9711 email [ashaul@conroeisd.net](mailto:ashaul@conroeisd.net)