



*Protecting, maintaining and improving the health of all Minnesotans*

## MEMORANDUM

**DATE:** April 22, 2010

**TO:** Child Care Providers

**FROM:** Claudia Miller  
Manager, Immunization, Tuberculosis and International Health Section

**SUBJECT:** Change in Varicella Immunization Documentation and Disease Reporting

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You may have already received this information through another means, but if you haven't, this letter is to let you know about two recent changes in reporting varicella (chickenpox) and zoster (shingles) disease that affect you as a child care provider.

1. The first change has to do with the Minnesota Immunization Law. Starting on September 1, 2010, Minnesota child care centers can no longer accept a parent/guardian's signature to document that a child has had chickenpox. Enclosed is a memo with information about the change and a parent fact sheet called "What about shots for school or childcare if your child already had the chickenpox?"

If you have any questions about the School Immunization Law, please call us at 651-201-5503 or 800-657-3970.

2. The second change has to do with reporting all cases of chickenpox or shingles in a child or staff member. As of this year, 2010, the Minnesota Department of Health is asking all child care providers to report all cases of chickenpox and shingles in children or staff. Enclosed are a fact sheet that gives the reasons for this reporting and a case report form.

If you have any questions about case reporting, please call Pam Gahr at 651-201-5414.

Enclosures:

- Memo: Change in immunization law related to chickenpox
- Parent fact sheet: *What about shots for school or child care if your child already had the chickenpox*
- Child Care Immunization Record
- Fact sheet: *Child care providers asked to report chickenpox and shingles cases*
- Varicella or Zoster Case Report Form

*Immunization Program \* P.O. Box 64975 \* St. Paul, MN 55164-0975*  
651-201-5503, 800-657-3970 \* TDD/TYY: 651- 201-5797 \* Minnesota Relay Service: 800- 627-3529

\* An equal opportunity employer \*

[www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize)



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## MEMORANDUM

**DATE:** April 22, 2010  
**TO:** Child Care Providers  
**FROM:** Margaret Roddy, Immunization Program Manager  
**SUBJECT:** Change in immunization law related to chickenpox

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We want to let you know that there has been a change in Minnesota's School Immunization Law that affects you as a child care provider. As you know, a child who has had the chickenpox (varicella disease) is immune to it and doesn't need to have a varicella shot to go to child care. However, starting September 1, 2010, you can no longer accept a parent's/guardian's signature to document that a child has had chickenpox. Legally, you will only be able to accept:

- the signature of a health care provider along with the date of the child's chickenpox, or
- the signature of a health care provider along with a statement that the parent's or legal guardian's description of the child's history of chickenpox indicates a past varicella infection, or
- the signature of a health care provider or a representative of a public clinic along with laboratory evidence of the child's varicella immunity.

In the past a parent's report of disease was acceptable, but this was only temporary and it expires on August 31, 2010.

Enclosed is a revised copy of the Child Care Immunization Record form that meets the criteria of the law, along with a parent fact sheet called *What About Shots for School or Childcare If Your Child Has Already Had Chickenpox?* Both are available on our web site at [www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize).

If you have any questions about the School Immunization Law, please call us at 651-201-5503 or 800-657-3970.

Thank you for all your hard work in helping to keep Minnesota's children healthy.

Enclosures:  
Child Care Immunization Record  
Parent fact sheet

*Immunization Program \* P.O. Box 64975 \* St. Paul, MN 55164-0975*

651-201-5503, 800-657-3970 \* TDD/TYY: 651- 201-5797 \* Minnesota Relay Service: 800- 627-3529

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**IMMUNIZATION HISTORY:** Fill in the MO/DAY/YR information for children 2 months of age and older. If child received a combined shot (like Hib-hep B), write the date in all the boxes that apply. Vaccine doses that are circled ○ are not required by law.

# Child Care Immunization Record

*Must be on file before a child attends child care.*

Diphtheria, Tetanus, Pertussis (DTaP)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 3 doses during 1st year (at 2-month intervals)</li> <li>• 4<sup>th</sup> dose at 12-18 months</li> <li>• 5<sup>th</sup> dose at 4-6 years or at school entrance</li> </ul> Indicate vaccine type: DTaP or DT.		1			
		2			
		3			
		4			
		⑤			
Polio (IPV and/or OPV)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 3 doses at 2-18 months</li> <li>• 4<sup>th</sup> dose at 4-6 years or at school entrance</li> </ul>		1			
		2			
		3			
		④			
Measles, Mumps, Rubella (MMR)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• Required for children 15 months and older</li> <li>• Must be given on or after 1<sup>st</sup> birthday</li> <li>• 2<sup>nd</sup> dose at 4-6 years</li> </ul>		1			
		②			
Haemophilus influenzae type b (Hib)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 3-4 doses for children at 2-15 months</li> <li>• 1 dose ≥12 months required (suspended 2008*)</li> <li>• 1 dose for previously unvaccinated children 15-59 months</li> <li>• Not indicated for children 5 years or older</li> </ul>		1			
		2			
		③			
		④			
Varicella (Chickenpox)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose between 12-18 months</li> <li>• 2<sup>nd</sup> dose at 4-6 years or at school entrance (required for kindergarten)</li> </ul>		1			
		②			
<b>Disease Date:</b>					
Pneumococcal Conjugate Vaccine (PCV)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 2-4 doses for children 2-24 months</li> <li>• Consider for unvaccinated children at 24-59 months in child care</li> <li>• Not indicated for children 5 years or older</li> </ul>		1			
		2			
		3			
		4			
Hepatitis B (Hep B)—required for kindergarten	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 3 doses between birth and 18 months</li> </ul>		①			
		②			
		③			
Rotavirus	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 2-3 doses between 2 and 6 months</li> </ul>		①			
		②			
		③			
Influenza (LAIV or TIV)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 1 dose annually for children ≥6 months (1<sup>st</sup> time influenza immunization requires 2 doses)</li> </ul>		①			
		②			
Hepatitis A (Hep A)	Vaccine	Dose	MO	DAY	YR
<ul style="list-style-type: none"> <li>• 2 doses separated by 6 months for children 12-24 months</li> </ul>		①			
		②			

\* Suspended due to vaccine shortage 2008

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Date of Enrollment: \_\_\_\_\_

## SIGNATURE(S)

### A. For children who are 15 months or older and who have received all the immunizations required by law for child care:

I certify that the above-named child is at least 15 months of age and has completed the immunizations which are required by law for child care.

Signature of Parent/Guardian or Physician/Nurse Practitioner/Physician Assistant/Public Clinic \_\_\_\_\_ Date \_\_\_\_\_

### B. For children who are younger than 15 months or who have not received all the immunizations required by law for child care:

I certify that the above-named child has received the immunizations indicated to the left,

which includes beginning the immunization series required by law for child care that must be completed within 18 months of starting them (DTP, polio, pneumococcal),

and/or

the following immunization(s) are not indicated because of medical reasons, history of disease, or laboratory confirmation of adequate immunity: **(Starting September 2010 for varicella disease see C.)**

Signature of Physician/Nurse Practitioner/Physician Assistant \_\_\_\_\_ Date \_\_\_\_\_

### C. Starting September 2010 (Before September 2010, a parent can sign.): For children who are 18 months or older who have a history of varicella disease:

I certify that varicella immunization is not indicated for the above-named child due to a history of varicella disease that I have diagnosed or had adequately described to me by the parent to indicate past varicella infection in \_\_\_\_\_ year.

Signature of Physician/Nurse Practitioner/Physician Assistant (Before September 2010, a parent can sign.) \_\_\_\_\_ Date \_\_\_\_\_

### D. If the parent/guardian conscientiously opposes immunizations:

I understand that not following vaccination recommendations may endanger the health or life of my child and others that my child might come in contact with. I hereby certify by notarization that:

I am opposed to all immunizations.

I am opposed to only the vaccines indicated. Vaccine(s) I oppose:

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Notary Public (A copy of the notarized statement will be forwarded to the commissioner of health.)



Notary Public Stamp

# Child Care Immunization Record - Instructions

Immunization information must be on file **before** a child attends child care.

## Who should complete and sign this form?

Who signs depends on the child's age and situation: Either the parent/guardian, health care provider, or child care provider can fill in the child's immunization history.

- If the child is at least 15 months old and has had all the shots required by law, a parent or guardian can sign the form in Section A.
- If the child is younger than 15 months or has not had all the shots required by law, then a health care provider must sign in Section B, saying the child has begun the required shots or can't for medical reasons.
- Starting in September 2010, if the child is 18 months or older and has had varicella disease (chickenpox), a health care provider must sign in Section C. (Before September 2010, a parent can sign.)
- If a parent or guardian objects to a certain shot or all shots the parent or guardian must complete Section D and have it notarized by a notary public.

## Notes for Parents

### 1. Give your child's immunization history to the child care provider when you enroll.

Minnesota law (Minn. Stat. 121A.15) requires children enrolled in a Minnesota child care to be immunized against certain diseases or have a legal exemption. This form is designed to provide the child care provider with the information required by law. This or a similar form must be kept on file with the child care provider.

### 2. Keep track of your child's shots, and tell your child care provider each time your child gets a shot.

It will save you time if you keep a shot record for each of your children. Be sure to have the record updated each time your child receives a shot.

Child care will be the first of many times you will need the shot record. You will also need this record for school, camp, college, and if you go to a new doctor or clinic.

### 3. If your child is not up to date on his or her shots, you can catch up.

By law you have 18 months after enrolling for your child to have all his or her required shots. Your child doesn't have to restart a delayed series.

Minnesota children are still getting diseases like measles, mumps, and rubella. These diseases are contagious. They can spread rapidly—especially among groups of children who have not received their shots. And some of them, like pertussis (whooping cough), are much more serious for children than they are for adults. As a parent, you can protect your children by making sure they get all their shots. Most shots are due by 2 years of age.

### 4. If your child has had chickenpox, he or she does not need a varicella shot.

## Notes for Child Care Providers

### 1. Be sure you have a complete immunization history on file for all children 2 months of age and older.

This specific form, or an MDH-approved form, is required by law. If you run a licensed child care facility in Minnesota you must have the information this form contains on file before a child enrolls. If a child enrolls at a younger age, you must obtain immunization information when they reach 2 months of age.

### 2. Keep track of the date when each child's required immunizations are due by law.

If a child is 2 months of age or older and has not yet received all their required shots, you should note the date when these immunizations will be due by law: 18 months after the child enrolls in your facility.

Unless they are otherwise exempt, Minnesota law requires preschoolers in child care to have shots for DTP, polio, MMR, PCV, Hib, and varicella. If the child has had chickenpox disease, he or she does not need a varicella shot, but starting in September 2010, they must have a provider's signature to document this and the year the child had chickenpox. Immunization against hepatitis A, hepatitis B, rotavirus, and influenza are not required by law; however, it is strongly recommended for children in child care.

### 3. Be sure each child's immunization history clearly indicates whether or not they received pertussis vaccine. (DTaP and DTP contain pertussis vaccine; DT does not.)

Nationwide there has been an increase in pertussis disease (whooping cough). If an outbreak of pertussis disease occurs in your child care center, you will need to be able to quickly identify which children are protected and which are not.

### 4. Remind parents to immunize children on time.

As a child care provider, you are in an excellent position to help remind parents about immunizations.

Make sure the immunization records you have on file for each child are up to date, and regularly remind parents when shots are due.

Ask your local health department for an updated immunization schedule each calendar year, so you will have the latest information on hand.

## Questions?

If you have a question about immunizations, call your clinic or your local public health department.

Immunization Program  
P.O. Box 64975  
St. Paul, MN 55164-0975  
651-201-5503 or 1-800-657-3970  
[www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize)  
IC#140-0163 (MDH, 4/2010)



## What about shots for school or childcare if your child has already had the chickenpox?

Minnesota law says children must get certain immunizations before going to school and childcare – including varicella (chickenpox) – unless they have a legal exemption.

However, after a child has had the chickenpox (varicella disease) they are immune to it and don't need to have varicella shots. But starting in the fall of 2010, there is a change in how you need to document that your child has had the chickenpox.

### What is the change?

Starting on September 1, 2010, for children enrolling in childcare, kindergarten and seventh grade, Minnesota schools and childcare can no longer accept a parent/ guardian's signature as proof that a child has had the chickenpox.

Instead, a doctor will need to sign a form saying that the child does not need to get varicella shot(s) because:

- They are already immune because they had chickenpox disease that was either laboratory confirmed, medically diagnosed, or described well enough to the doctor by the parent/guardian to clearly indicate disease, or
- They have a medical reason for not getting the shot(s), or
- They have had a lab test showing they are already immune to chickenpox.

As with all immunizations required for school and childcare, children whose parents are conscientiously opposed to immunization may also receive an exemption.

### Why did the law change?

It changed because as more children get their varicella shots, we have less chickenpox disease and more parents/guardians who have never seen a case of chickenpox and can't recognize it. The medical knowledge of a doctor is needed to make sure a child had the chickenpox – and not some other disease – so they are truly immune.

Not sure your child has had all the other shots required for school or childcare?

Talk to your doctor or clinic or visit the Minnesota Department of Health's Immunization Program Web site at [www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize).

### For more information

For more information about chickenpox, immunizations, and Minnesota's School Immunization Law call or visit the website of the Minnesota Department of Health Immunization Program:

651-201-5503

1-800-657-3970 (toll free)

[www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize)



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Minnesota Department of Health

## Child care providers asked to report chickenpox and shingles cases in children or staff

What are child care providers being asked to report to the Minnesota Department of Health (MDH)?

Child care providers are being asked to report two diseases – chickenpox (varicella) and shingles (zoster) in children or staff.

Do health care providers also report these diseases?

Health care providers also report cases of chickenpox and shingles, but only when the cases are unusual or severe.

Why are all child care providers being asked to report chickenpox and shingles?

Prior to 2010, MDH asked for chickenpox and shingles reports from a subset of child care providers that were randomly selected each year. Starting in 2010 and going forward, all child care providers are asked to report all cases. This change came about because of the decrease in the number of cases due to the success of vaccination. It is good that the vaccine is working, but now it is harder for us to monitor and describe chickenpox and shingles disease in Minnesota.

How do child care providers report cases of chickenpox or shingles to MDH?

When you find that a child or staff member is sick with chickenpox or shingles, you need to fill out and send a simple form, or call us with your report.

- To report a case by phone, call MDH at 651-201-5414 or toll-free at 1-877-676-5414.
- You can find the form to mail or fax on our website at: [www.health.state.mn.us/divs/idepc/diseases/varicella/index.html](http://www.health.state.mn.us/divs/idepc/diseases/varicella/index.html) then click on “Varicella Information for Child Care Providers”
- To obtain a paper copy of the report form, call MDH at 651-201-5414 or toll-free at 1-877-676-5414.

How do I find more information on chickenpox and shingles?

For more information, call MDH at 651-201-5414 or toll-free at 1-877-676-5414 or visit our website at [www.health.state.mn.us/immunize](http://www.health.state.mn.us/immunize) then click on the “Diseases Prevented by Vaccines” link to find a list of diseases.

Thank you for your help in keeping Minnesotans healthy!



Vaccine-Preventable Disease Surveillance  
P.O. Box 64975  
St. Paul, MN 55164-0975  
651-201-5414 or 1-877-676-5414  
[www.health.state.mn.us](http://www.health.state.mn.us)

# Varicella (Chickenpox) or Zoster (Shingles) Case Report Form

## Minnesota Childcare Centers and Homes, 2011

DATE:

TO: Minnesota Department of Health, VPD Surveillance Unit

**Report chickenpox or shingles cases in both children and staff by fax, phone, or mail. Provide as much detail as possible.**

Fax number: 651-201-4820 Phone: 651-201-5414 or 877-676-5414 (toll free)

Address: Minnesota Department of Health  
 Vaccine-Preventable Disease Surveillance  
 P.O. Box 64975  
 St. Paul, MN 55164-0975

Case and Parent/Guardian Information	
Last <span style="margin-left: 100px;">First</span>	Parent/Guardian Name
Age : _____ Vaccinated: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Dose 1 Date: ____/____/____ Dose 2 Date: ____/____/____ Previous chickenpox disease?: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Parent/Guardian Phone Home: (    ) _____ Work: (    ) _____ Cell: (    ) _____
Rash Information	
Date rash began: ____/____/____	Type of rash: <input type="checkbox"/> Chickenpox <input type="checkbox"/> Shingles
Estimated severity of rash: <input type="checkbox"/> Fewer than 50 lesions – spots can be easily counted within 30 seconds <input type="checkbox"/> 50-249 lesions – the case's hand can be placed between the spots in several areas <input type="checkbox"/> 250-499 lesions – the case's hand can't be placed between the spots without touching a lesion <input type="checkbox"/> More than 500 lesions – the spots are so close together that it's difficult to see normal skin	
Diagnosis and Facility Information	
Diagnosis was made by (check all that apply) <input type="checkbox"/> health care provider <input type="checkbox"/> parent <input type="checkbox"/> childcare provider <input type="checkbox"/> other, specify: _____	
Facility/Home	City
Name and title of person reporting	Phone (    ) _____



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