**Section 665.240 Basic Immunization**

a) The optimum starting ages for the specified immunizing procedures are as follows:

1) Diphtheria − two to four months

2) Pertussis − two to four months, combined with tetanus toxoid

3) Tetanus − two to four months

4) Poliomyelitis − two to four months

5) Measles – 12 to 15 months

6) Rubella – 12 to 15 months

7) Mumps – 12 to 15 months

8) Haemophilus − two to four months influenzae type b

9) Hepatitis B – birth to two months

10) Varicella – 12 to 18 months

11) Invasive Pneumococcal Disease – two to four months

12) Meningococcal Disease – 11 to 12 years

b) Upon first entering a child care facility, all children two months of age and older shall show proof that the child has been immunized, or is in the process of being immunized, according to the recommended schedule, against diphtheria, pertussis, tetanus, polio, measles, mumps, rubella, Haemophilus influenzae type b, hepatitis B, varicella, and invasive pneumococcal disease, unless proved to be immune as determined by Sections 665.250 and 665.280, parents object based on religious grounds in accordance with Section 665.510, or a licensed physician, advanced practice nurse or physician assistant issues a medical exemption in accordance with Section 665.520.

c) Diphtheria, Pertussis, Tetanus

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received three or more doses of Diphtheria, Tetanus, Pertussis (DTP or DTaP) vaccine by one year of age and one additional dose by the second birthday. The first three doses in the series shall have been received no less than four weeks (28 days) apart. The interval between the third and fourth doses shall be at least six months.

2) Any child entering school (kindergarten or first grade) for the first time shall show proof of having received four or more doses of Diphtheria, Tetanus, Pertussis (DTP or DTaP) vaccine, with the last dose being a booster and having been received on or after the fourth birthday. The first three doses in the series shall have been received no less than four weeks (28 days) apart. The interval between the third and fourth doses shall be at least six months. Children age six and under may receive DTaP or DTP. Children age seven and older may receive Tetanus, Diphtheria (Td) vaccine as recommended pursuant to the ACIP catch-up series in lieu of DTP or DTaP vaccine.

3) Any child entering school at a grade level not included in subsection (c)(1) or (2) shall show proof of having received three or more doses of DTP, DTaP, pediatric DT or adult Tetanus and Diphtheria (Td), with the last dose being a booster and having been received on or after the fourth birthday. The first two doses in the series shall have been received no less than four weeks (28 days) apart. The interval between the second and third doses shall be at least six months.

4) Receipt of pediatric Diphtheria Tetanus (DT) vaccine in lieu of DTP or DTaP is acceptable only if the pertussis component of the vaccine is medically contraindicated. Documentation of the medical contraindication shall be verified as specified in Section 665.520.

5) Any child entering sixth grade shall show proof of having received one dose of Tdap (defined as tetanus, diphtheria, acellular pertussis) vaccine regardless of the interval since the last DTaP, DT or Td dose.

6) Students entering grades seven through 12 who have not already received Tdap are required to receive one Tdap dose regardless of the interval since the last DTaP, DT or Td dose.

7) For students attending school programs in which grade levels (kindergarten through 12) are not assigned, including special education programs, proof of one dose of Tdap vaccine as described in subsection (c)(5) shall be submitted before the school years in which the child reaches the ages of 11 and 15. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

8) School-age children entering a child care facility shall comply with the immunization requirements of subsections (c)(2), (3), (4), (5), (6) and (7).

d) Polio

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received two or more doses of polio vaccine (defined as oral poliovirus vaccine (OPV) or inactivated poliovirus vaccine (IPV)) by one year of age and a third dose by the second birthday. Doses in the series shall have been received no less than four weeks (28 days) apart. Any child 24 months of age or older shall show proof of at least three doses of polio vaccine appropriately spaced.

2) Any child entering school at any grade level (kindergarten through 12) shall show proof of having received three or more doses of polio vaccine (defined as oral poliovirus vaccine (OPV) or inactivated poliovirus vaccine (IPV)). A child who received any combination of IPV and OPV shall show proof of having received at least four doses, with the last dose having been received on or after the fourth birthday. Doses in the series shall have been received no less than four weeks (28 days) apart. A child who received IPV exclusively or OPV exclusively shall show proof of having received at least three doses, with the last dose having been received on or after the fourth birthday. Doses in the series shall have been received no less than four weeks (28 days) apart.

3) Beginning with the school year 2017-2018, any child entering kindergarten shall show proof of having received four or more doses of polio vaccine (defined as oral poliovirus vaccine (OPV) or inactivated poliovirus vaccine (IPV)). The first three doses in the series shall have been received no less than four weeks (28 days) apart. The fourth or last dose shall be administered on or after the fourth birthday and at least six months after the previous dose. A fourth dose is not needed if the third dose was administered at age four or older and at least six months after the previous dose, in accordance with the ACIP catch-up series.

4) For students attending school programs in which grade levels (kindergarten through 12) are not assigned, including special education programs, proof of polio vaccine shall be submitted before the school years in which the child reaches the ages of five, 11 and 15. Students eligible to remain in public schools beyond grade 12 (special education) shall meet the requirements for 12th grade.

5) School-age children entering a child care facility shall comply with the immunization requirements in subsection (d)(2).

e) Measles

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received one dose of live measles virus vaccine on or after the first birthday, or other proof of immunity described in Section 665.250(c).

2) Children entering school at any grade level (kindergarten through 12) shall show proof of having received two doses of live measles virus vaccine, the first dose on or after the first birthday and the second dose no less than four weeks (28 days) after the first or other proof of immunity described in Section 665.250(c).

3) For students attending school programs where grade levels (kindergarten through 12) are not assigned, including special education programs, proof of two doses of live measles virus vaccine as described in subsection (c)(2) shall be submitted before the school years in which the child reaches the ages of five, 11 and 15. Students eligible to remain in public schools beyond grade 12 (special education) shall meet the requirements for 12th grade.

4) School-age children entering a child care facility shall comply with the immunization requirements in subsections (e)(2) and (3).

f) Rubella

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received at least one dose of live rubella virus vaccine on or after the first birthday. Proof of disease is not acceptable unless laboratory evidence of rubella immunity is presented (see Section 665.250(d)).

2) Children entering school at any grade level (kindergarten through 12) shall show proof of having received two doses of live rubella virus vaccine, the first dose on or after the first birthday and the second dose no less than four weeks (28 days) after the first dose, or other proof of immunity described in Section 665.250(c).

3) For students attending school programs where grade levels (kindergarten through 12) are not assigned, including special education programs, proof of two doses of live rubella virus vaccine as described in subsection (f)(2) shall be submitted before the school years in which the child reaches the ages of five, 11 and 15. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

4) School-age children entering a child care facility shall comply with the immunization requirements in subsections (f)(2) and (3).

g) Mumps

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received at least one dose of live mumps virus vaccine on or after the first birthday. Proof of disease, if verified by a physician, or laboratory evidence of mumps immunity may be substituted for proof of vaccination (see Section 665.250(e)).

2) Children entering school at any grade level (kindergarten through 12) shall show proof of having received two doses of live mumps virus vaccine, the first dose on or after the first birthday and the second dose no less than four weeks (28 days) after the first dose, or other proof of immunity described in Section 665.250(c).

3) For students attending school programs where grade levels (kindergarten through 12) are not assigned, including special education programs, proof of having received two doses of live mumps virus vaccine as described in subsection (e)(2) shall be submitted before the school years in which the child reaches the ages of five, 11 and 15. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

4) School-age children entering a child care facility shall comply with the immunization requirements in subsections (g)(2) and (3).

h) Haemophilus influenzae type b (Hib)

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of immunization that complies with the ACIP recommendation for Hib vaccination.

2) Children 24 to 59 months of age who have not received the primary series of Hib vaccine, according to the Hib vaccination schedule, shall show proof of receiving one dose of Hib vaccine at 15 months of age or older.

3) Any child five years of age or older shall not be required to provide proof of immunization with Hib vaccine.

i) Hepatitis B

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received three doses of hepatitis B vaccine. The first two doses shall have been received no less than four weeks (28 days) apart. The interval between the second and third doses shall be at least two months. The interval between the first dose and the third dose shall be at least four months. The third dose shall have been administered on or after six months of age. Proof of prior or current infection, if verified by laboratory evidence, may be substituted for proof of vaccination (see Section 665.250(f)).

2) Children entering the sixth grade shall show proof of having received three doses of hepatitis B vaccine, or other proof of immunity described in Section 665.250(f). The first two doses shall have been received no less than four weeks (28 days) apart. The interval between the second and third doses shall be at least two months. The interval between the first and third doses shall be at least four months. Proof of prior or current infection, if verified by laboratory evidence, may be substituted for proof of vaccination (see Section 665.250(f)).

3) The third dose of hepatitis B vaccine is not required if it can be documented that the child received two doses of adult formulation Recombivax-HB vaccine (10 mcg) and was 11 to 15 years of age at the time of vaccine administration, and that the interval between receipt of the two doses was at least four months.

4) Proof of prior or current hepatitis B infection shall be verified by laboratory evidence. Laboratory evidence of prior or current hepatitis B infection is acceptable only if one of the following serologic tests indicates positivity: HBsAg, anti-HBc or anti-HBs.

5) For students attending school programs for which grade levels (kindergarten through 12) are not assigned, proof of having received three doses of hepatitis B vaccine or other proof of immunity as described in subsections (i)(2), (3) and (4) shall be submitted before the school years in which the child reaches the ages of 11 and 15. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

6) School-age children entering a child care facility shall comply with the immunization requirements in subsections (i)(2) and (3).

j) Varicella

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of having received one dose of varicella vaccine on or after the first birthday, or other proof of immunity described in Section 665.250(g).

2) Children entering school at any grade level (kindergarten through 12) shall show proof of having received at least one dose of varicella vaccine on or after the first birthday, or other proof of immunity described in Section 665.250(g).

3) Any child entering kindergarten, sixth grade, or ninth grade for the first time on or after July 1, 2014 shall show proof of having received two doses of varicella vaccine, the first dose on or after the first birthday and the second dose no less than four weeks (28 days) after the first dose, or other proof of immunity described in Section 665.250(g).

4) For students attending school programs where grade levels (kindergarten through 12) are not assigned, proof of having received at least two doses of varicella vaccine in accordance with subsection (j)(2) or (3) or other proof of immunity as described in Section 665.250(g) shall be submitted prior to the school years in which the child reaches the ages of five, 11 and 15. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

5) School-age children entering a child care facility shall comply with the immunization requirements in subsections (j)(2) and (3).

k) Invasive Pneumococcal Disease

1) Any child entering a child care facility or school program below the kindergarten level shall show proof of immunization that complies with the ACIP recommendations for pneumococcal vaccination.

2) Children 24 to 59 months of age who have not received the primary series of pneumococcal conjugate vaccine, according to the recommended vaccination schedule, shall show proof of receiving one dose of pneumococcal vaccine after 24 months of age.

3) Any child who has reached his or her fifth birthday shall not be required to provide proof of immunization with pneumococcal conjugate vaccine.

l) Meningococcal Disease

1) Beginning with the school year 2015-2016, any child entering the sixth grade shall show proof of having received one dose of meningococcal conjugate vaccine on or after the 11th birthday. Children who do not meet the age requirement will be monitored in accordance with Section 665.270.

2) Beginning with the school year 2015-2016, any child entering the 12th grade shall show proof of having received two doses of meningococcal conjugate vaccine prior to entering the 12th grade. The first dose shall have been received on or after the 11th birthday, and the second dose shall have been received on or after the 16th birthday, at least eight weeks after the first dose. If the first dose is administered when the child is 16 years of age or older, only one dose is required.

3) For students attending school programs where grade levels (kindergarten through 12) are not assigned, including special education programs, proof of having received one dose of meningococcal conjugate vaccine shall be submitted in the school year in which the child reaches age 11 and a second dose in the school year in which the child reaches age 16. If the first dose is administered when the child is 16 years of age or older, only one dose is required. Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.

m) The requirements of this Section also apply to children who transfer into Illinois child care facilities, school programs, and schools from other states, regardless of the age or grade level at which the child transfers.

n) It is not the intent of this Part that any child whose parents comply with the intent of this Part, the Act or the School Code should be excluded from a child care facility or school. A child or student shall be considered in compliance with the law if there is evidence of the intent to comply. Evidence may be:

1) a signed statement from a health care provider that he or she has begun, or will begin, the necessary immunization procedures; or

2) the parent's or legal guardian's written consent for the child's participation in a school or other community immunization program.

(Source: Amended at 41 Ill. Reg. 2973, effective February 27, 2017)