



## Immunization Branch

# K-12 immunization table

## Vaccines required for school entry, 2024-2025

### Background:

1. This table may be used as a **guide** to evaluate the number of valid doses a child or adolescent must receive in order to comply with [state immunization requirements](#).
2. Immunization requirements must be enforced. Students who do not meet the requirements must be denied attendance according to Colorado Revised Statutes § 25-4-902.

There are three ways to be in compliance with Colorado school immunization law:

- i. **Fully immunized:** A student has received all school-required vaccines and is up to date according to their age, following the timing and spacing requirements of the [immunization schedule](#) set by the [Advisory Committee on Immunization Practices](#) (ACIP). A completed Certificate of Immunization is included in the student's electronic or hard copy file. "Fully immunized" also applies to students with [evidence of immunity to varicella](#) and students who have submitted titers as an acceptable alternative to certain vaccine components. Use CDPHE's [titer interpretation guidance resource](#) to determine which titers are an acceptable alternative to school-required vaccination.
  - ii. **In-process:** A student is attending school and is in the process of getting up to date on required vaccines. Within 14 days of receiving direct notification from the school or child care, the student must receive the required vaccines and, if applicable, the parent/guardian must submit a signed written plan for obtaining the remaining school-required vaccines, following the ACIP schedule for [minimum intervals and ages](#).
  - iii. **Exempted:** A student has a complete [Certificate of Medical or Nonmedical Exemption on file](#). A Certificate of Nonmedical Exemption is to be submitted by the student's parent/guardian upon entry and will expire annually on June 30 unless it is submitted as a part of a school's designated early registration period for the upcoming school year. A Certificate of Medical Exemption needs to be submitted only once unless there is a change in the student's school or personal information.
3. Vaccines **required** for school (K-12) include hepatitis B (HepB), diphtheria, tetanus, pertussis (DTaP), polio (IPV), measles, mumps, rubella (MMR), varicella (chickenpox), and Tetanus, diphtheria, pertussis (Tdap for sixth grade entry).
  4. Vaccines that are **not** required for school but are [recommended by ACIP](#) include COVID-19, hepatitis A (HepA), human papillomavirus (HPV), influenza (flu), meningococcal ACWY, and meningococcal B. Other vaccines may be recommended for students with certain high-risk health conditions.
  5. Schools and child cares are encouraged to enroll in the [Colorado Immunization Information System \(CIIS\)](#), which allows users to look up, review, and record immunization records. Email [cdphe\\_ciis\\_schools@state.co.us](mailto:cdphe_ciis_schools@state.co.us) for more information.

### How to use the K-12 immunization table:

1. Review the student's immunization record alongside this table to ensure they have the required number of valid doses.
  - i. The Colorado Board of Health requirements follow the [immunization schedule](#) developed by the Advisory Committee on Immunization Practices (ACIP) with the following exceptions:
    - a. Students between the ages of 4 and 6 years are required to receive their final doses of diphtheria, tetanus, and pertussis (DTaP), inactivated polio vaccine (IPV), measles, mumps, and rubella (MMR), and varicella (chickenpox) vaccines prior to kindergarten entry.
    - b. Students aged 10 and older are required to receive tetanus, diphtheria, and pertussis (Tdap vaccine prior to sixth grade entry). See catch-up guidance for additional information for students who start late or are more than one month behind.

Vaccines must be given no earlier than the [minimum intervals and ages](#) in order to be valid. A [four-day grace period](#) applies in most situations, though should **not** be applied to the 28-day interval between two live virus vaccines (i.e., MMR or varicella).

Vaccine	Number of doses (routine)	Routine vaccination and catch-up guidance
<b>Hepatitis B (HepB)</b>	3	<p><b>Routine:</b> Three-dose series at age 0, 1-2 months, and 6-18 months. The minimum age for the final dose is 24 weeks of age. If Dose 3 is given prior to 24 weeks, a fourth dose is required. Four doses of hepatitis B vaccine are permitted when a combination vaccine is used.</p> <p><b>Catch-up:</b> Three-dose series at 0, 1-2 months, 6 months (minimum intervals of four weeks between Dose 1 and Dose 2, eight weeks between Dose 2 and Dose 3 and 16 weeks between Dose 1 and Dose 3). Note: There is a two-dose option (<a href="#">Recombivax HB</a>) for adolescents aged 11-15.</p>
<b>Diphtheria, tetanus, pertussis (DTaP)</b> DTaP products are licensed through 6 years of age (prior to the 7th birthday).	5	<p><b>Routine:</b> Five-dose series at 2, 4, 6, 15-18 months, and 4-6 years.</p> <p><b>Catch-up:</b> Dose 5 is not required if Dose 4 was administered on or after the 4th birthday and at least 6 months after Dose 3. Additional guidance for children 4 months through 6 years: Use CDC's <a href="#">DTaP catch-up guidance job aid</a>.</p>
<b>Tetanus, diphtheria, pertussis (Tdap)</b> For students 7 years or older.	1	<p><b>Routine:</b> For students who are fully vaccinated with the childhood series of DTaP (see above), one dose of Tdap is required prior to sixth grade entry. Although the adolescent booster dose of Tdap is routinely administered between the ages of 11-12 years, students aged 10 and older are required to receive Tdap prior to sixth grade entry. Students who receive Tdap at 10 years do not need the adolescent Tdap booster dose at age 11-12.</p> <p><b>Catch-up:</b> For children <b>7-9 years</b> who are <b>not fully</b> vaccinated with the childhood series of DTaP, determine the number of additional doses of Tdap/Td required by using CDC's <a href="#">Tdap catch-up guidance job aid</a>.</p> <p>For children and adolescents <b>10-18 years</b> who are <b>not fully</b> vaccinated with the childhood series of DTaP, determine the number of additional Tdap/Td doses required by using CDC's <a href="#">Tdap catch-up guidance job aid</a>.</p>
<b>Polio (IPV)</b> Doses of oral polio virus (OPV) administered on or after April 1, 2016, should not be counted as valid.*	4	<p><b>Routine:</b> Four-dose series at ages 2, 4, 6-18 months, and 4-6 years. Regardless of the number of doses a student has had, the final dose must be administered on or after age 4 years and at least six months after the previous dose.</p> <p><b>Catch-up:</b> Dose 4 is not required if Dose 3 dose was administered on or after the 4th birthday and at least six months after Dose 2. For additional guidance for children 4 months through 17 years, use <a href="#">CDC's IPV catch-up guidance job aid</a>.</p> <p>*Both IPV and valid doses of OPV may be used to complete a polio series. The total number of doses needed to complete the series is the same as that recommended for the U.S. IPV schedule.</p> <p><b>New ACIP recommendation:</b> Students 18 years and older who are known or suspected to be unvaccinated or incompletely vaccinated against polio should complete a <a href="#">polio vaccination series</a> with IPV.</p>
<b>Measles, mumps, rubella (MMR)</b> If two live vaccines are not given on the same day, there must be at least a 28-day interval between the two doses.	2	<p><b>Routine:</b> Two-dose series at 12-15 months and 4-6 years. Dose 1 is not valid if administered more than four days before the 1st birthday.</p> <p><b>Catch-up:</b> Four weeks between Dose 1 and 2.</p>
<b>Varicella (Chickenpox)</b> If two live vaccines are not given on the same day, there must be at least a 28-day interval between the two doses.	2	<p><b>Routine:</b> Two-dose series at 12-15 months and 4-6 years. Dose 1 is not valid if administered more than four days before the 1st birthday. Note: No vaccine is required if there is laboratory documentation of varicella or a disease screening performed by a health care provider.</p> <p><b>Catch-up:</b> Age 7-12 years: Three months between Dose 1 and 2. Age 13 years and older: Four weeks between Dose 1 and 2. Note: Although a 3-month min. interval is recommended for children younger than age 13, dose 2 does not need to be repeated if separated from dose 1 by a shorter interval of at least 4 weeks.</p>