Parent or Guardian of students entering 7th grade:

RE: Changes in Texas Immunization Requirements

Beginning August 1, 2009, the state of Texas added several required vaccines for all students entering 7th grade. Two (2) doses of Varicella vaccine are required—a written statement from a parent (legal guardian or managing conservator), school nurse, or a physician attesting to the child’s positive history of varicella disease (chicken pox), or of varicella immunity, is acceptable instead of either dose of varicella vaccine. Additional requirements include one (1) dose of meningococcal vaccine, and one (1) dose of Tdap. Students entering 7th grade are required to have a booster of Tdap only if it has been five (5) years since their last dose of tetanus-containing vaccine. Td is acceptable in lieu of Tdap if a contraindication to pertussis exists.

It is a Texas state law that immunizations must be up to date in order for a student to attend school. Your child will not be allowed to attend 7th grade without these immunizations. It is the responsibility of the parent/guardian to provide the updated records to your child’s campus. Please consider getting these immunizations early and providing the record to your child’s campus in order for them to be input into our computer system.

Please be aware that Texas Vaccine for Children eligibility guidelines has changed effective January 1, 2012.

• If your child has private insurance that covers immunizations, he/she will no longer be allowed to receive immunizations at the San Angelo Health Department and must be seen by their Health Care Provider or other vaccine provider. If you have private insurance and you are not sure whether immunizations are covered, contact the benefits coordinator to verify coverage.

• At this time the only children that may receive immunizations at the Health Department are those who have Medicaid, CHIPS, American Indians, Alaskan Natives, private insurance that does NOT cover vaccines, insurance that caps vaccine coverage at a certain amount, or have no insurance coverage for vaccines.

Sincerely,
______________________________, School Principal

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*Call for Clinic Hours  *Call for Clinic Hours  *Call for Clinic Hours
*Call for eligibility