Minimum Immunization Requirements Entering a Child Care Facility or School in Illinois, 2024-2025

Table 1: Immunization Requirements by Antigen and Grade Level

For calculating intervals between doses, 4 weeks = 28 days. Intervals of ≥4 months are determined by calendar months rather than weeks.

<table>
<tr><th rowspan="2">Vaccine Requirement[1]</th><th rowspan="2">Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs</th><th colspan="2">Kindergarten through 12th Grade</th><th rowspan="2">Other Options for Proof of Immunity</th></tr>
<tr><th>First Entry into School (Kindergarten or First Grade)</th><th>Other Grades</th></tr>
<tr><td rowspan="3">Diphtheria, Pertussis, Tetanus</td><td rowspan="3">Three doses of diphtheria, tetanus, pertussis (DTP or DTaP) by 1 year of age, and one additional dose by the second birthday.

Minimum intervals:
• Between the first three doses, there must be at least four weeks.
• Between the third and fourth dose, there must be at least six months.</td><td rowspan="2">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.

Children ages 7 years and older should receive Td[2] instead of DTP or DTaP per the ACIP catch-up schedule.

Minimum ages and intervals:
• Between the three or more primary series doses, there must be at least four weeks.
• Between the primary series and the booster dose, there must be at least six months.
• Booster must be administered on or after the child’s 4th birthday.</td><td>Three or more doses of DTP, DTaP, pediatric DT, or Td[2] with the last dose being a booster and having been received on or after the fourth birthday.

Minimum intervals:
• Between the two or more primary series doses, there must be at least 4 weeks.
• Between the last dose in the primary series and the booster dose, there must be at least six months.
• Booster dose must be administered on or after the child’s fourth birthday.</td><td rowspan="3">No proof of immunity allowed</td></tr>
<tr><td>Entering sixth grade: one dose Tdap vaccine at age ≥11 years, regardless of interval since the last dose of DTP, DTaP, or Td.</td></tr>
<tr><td colspan="2">See additional footnotes regarding catch-up schedules and inadvertent administration of DTaP and Tdap.[5,6]</td></tr>
</table>

Vaccine Requirement[1]	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12th Grade		Other Options for Proof of Immunity
		First Entry into School (Kindergarten or First Grade)	Other Grades	
Polio[3]	Two doses by 1 year of age. One additional dose by second birthday. Three doses for any child 24 months of age or older appropriately spaced. Minimum intervals: • Between each of the first three doses, there must be at least four weeks.	*Progressive requirement: Starting school year 2017-2018, any child entering kindergarten shall show proof of four dose (booster) series with the last dose on or after the fourth birthday. Minimum intervals: • Between each of the first three doses, there must be at least four weeks. • Between the primary series and the booster dose, there must be at least six months. • Booster (fourth dose) must be administered on or after the child's fourth birthday.	*Progressive requirement applies to grades K-7. See the rules that apply to First Entry into School (Kindergarten or First Grade). Grades 8-12: Three or more doses of polio vaccine with the last dose on or after the fourth birthday. Minimum intervals: • Between each dose, there must be at least four weeks. • Booster must be administered on or after the child's fourth birthday.	No proof of immunity allowed
		*This is a progressive requirement starting in 2017-2018. For the 2024-2025 school year, the four-dose requirement applies to grades K – 7.		
	Note: Doses of OPV administered on or after April 1, 2016, do not count towards the U.S. vaccination requirements**.** For more information, see https://www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm.			
Measles	One dose on or after the first birthday.	Two doses of measles vaccine, the first dose must have been received on or after the first birthday and the second dose no less than four weeks (28 days) later.		See Table 2
Rubella	One dose on or after the first birthday.	Two doses of rubella vaccine, the first dose must have been received on or after the first birthday and the second dose no less than four weeks (28 days) later.		See Table 2
Mumps	One dose on or after the first birthday	Two doses of mumps vaccine, the first dose must have been received on or after the first birthday and the second dose no less than four weeks (28 days) later.		See Table 2

Vaccine Requirement[1]	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12th Grade		Other Options for Proof of Immunity
		First Entry into School (Kindergarten or First Grade)	Other Grades	
Hepatitis B	Three doses appropriately spaced. (*see doses in minimum interval column*). Minimum ages and intervals: • Between first and second doses must be at least four weeks. • Between second and third must be at least eight weeks. • Between first and third must be at least 16 weeks. Third dose must have been administered on or after 24 weeks of age (168 days).	Kindergarten through fifth grade not a requirement. *Recommendation: Review these records and, if necessary, have student be brought up to date with hepatitis B series.*	Students entering sixth thru 12th grade, three doses of hepatitis B vaccine administered at appropriate intervals. Minimum intervals: • Between first and second doses must be at least four weeks. • Between second and third must be at least eight weeks. • Between first and third must be at least 16 weeks. 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.	See Table 2
Haemophilus influenzae type b (Hib)	Proof of immunization that complies with the ACIP recommendation for Hib vaccination. Children 24-59 months of age without series shall show proof of one dose of Hib vaccine at 15 months of age or older. Refer to ACIP Hib series schedule: • Immunization Schedules • ACIP Vaccine Recommendations	Any child 5 years of age (60 months of age) or older shall not be required to provide proof of immunization with Hib vaccine.		No proof of immunity allowed

Vaccine Requirement[1]	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12th Grade		Other Options for Proof of Immunity
		First Entry into School (Kindergarten or First Grade)	Other Grades	
Invasive Pneumococcal Disease (PCV)	Proof of immunization that complies with ACIP recommendations for PCV. Children 24 to 59 months of age without primary series of PCV, shall show proof of receiving one dose of PCV after 24 months of age. Refer to ACIP PCV series schedule: • Immunization Schedules • ACIP Vaccine Recommendations	Any child 5 years of age (60 months of age) or older shall not be required to provide proof of immunization with PCV vaccine.		No proof of immunity allowed
Varicella	One dose on or after first birthday.	Two doses of varicella vaccine are required for all grade levels. The first dose must have been on or after the first birthday and the second dose no less than four weeks (28 days) later.		See Table 2
Meningococcal Disease (MCV4) (MenACWY)	No Requirement.	No Requirement.	**Students entering 6th – 11th grades:** One dose of meningococcal conjugate vaccine on or after the child's 11th birthday.[4] **Students entering 12th grade:** Two doses of meningococcal conjugate vaccine, with the second dose administered on or after the child's 16th birthday and at least eight weeks after the first dose. The second dose is not necessary if the first dose is administered on or after the child's 16th birthday.[4]	No proof of immunity allowed

Table 1 Footnotes:

[1] The chart indicates antigens that may be available in either single-antigen and/or combination-antigen vaccines.
[2] Td-containing vaccines include tetanus and diphtheria vaccine (Td) or tetanus, diphtheria, and acellular pertussis vaccine (Tdap).
[3] In accordance with the ACIP catch-up series, a fourth dose of polio is not needed if the third dose was administered at age 4 or older and at least six months after the previous dose was administered.
[4] For Meningococcal Conjugate: if there is an indication for earlier vaccination (between ages 10 and 11), then the provider may submit a letter/statement stating the reasons and provides that with the vaccine records (Section 665.280). Letter/statement should be honored by school health authorities and **NOT** submitted to IDPH for review
[5] Catch-Up Immunization Recommendations for DTaP and Tdap

- Persons aged 7–18 years.
    - If persons aged 7–18 years have never been vaccinated against pertussis, tetanus, or diphtheria, these persons should receive a series of three tetanus and diphtheria toxoid–containing vaccines, which includes at least one Tdap dose. The preferred schedule is one dose of Tdap, followed by one dose of either Td or Tdap ≥4 weeks afterward, and one dose of either Td or Tdap 6–12 months later.
    - Persons aged 7–18 years who are not fully immunized against tetanus and diphtheria should receive one dose of Tdap, preferably as the first dose in the catch-up series; if additional tetanus toxoid–containing doses are required, either Td or Tdap may be used.
    - The vaccination series does not need to be restarted for those with incomplete DTaP history, regardless of the time that has elapsed between doses. The catch-up schedule and minimum intervals between doses are available at https://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html.
- Persons aged ≥19 years.
    - If persons aged ≥19 years have never been vaccinated against pertussis, tetanus, or diphtheria, these persons should receive a series of three tetanus and diphtheria toxoid–containing vaccines, which includes at least one Tdap dose. The preferred schedule is one dose of Tdap, followed by one dose of either Td or Tdap at least four weeks afterward, and one dose of either Td or Tdap 6–12 months later.
    - Persons aged ≥19 years who are not fully immunized against tetanus and diphtheria should receive one dose of Tdap, preferably as the first dose in the catch-up series; if additional tetanus toxoid–containing doses are required, either Td or Tdap may be used.

[6] Inadvertent Administration of DTaP or Tdap:

- Persons aged ≥7 years.
    - DTaP is not indicated for persons aged ≥7 years. If DTaP is administered inadvertently to a fully vaccinated[†] child aged 7–9 years, an adolescent Tdap dose should be administered at age 11–12 years.
    - If DTaP is administered inadvertently to an undervaccinated child aged 7–9 years, this dose should count as the Tdap dose of the catch-up series, and the child should receive an adolescent Tdap dose at age 11–12 years.
    - If DTaP is administered inadvertently to a person aged ≥10 years, this dose should count as the adolescent Tdap dose routinely administered at age 11–12 years.
- Fully vaccinated children aged 7–10 years.
    - If a fully vaccinated child aged 7–9 years receives Tdap, the Tdap dose should not be counted as valid. The adolescent Tdap dose should be administered as recommended when this child is aged 11–12 years.
    - The preferred age at administration for the adolescent Tdap dose is 11–12 years. However, if Tdap is administered at age 10 years, the Tdap dose may count as the adolescent Tdap dose.

Important Notes:

- Students attending ungraded school programs must comply in accordance with grade equivalent. Detailed age-based requirements for each vaccine are listed in the PART 665 CHILD AND STUDENT HEALTH EXAMINATION AND IMMUNIZATION CODE, Section 665.240.
- Students eligible to remain in public schools beyond grade 12 (special education) shall meet the requirements for 12th grade.
- These requirements 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.
- A child shall be considered in compliance with the health examination and immunization requirement in Section 27-8.1 of the School Code if all applicable immunizations that a child can medically receive are given before entering school and a signed statement from a health care provider is presented indicating when the remaining medically indicated immunization will be administered within the current school year. Local school authorities shall monitor immunization schedules to assure their completion. If a child is delinquent for a scheduled appointment for immunization, he or she is no longer considered to be in compliance.
- Within the Advisory Committee on Immunization Practices (ACIP) recommendations, vaccine doses given up to four days before minimum interval or age can be counted as valid. However, this does not apply to intervals between live vaccines. Live vaccines shall not be given fewer than 28 days after receipt of a prior live vaccine.
- For calculating intervals between doses, 4 weeks = 28 days. Intervals of ≥4 months are determined by calendar months rather than weeks.

Table 2: Other Options for Proof of Immunity

Vaccine Requirement	Alternative Options for Proof of Immunity
Measles	Proof of prior measles disease shall be verified with date of illness signed by a physician or laboratory evidence of measles immunity. A diagnosis of measles disease made by a physician on or after July 1, 2002, must be confirmed by laboratory evidence.
Rubella	Laboratory evidence of rubella immunity.
Mumps	Proof of prior mumps disease shall be verified with date of illness signed by a physician or laboratory evidence of mumps immunity.
Hepatitis B	Proof of prior or current infection, if verified by laboratory evidence, may be substituted for proof of vaccination. 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.
Varicella	Proof of prior varicella disease shall be verified with one of the following: 1. date of illness signed by a physician; or 2. a health care provider's interpretation that a parent's or legal guardian's description of varicella disease history is indicative of past infection; or 3. laboratory evidence of varicella immunity.
NOTE: No other options for proof of immunity other than vaccination are allowable for any of the following requirements: diphtheria, tetanus, pertussis, polio, Haemophilus influenzae Type B, invasive pneumococcal disease, or meningococcal disease.	

Resources

IDPH Immunization Webpage
Child and Student Health Examination and Immunization Code
Immunization Schedules
CDC Immunization Webpage
ACIP Vaccine Recommendations and Guidelines
Epidemiology and Prevention of Vaccine-Preventable Diseases-The Pink Book
Immunize.org Ask the Experts

Sources

PART 665 CHILD AND STUDENT HEALTH EXAMINATION AND IMMUNIZATION CODE
ACIP Vaccine Recommendations and Guidelines