



Aviso de exclusión

Se requiere registro de vacunación para asistir a la guardería o a la escuela
Notice of Exclusion

SPANISH

Estimados padres o tutores de/to the parent/guardian of: _____

El estudiante mencionado anteriormente no está al día con las vacunaciones requeridas para la escuela y no puede asistir a esta escuela o guardería hasta que se haya recibido el registro de vacunación completo (según la Ley de vacunación de Colorado). La fecha de exclusión entra en vigor el/ Exclusion date: _____. Comuníquese con su proveedor de atención médica o el Departamento de salud pública local de su condado al/Local Public Health phone#: _____ para obtener las vacunas requeridas por la escuela.

Son necesarias las siguientes vacunas/The following shot(s) are due: _____

- | | |
|---|---|
| <input type="checkbox"/> DTaP (Difteria/Tétanos/Tos ferina) | <input type="checkbox"/> Hib (Haemophilus influenza tipo b) |
| <input type="checkbox"/> Tdap (Tétanos/Difteria/Tos ferina) | <input type="checkbox"/> PCV13 (Vacuna neumocócica conjugada) |
| <input type="checkbox"/> Td (Tétanos/Difteria) | <input type="checkbox"/> Hep B (Hepatitis B) |
| <input type="checkbox"/> IPV (antipolio) | <input type="checkbox"/> Varicella * (Varicela) |
| <input type="checkbox"/> MMR (Sarampión, paperas, rubeola) | |

* Todo informe de varicela debe documentarse por un proveedor de atención médica (MD [doctor en medicina], DO [doctor en osteopatía], APN [enfermero especializado] o PA [auxiliar médico]).

Importante: Si su hijo no puede ser vacunado por *razones médicas*, un MD, DO, APN o PA debe firmar una exoneración médica. Colorado también permite que los padres presenten una exoneración no médica (por creencias religiosas o personales) con la firma de uno de los padres o tutores. Visite www.colorado.gov/vaccineexemption para obtener un formulario de exoneración y pautas sobre la frecuencia de la presentación de las exoneraciones.

Representante escolar/School rep: _____ Fecha/Date: _____

Escuela o guardería/School: _____ Teléfono: _____ Fax: _____

Método de notificación a padres o tutores: ___ Teléfono ___ Correo/Mail ___ En persona ___ Correo electrónico

- Si esta casilla está marcada, se necesita más de una dosis de una de las vacunas que figuran anteriormente y el siguiente plan debe completarse por un proveedor de atención médica. También debe firmarse y presentarse en la escuela antes de la fecha límite mencionada anteriormente. A medida que su estudiante reciba las vacunas, presente el registro de vacunación en la escuela. Este plan estará en proceso hasta que el registro de vacunación esté completo.

Vaccine	Health Care Provider		Due to Be Recieved				
	If you need a referral to a health care provider, call 1-800-688-7777		Schedule must follow medically recommended intervals consistent with the Advisory Committee on Immunization Practices (ACIP)				
DTaP	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
Tdap	Name:	Phone:	Date:				
Td	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
Polio	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
MMR	Name:	Phone:	Date:		Date:		
Hib	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
PCV13	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
Hepatitis B	Name:	Phone:	Date:	Date:	Date:	Date:	Date:
Varicella	Name:	Phone:	Date:		Date:		

Estoy de acuerdo con el plan anterior de recibir las vacunas requeridas y presentar los registros a la guardería o escuela.

Firma/parent signature: _____ Fecha/Date: _____

Dear Health Care Provider,

The Colorado Board of Health (CBOH) incorporates by reference the Advisory Committee on Immunization Practices (ACIP) immunization schedule. Colorado child cares and schools can only accept immunizations as valid if they meet both the **minimum age and minimum intervals** as defined by ACIP: [ACIP Immunization Schedules for Persons Aged 0 Through 18 Years of Age](#)

There are 3 ways a school/student can meet the compliance requirements directed by the Colorado Board of Health rule:

1. **A student is considered fully immunized if they have received school-required immunizations according to the ACIP schedule:** DTaP, Tdap, IPV, Hep B, MMR, Varicella, Hib, PCV13. (Note: Students entering Kindergarten are required to receive their final doses of DTaP, IPV, MMR and Varicella. Students entering 6th grade, regardless of age, are required to receive Tdap) OR
2. **A student is “in-process” of getting up-to-date on required immunizations** (a written plan is provided to the school by the parent) OR
3. **The student’s parent/guardian has submitted a signed non-medical exemption** (based on religious or personal belief) or **the health care provider (MD, DO, APN or delegated PA) has signed a medical exemption** due to a condition that precludes a patient receiving vaccine(s).

If students do not meet one or more of the above compliance criteria, they are not permitted to attend school as stated in the School Immunization Law and the Colorado Board of Health Rules. If you have questions about the student’s school immunization requirement, please communicate with the student’s school nurse/school representative.

It is strongly recommended that additional vaccines that are recommended but not required be administered to best protect the student from vaccine preventable diseases (i.e., MenACWY, HPV, etc.).

If you have questions about the ACIP immunization schedule, or a dose of vaccine that is marked as invalid in your patient’s immunization record, the Colorado Immunization Branch provides a **Nurse on-call Monday through Friday, 8:30 a.m. through 5 p.m. at 303-692-2700**. Additionally, there are reliable resources where you can search for answers to specific immunization questions that may arise:

Centers for Disease Control and Prevention (CDC) Vaccines & Immunizations
<http://www.cdc.gov/vaccines/default.htm>

CDC’s 13th edition of the Epidemiology & Prevention of Vaccine-Preventable Diseases
<http://www.cdc.gov/vaccines/pubs/pinkbook/index.html>

The Immunization Action Coalition: Ask the Experts
<http://www.immunize.org/askexperts/>

To communicate with the CDC Experts at the National Immunization Program
nipinfo@cdc.gov or 1-800-CDC-Info (1-800-232-4636)

Please contact Jamie D’Amico, RN, MSN, CNS at **303-692-2957** for questions regarding School Law.

Thank you,
The Colorado Immunization Branch
303-692-2700