



Technical Bulletin

Division of Public and Behavioral Health



Date: January 30, 2018

Topic: Vaccine Required at Minimum Recommended Age for Child Care Enrollment

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To: Health Care Quality and Compliance, Division of Public and Behavioral Health, Local Health Districts, and Nevada Child Care Facilities

According to Nevada Revised Statutes (NRS) 432A.230, 432A.235, and Nevada Administrative Codes (NAC) 432A.500-.505, children must prove immunity to Diphtheria, Tetanus, Pertussis, Poliomyelitis, Rubella, Rubeola (Measles), Mumps, Hepatitis A, Hepatitis B, Varicella, Streptococcus Pneumoniae, and Haemophilus Influenza type B (Hib) prior to admission to a child care or accommodation facility in Nevada, unless excused because of a religious belief or medical condition.

In addition to these requirements, it is now necessary for children being admitted to child care or accommodation facilities in Nevada to receive all required vaccines at the youngest recommended age per the recommendations of the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP). For example, the fifth dose of DTaP is recommended between four (4) and six (6) years of age. As of the date of this Bulletin, the fifth dose of DTaP vaccine is now required at age four (4) years if the child is attending a child care or accommodation facility in Nevada. Please review the table on the next page for further examples. **Any child who is behind on Nevada's required immunizations must be brought up-to-date utilizing the ACIP Catch Up Schedule to continue to attend the child care/accommodation facility.**

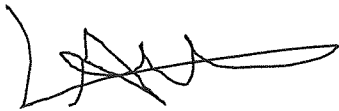
Immunizing children at the youngest recommended age when in a child care or accommodation facility further protects the child and their peers at the earliest time possible. For example, the fifth dose of DTaP, when given at four (4) years of age, increases antibody levels and decreases the risk of older children transmitting the disease to younger siblings and/or classmates who are too young to have completed the vaccine series.

For more information regarding the ACIP immunization schedule please visit:

<https://www.cdc.gov/vaccines/schedules/index.html>.

| Required Immunization | Age Range | Dose Number | Age Required* |
|-----------------------|--------------|-------------|---------------|
| Hepatitis B | 6-18 months | 3 | 6 months |
| DTaP | 15-18 months | 4 | 15 months |
| DTaP | 4-6 years | 5 | 4 years |
| Hib | 12-15 months | 3 or 4 | 12 months |
| PCV13 | 12-15 months | 4 | 12 months |
| Polio (IPV) | 6-18 months | 3 | 6 months |
| Polio (IPV) | 4-6 years | 4 | 4 years |
| MMR | 12-15 months | 1 | 12 months |
| MMR | 4-6 years | 2 | 4 years |
| Varicella | 12-15 months | 1 | 12 months |
| Varicella | 4-6 years | 2 | 4 years |
| Hepatitis A | 12-23 months | 1 | 12 months |
| Hepatitis A | 18-23 months | 2 | 18 months |

*Age required if minimum interval has passed



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