

## The Commonwealth of Massachusetts

Executive Office of Health and Human Services
Department of Public Health
Bureau of Infectious Disease and Laboratory Sciences
305 South Street, Jamaica Plain, MA 02130

CHARLES D. BAKER Governor

KARYN E. POLITO Lieutenant Governor Immunization Division Tel: (617) 983-6800 Fax: (617) 983-6840 www.mass.gov/dph/imm MARYLOU SUDDERS Secretary

MARGRET R. COOKE Commissioner

> Tel: 617-624-6000 www.mass.gov/dph

**To:** Camp Directors

From: Pejman Talebian, MA, MPH, Director, Immunization Division

Date: March 2022

Subject: Required Immunizations for Children Attending Camp and Camp Staff

Vaccination is critically important to control the spread of vaccine-preventable disease. In 2017, a single case of mumps at a summer camp in Massachusetts resulted in isolation of ill individuals, vaccination of those without evidence of two doses of MMR vaccine at several camps, and quarantine of those who did not have evidence of immunity to mumps and who could not get vaccinated. International staff and campers with missing or incomplete vaccination records made rapid implementation of disease control measures very challenging.

# **Required Vaccines:**

Minimum Standards for Recreational Camps for Children, 105 CMR 430.152, has been updated. Immunization requirements for children attending camp follow the Massachusetts school immunization requirements, as outlined in the Massachusetts School Immunization Requirements table, which reflects the newest requirement: meningococcal vaccine (MenACWY) for students entering grades 7 and 11 (on or after the 16<sup>th</sup> birthday, in the latter case; see the tables that follow for further details). Children should meet the immunization requirements for the grade they will enter in the school year following their camp session. Children attending camp who are not yet school aged should follow the Childcare/Preschool immunization requirements included on the School Immunization Requirements table.

Campers, staff and volunteers who are 18 years of age and older should follow the immunizations outlined in the document, <u>Adult Occupational Immunizations</u>.

The following page includes portions of the Massachusetts School Immunization Requirements table and Adult Occupational Immunizations table relevant for camps.

If you have any questions about vaccines, immunization recommendations, or suspect or confirmed cases of disease, please contact the MDPH Immunization Program at 888-658-2850 or 617-983-6800. Address questions about enforcement with your legal counsel; enforcement of requirements is at the local level.

### **Grades Kindergarten – 6**

In ungraded classrooms, Kindergarten requirements apply to all students ≥5 years.

DTaP	<b>5 doses;</b> 4 doses are acceptable if the 4 <sup>th</sup> dose is given on or after the 4 <sup>th</sup> birthday. DT is only acceptable with a letter stating a medical contraindication to DTaP.
Polio	<b>4 doses;</b> $4^{th}$ dose must be given on or after the $4^{th}$ birthday and $\ge 6$ months after the previous dose, or a $5^{th}$ dose is required. 3 doses are acceptable if the $3^{rd}$ dose is given on or after the $4^{th}$ birthday and $\ge 6$ months after the previous dose.
Hepatitis B	3 doses; laboratory evidence of immunity acceptable
MMR	<b>2 doses;</b> first dose must be given on or after the 1 <sup>st</sup> birthday and the 2 <sup>nd</sup> dose must be given ≥28 days after dose 1; laboratory evidence of immunity acceptable
Varicella	<b>2 doses;</b> first dose must be given on or after the 1 <sup>st</sup> birthday and 2 <sup>nd</sup> dose must be given ≥28 days after dose 1; a reliable history of chickenpox* or laboratory evidence of immunity acceptable

#### **Grades 7 – 12**

In ungraded classrooms, Grade 7 requirements apply to all students ≥12 years.

Tdap	<b>1 dose;</b> and history of DTaP primary series or age appropriate catch-up vaccination. Tdap given at ≥7 years may be counted, but a dose at age 11-12 is recommended if Tdap was given earlier as part of a catch-up schedule. Td or Tdap should be given if it has been ≥10 years since Tdap.
Polio	<b>4 doses;</b> 4 <sup>th</sup> dose must be given on or after the 4 <sup>th</sup> birthday and ≥6 months after the previous dose, or a 5 <sup>th</sup> dose is required. 3 doses are acceptable if the 3 <sup>rd</sup> dose is given on or after the 4 <sup>th</sup> birthday and ≥6 months after the previous dose.
Hepatitis B	<b>3 doses;</b> laboratory evidence of immunity acceptable. 2 doses of Heplisav-B given on or after 18 years of age are acceptable.
MMR	<b>2 doses;</b> first dose must be given on or after the 1 <sup>st</sup> birthday and the 2 <sup>nd</sup> dose must be given ≥28 days after first dose; laboratory evidence of immunity acceptable
Varicella	<b>2 doses;</b> first dose must be given on or after the 1 <sup>st</sup> birthday and 2 <sup>nd</sup> dose must be given ≥28 days after first dose; a reliable history of chickenpox* or laboratory evidence of immunity acceptable
MenACWY (formerly MCV4)	Grades 7: 1 dose; MenACWY required.  Grades 11: 2 doses; 2 <sup>nd</sup> dose MenACWY must be given on or after the 16th birthday and ≥ 8 weeks after the previous dose. 1 dose is acceptable if it was given on or after the 16th birthday. Meningococcal B vaccine is not required and does not meet this requirement.

# Campers, staff and volunteers 18 years of age and older

MMR	<b>2 doses,</b> anyone born in or after 1957. 1 dose, anyone born before 1957 outside the U.S. Anyone born in the U.S. before 1957 is considered immune. Laboratory evidence of immunity to measles, mumps and rubella is acceptable
Varicella	<b>2 doses,</b> anyone born in or after 1980 in the U.S., and anyone born outside the U.S. Anyone born before 1980 in the U.S. is considered immune. A reliable history of chickenpox or laboratory evidence of immunity is acceptable
Tdap	<b>1 dose</b> ; and history of DTaP primary series or age appropriate catch-up vaccination. Tdap given at ≥7 years may be counted, but a dose at age 11-12 is recommended if Tdap was given earlier as part of a catch- up schedule; Td or Tdap should be given if it has been ≥ 10 years since Tdap
Hepatitis B	3 doses (or 2 doses of Heplisav-B) for staff whose responsibilities include first aid; laboratory evidence of immunity is acceptable

<sup>\*</sup>A reliable history of chickenpox includes a diagnosis of chickenpox, or interpretation of parent/guardian description of chickenpox, by a physician, nurse practitioner, physician assistant or designee.