



ESCONDIDO UNION HIGH SCHOOL DISTRICT

Dear Parent/Guardian:

Recently, there were changes in the laws regarding immunizations for children attending school. All incoming 9th grade students or students transferring to another school, including within the Escondido Union High School District, are required to provide proof of the vaccinations noted below for the 2019-2020 school year. Changes to the law are shown below. (Please see footnotes for immunization abbreviations)¹

Previous Requirements	New 2019-2020 Requirements
<ul style="list-style-type: none">• 4 IPV or OPV• 3 or 4 (DTP, DTaP, DT, or Td)²• 1 Tdap• 2 MMR	<ul style="list-style-type: none">• 4 IPV or OPV• 3 or 4 DTP, DTaP, DT, or Td²• 1 Tdap• 2 MMR• <u>3 Hep B (New)</u>• <u>2 Varicella (New)</u>

Students Who Have Received All Vaccinations with New Requirements

If your student has already received all the vaccinations within the new requirements, please bring the **original** immunization record to the school during registration and their school records will be updated. All immunization verification **must** be received by the first day of school in order for your child to attend.

Students Who Have Not Received All Vaccinations with New Requirements

If your student has not received all of the listed vaccines within the new requirements, please schedule an appointment immediately with your child's primary care provider, or visit a local vaccination clinic, to complete the required vaccinations. Vaccines are available at local health departments, minute clinics, and other clinics. Additional information, helpful links and resources are available through the following link: <https://bit.ly/2Tgpjh2>

Thank you,

The EUHSD Health Services Team

School Health office phone numbers:

SPHS: 760-291-6080 | EHS 760-291-4080 | OGHS 760-291-5080 | DLA 760-291-2581

¹ **Vaccine abbreviations:** Polio (**IPV or OPV**), Diptheria, tetanus, and pertussis (**DTP, DTaP, DT, or Td**), Diptheria, tetanus, & Pertussis booster (**TDap**), Measles, mumps, and Rubella (**MMR**), Hepatitis B (**Hep B**), Chicken pox (**Varicella, VZV, or VAR**)

² (DTaP, DTP), Four doses meet requirement if one dose was given on/after 4th birthday; three doses meet requirement if one dose given on/after 7th birthday. **TDap is a separate requirement.**