Cycle: 3

County: WASHINGTON

School Medical Immunization

GREENLAND ELEMENTARY SCHOOL

LEA: 7204027

2023 - 2024

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	is		Se	ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	55	47	49	49	48	48	NA	NA	51	45	0	1	0	1

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	7	46	2	NA

School Medical Immunization

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County: WASHINGTON

GREENLAND ELEMENTARY SCHOOL

LEA: 7204027

2023 - 2024

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	67	62	64	62	62	62	NA	NA	64	60	0	1	2	3

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	4	63	0	NA

School Medical Immunization

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GREENLAND ELEMENTARY SCHOOL

LEA: 7204027

2023 - 2024

				Section	n I - Numb	er of Studen	nts Meeting	Requirement	S		Se	ection II	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	46	44	45	45	44	43	0	NA	NA	43	0	0	1	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	2	44	0	NA

School Medical Immunization

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GREENLAND ELEMENTARY SCHOOL

LEA: 7204027

2023 - 2024

				Section	n I - Numb	er of Studen	nts Meeting	Requirement	S		Se	ection II	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	53	47	48	48	47	47	0	NA	NA	46	0	2	2	4

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	3	50	0	NA

School Medical Immunization

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GREENLAND ELEMENTARY SCHOOL

LEA: 7204027

2023 - 2024

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	37	37	37	36	37	36	0	NA	NA	36	0	0	1	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	37	0	NA

School Medical Immunization

Cycle: 3

County: WASHINGTON

GREENLAND HIGH SCHOOL

LEA: 7204028

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemption			
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	59	56	56	57	55	54	30	25	NA	29	0	0	2	2
	,		2			Had Disease		2 Doses*				2	·	

Had Disease	2 Doses*
0	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	28	31	0	0

School Medical Immunization

Cycle: 3

County: WASHINGTON

GREENLAND HIGH SCHOOL

LEA: 7204028

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K							L	M	N	0	
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
10	72	69	69	68	69	67	52	30	NA	48	0	0	0	0
		-				Had Disease		2 Doses*						-

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	23	48	1	0

School Medical Immunization

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County: WASHINGTON

GREENLAND HIGH SCHOOL

LEA: 7204028

				Section		Se	ection II -	- Exemp	tions					
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
11	69	64	62	62	63	63	54	0	NA	50	0	0	2	2
			0	·	•	Had		2 Doses*		-			·	

Had Disease	2 Doses*
0	11

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
11	15	52	2	0

School Medical Immunization

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GREENLAND HIGH SCHOOL

LEA: 7204028

2023 - 2024

				Section		Se	ection II -	Exemp	tions					
Α	В	С	C D E F G H I J K							L	M	N	0	
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
12	42	41	40	40	40	39	40	1	NA	38	0	0	0	0
	•	•	7			Had		2 Doses*		•				

Disease

0
17

ars (as of September 1st each year) with a minimum interval of 8 weeks since

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
12	4	38	0	1

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

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County: WASHINGTON

GREENLAND MIDDLE SCHOOL

LEA: 7204029

2023 - 2024

			Section I - Number of Students Meeting Requirements										Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	M	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	55	51	52	53	52	52	0	NA	NA	43	0	0	2	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	10	45	0	NA

School Medical Immunization

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GREENLAND MIDDLE SCHOOL

LEA: 7204029

2023 - 2024

			Section I - Number of Students Meeting Requirements										Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	54	53	53	52	53	53	9	NA	NA	8	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	45	8	1	NA

School Medical Immunization

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GREENLAND MIDDLE SCHOOL

LEA: 7204029

2023 - 2024

			Section I - Number of Students Meeting Requirements							Section II - Exemptions				
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	55	52	54	54	54	53	12	10	NA	9	0	0	1	1

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	45	10	0	0

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			Section I - Number of Students Meeting Requirements							Section II - Exemptions				
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
08	51	51	51	50	48	47	11	11	NA	10	2	0	0	2
		•	2.	•		Had Disease		2 Doses*				2.		

Had Disease	2 Doses*
0	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended		
	Р	Q	R	s		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses		
08	39	12	0	0		