Cycle: 3

LEA: 6040702 School Medical Immunization

MAUMELLE CHARTER ELEMENTARY 2024 - 2025 County: PULASKI

			Section I - Number of Students Meeting Requirements										Exemp	tions
Α	В	С	D	E	F	G	Н	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 N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	133	128	128	129	126	126	NA	NA	128	126	0	2	4	6

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	1	132	0	NA

LEA: 6040702 School Medical Immunization Cycle: 3

MAUMELLE CHARTER ELEMENTARY 2024 - 2025 County: PULASKI

				Sectio		Se	ection II -	- Exemp	tions					
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	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	173	169	169	168	166	166	NA	NA	169	165	0	2	5	7

	Partial Records	Compliant	Non-Compliant	Recommended
	P	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	1	172	0	NA

LEA: 6040702 School Medical Immunization Cycle: 3

MAUMELLE CHARTER ELEMENTARY 2024 - 2025 County: PULASKI

				Section	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	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	153	148	148	149	148	148	0	NA	NA	148	0	3	2	5

^{*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	0	153	0	NA

Cycle: 3

LEA: 6040702 School Medical Immunization

MAUMELLE CHARTER ELEMENTARY 2024 - 2025 County: PULASKI

				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
03	154	150	148	150	148	148	0	NA	NA	147	0	3	4	7

^{*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	0	154	0	NA		

Cycle: 3

LEA: 6040703 School Medical Immunization

MAUMELLE CHARTER HIGH SCHOOL 2024 - 2025 County: PULASKI

				Section	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	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
08	136	135	135	135	133	131	131	133	NA	128	1	2	2	5
	•		2	·	•	Had Disease		2 Doses*				1		

Had Disease 0 0

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	3	133	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-

Cycle: 3

LEA: 6040703 School Medical Immunization

MAUMELLE CHARTER HIGH SCHOOL 2024 - 2025 County: PULASKI

				Section	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	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
09	106	105	105	104	105	105	102	101	NA	100	0	2	1	3
	•	•		·	•	Had Disease		2 Doses*						

Had Disease 0 0

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	3	103	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-

LEA: 6040703 School Medical Immunization

MAUMELLE CHARTER HIGH SCHOOL 2024 - 2025 County: PULASKI

Cycle: 3

				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	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
10	117	116	117	117	116	115	114	99	NA	114	2	1	0	3
	•		2	·	•	Had Disease		2 Doses*				1		

Had Disease 0 8

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	0	117	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-

Cycle: 3

LEA: 6040703 School Medical Immunization

MAUMELLE CHARTER HIGH SCHOOL 2024 - 2025 County: PULASKI

				Section	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	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
11	70	69	69	69	69	69	70	1	NA	69	0	0	0	0
	•		**	v	•	Had Disease		2 Doses*				I-		

Had Disease 2 Doses*

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	1	69	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-

Cycle: 3

LEA: 6040703 School Medical Immunization

MAUMELLE CHARTER HIGH SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exer			
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		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	73	72	72	72	72	72	72	0	NA	72	0	1	0	1
	Y	•		·	•	Had Disease		2 Doses*						

 Had Disease
 2 Doses*

 0
 71

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	0	73	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-

Cycle: 3

LEA: 6040705 School Medical Immunization

MAUMELLE CHARTER MIDDLE SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	nts Meeting	Requiremen	ts		Se	ection II -	- Exemp	tions
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	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	174	170	169	170	168	167	1	NA	NA	167	0	4	0	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
04	3	171	0	NA

LEA: 6040705 School Medical Immunization Cycle: 3

MAUMELLE CHARTER MIDDLE SCHOOL

2024 - 2025

County: PULASKI

				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	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
05	158	149	150	151	146	147	26	NA	NA	143	0	3	4	7

^{*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	5	150	3	NA

LEA: 6040705 School Medical Immunization Cycle: 3

County: PULASKI

MAUMELLE CHARTER MIDDLE SCHOOL 2024 - 2025

				Section	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	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 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	175	172	173	173	169	168	152	NA	NA	148	2	0	3	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
06	22	152	0	NA

Cycle: 3

LEA: 6040705 School Medical Immunization

MAUMELLE CHARTER MIDDLE SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	is		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							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
07	155	151	153	153	152	152	150	146	NA	144	0	3	1	4

	Partial Records	Compliant	Non-Compliant	Recommended		
	Р	Q	R	s		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses		
07	7	148	0	0		

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	on I - Numb	er of Studen	ts Meeting	Requiremen	ts		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 N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	19	19	19	19	19	19	NA	NA	19	19	0	0	0	0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	0	19	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II	- Exemp	tions
Α	В	С	D E F G H I J K									М	N	0
Grade	Total Enrolled	DTaP 4 Doses	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	18	16	16	18	16	16	NA	NA	17	16	0	1	1	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	18	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requiremen	ts		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	17	17	17	17	17	17	0	NA	NA	17	0	1	0	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	0	18	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K								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
03	20	19	19	19	19	19	0	NA	NA	19	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
03	0	20	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K								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	15	14	15	15	15	15	0	NA	NA	14	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
04	1	14	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requiremen	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K									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
05	21	21	21	21	21	21	3	NA	NA	20	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
05	1	20	0	NA

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K									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	22	22	2 22 22 22 21 NA NA 21									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		
06	0	22	0	NA		

Cycle: 3

LEA: 6040704 School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	S		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K								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
07	16	16	16	16	16	16	16	16	NA	16	0	0	0	0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	0	16	0	0

Cycle: 3

School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				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	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
08	7	7	7	7	7	7	7	7	NA	7	0	0	0	0
	•			·		Had Disease		2 Doses*						

Had 2 Dos Disease 0

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	0	7	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-

Cycle: 3

School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemp			
Α	В	С	D	E	F	G	Н	I	J	Κ	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
09	19	19	19	19	19	19	19	19	NA	19	0	0	0	0
	•		*	<u> </u>	•	Had Disease		2 Doses*						

0

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	0	19	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-

Cycle: 3

School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Se	Exemp	xemptions		
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	
10	12	12	12	12	12	12	12	12	NA	12	0	0	0	0	
	•		-2	·	*	Had Disease		2 Doses*							

Had Disease 0 0

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	0	12	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-

School Medical Immunization

SCOTT CHARTER SCHOOL 2024 - 2025 **County: PULASKI**

		Section I - Number of Students Meeting Requirements										Section II - Exemptions			
Α	В	С	C D E F G H I J K							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	
11	9	9	9	9	9	9	9	0	NA	9	0	0	0	0	
	•			•		Had		2 Doses*							

Disease 0

8

Cycle: 3

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	0	9	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-

Cycle: 3

School Medical Immunization

LEA: 6040704

SCOTT CHARTER SCHOOL 2024 - 2025 County: PULASKI

		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	
12	10	10	10	10	10	10	10	0	NA	10	0	0	1	1	
	•		2	·	•	Had Disease		2 Doses*				1	·		

Had 2 Dos 0 9

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	0	11	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-