

6.37 IMMUNIZATION

In order to safeguard the school community from the spread of certain communicable diseases and in recognition that prevention is a means of combating the spread of disease, the Board of Education requires all students to be immunized against poliomyelitis, rubeola, diphtheria, rubella (German measles), pertussis, tetanus, mumps, or be in the process of being so immunized. Within fourteen (14) days after his/her yearly entry into the Franklin Local Schools, each student shall present written evidence that he/she has received, or is in the process of receiving, the required immunizations, or such student shall be subject to exclusion from school.

Moreover, no student who begins kindergarten during or after the school year beginning in 1999 shall be permitted to remain in school for more than fourteen (14) days unless the student presents written evidence satisfactory to the person in charge of admission that the student has been immunized by a department of health-approved method of immunization against hepatitis B or is in the process of being so immunized.

“In the process of being so immunized” means the student has been immunized against mumps, rubeola and rubella, and if the student has not been immunized against poliomyelitis, diphtheria, pertussis, tetanus, and hepatitis B, the student received at least the first dose of immunization sequence, and presents written evidence to the student’s building principal of each subsequent dose required to obtain immunization at the intervals prescribed by the director of health. Any student previously admitted under the “in process of being so immunized” provision and who has not complied with the immunization intervals prescribed by the director of health shall be excluded from school on the fifteenth day of the following school year. Any student so excluded shall be readmitted upon showing evidence to the student’s building principal of progress on the director of health’s interval schedule.

Exceptions

- A. A student who has had natural rubeola or natural mumps is not required to be immunized against rubeola or mumps, provided a signed statement to that effect from the student’s parent and physician is provided to the Superintendent or the building principal.
- B. The Superintendent is given the authority to exempt a student from immunization if a physician certifies in writing that immunization from a particular disease is medically contraindicated. The Superintendent may prohibit the student from attending school in the event of an outbreak of a vaccine-preventable disease, however, if the immunization would have been for mumps, poliomyelitis, rubeola, rubella, diphtheria, pertussis, tetanus, and hepatitis B.
- C. A student may also be exempted from immunization if a parent or guardian objects for good cause, including religious conviction. The Board shall allow a student to attend school who has not been immunized because of such an objection, but can be excluded in the event of an outbreak of a disease preventable by vaccine.

D. The Board believes that immunization is the primary responsibility of the parent(s). However, for those students who have not been immunized and do not have the means to secure immunizations, such immunizations shall be provided at public expense.

Franklin Local School District

360 Cedar Street

P. O. Box 428

Duncan Falls, OH 43734

Phone: (740) 674-5203

Fax: (740) 674-5214

Date: _____

Dear Parent/Guardian of:

Your child's immunization record indicates that he/she is not in compliance with Ohio State Law. Ohio law mandates that certain immunizations are required for school. A noncompliant student who is not exempted from immunizations under Ohio law will be excluded from school. In order to avoid this, and to ensure your child's continued good health, please provide proof of the immunizations which are checked below:

_____ DPT

_____ Polio

_____ MMR

_____ Hepatitis B

Please provide the information to the school no later than _____, 20___. Noncompliant students who are not exempted from immunizations under Ohio law will be excluded from school beginning _____, 20___, if proof is not received. Your cooperation will help ensure a healthy school.

If you are unable to provide access to immunizations for your child, please contact me immediately. Your physician or local health department can provide the above immunizations. No one will be denied services due to an inability to pay.

Sincerely,
School Nurse
Principal

EXCLUSION GUIDE FOR COMMUNICABLE DISEASES

DISEASE	PERIOD OF EXCLUSION
----------------	----------------------------

- | | |
|---|--|
| 1. CHICKEN POX | Minimum 10 days without doctor's release –
7 days with doctor's written release |
| 2. HEPATITIS (Infectious) | Hepatitis A – Doctor's written release
required |
| 3. IMPETIGO | Until lesions are dry and treatment started |
| 4. MEASLES (3 day)
Rubella or German Measles | Until recovery is complete – Minimum
5 days after rash appears |
| 5. MEASLES (9 day) Rubeola | Until recovery is complete – Minimum
10 days after rash appears |
| 6. MONONUCLEOSIS | Return to school on advice of physician |

- | | |
|-------------------|--|
| 7. MUMPS | Until swelling is gone |
| 8. PEDICULOSIS | Until all lice and nits are gone |
| 9. PINK EYE | 24 hours after the start of treatment with antibiotics until no drainage/discharge |
| 10. RING WORM | 24 hours after treatment or medication has started |
| 11. SCABIES | Until treated |
| 12. SCARLET FEVER | 24 hours after medication is started and temperature is down |
| 13. STREP THROAT | 24 hours after medication is started and temperature is down |

The foregoing are guidelines, and actual exclusion times are at the discretion of the physician, school nurse, or principal.