# CALICO ROCK SCHOOL DISTRICT **IMMUNIZATION REPORT**

2020-2021

# **ELEMENTARY SCHOOL**

Number of Students	Number of Students with Exemptions	Percentage of Students with Exemptions	Number of Students
194	2	1%	0

ts Non-Compliant Percentage of Students Non-Compliant

0%

.

# **HIGH SCHOOL**

Number of Students	Number of Students with Exemptions	Percentage of Students with Exemptions	Number of Students Non-Compliant	Percentage of Students Non-Compliant
175	2	1%	0	0%

#### SCHOOL MEDICAL IMMUNIZATION REPORT

# SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

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LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

**County: IZARD** 

	Section I - Number of Students Meeting Requirements											Section II - Exemptions				
Α	В	С	D	E	F	G	H	I	J	К	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		
ĸ	29	29	29	29	28	28	NA	NA	29	28	0	0	0	0		
	•		2	:		Had						·		<u>.</u>		

Had Disease 0

	Partial Records	Compliant	Non-Compliant	Recommended		
	Р	Q	R	S		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only		
к	1	28	0	NA		

# SCHOOL MEDICAL IMMUNIZATION REPORT

SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

					Section II - Exemptions									
Α	В	С	D	E	F	G	Н	1	J	К	L	М	Ν	0
Grade	Total Enrolled		IPV/OPV 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	29	29	29	29	29	29	NA	NA	29	29	0	0	0	0
	•					Had								

пас Disease 0

	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	29	0	NA

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#### SCHOOL MEDICAL IMMUNIZATION REPORT

# SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	H	1	J	к	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
02	25	25	25	25	25	25	0	NA	NA	25	0	0	0	0
	·					Had Disease			·			<u></u>		·

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
02	0	25	0	NA

# SCHOOL MEDICAL IMMUNIZATION REPORT

SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio		Section II - Exemptions								
A	В	С	D	Е	F	G	H	I	J	К	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 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	25	24	24	24	24	24	0	NA	NA	24	0	0	1	1
		-	2			Had				•		· ···	·	·

Disease

\*1 Dose required if student is older than 11 years on September 1st

[	Partial Records	Compliant	Non-Compliant	Recommended
	P	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	25	0	NA

# SCHOOL MEDICAL IMMUNIZATION REPORT

SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

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# CYCLE: 3

County: IZARD

				Sectio		Section II - Exemptions								
Α	В	B C D E F G H I J K							L	М	N	0		
Grade	Total Enrolled		IPV/OPV 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	33	32	33	33	33	33	0	NA	NA	31	0	0	0	0
			2			Had Disease			-	• • • • • • • • • • • • • • • • • • •			*	

\*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	2	31	0	NA

# SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Section I - Number of Students Meeting Requirements Section II - Exemptions						tions				
Α	В	С	D	E	F	G	H	l	J	ĸ	L	M	N	0
Grade	Total Enrolled		IPV/OPV 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	36	35	35	35	35	35	3	NA	NA	28	- 0	0	1	1
	÷		<b></b>	<u> </u>	` `	Had	ĺ		<u></u>					

Had Disease 0

\*1 Dose required if student is older than 11 years on September 1st

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	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	7	29	0	NA

# SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK ELEMENTARY SCHOOL

LEA: 3301001

SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

		Section I - Number of Students Meeting Requirements Section II - Exemption							tions					
Α	B	С	D	E	F	G	H	1	J	ĸ	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
06	17	17	17	17	17	17	13	NA	NA	13	0	0	0	0
	÷		н			Had	i						•	

наа Disease 0

\*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	P	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	4	13	0	NA

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#### SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio	on I - Numb	er of Studen	ts Meeting	Requiremen	ts		Se	ection II	- Exemp	tions
Α	B C D E F G H I J K								к	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
07	31	30	31	31	31	31	30	28	NA	28	0	0	0	0
L	ù <del></del>	•		<u>.</u>	ù	Had				•				

Disease 0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	3	28	0	0

#### SCHOOL MEDICAL IMMUNIZATION REPORT

# SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio	on I - Numb	er of Studen	its Meeting	Requirement	ts		Section II - Exemptions				
Α	В	С	D	E	F	G	Н	1	J	к	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	
08	25	24	25	25	25	25	22	22	NA	22	0	0	1	1	
	·		n	•	•	Had Disease		2 Doses*				4	·		

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-

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	2	23	0	0

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#### SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions				
Α	В	С	D	E	F	G	Н	1	J	к	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	
09	32	31	31	31	31	30	31	30	NA	30	0	0	1	1	
	<u></u>		• <u> </u>	-	· · · · · · · · · · · · · · · · · · ·	Had Disease		2 Doses*					÷		

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-

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	1	31	0	2

# SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

				Sectio	on I - Numb	er of Studen	its Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	К	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	ł •	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	26	26	26	26	26	26	26	25	NA	26	0	0	0	0
	•		<u>n</u>			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
	P ·	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	0	26	0	4

#### SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

	Section I - Number of Students Meeting Requirements									Section II - Exemptions				
Α	В	С	D	E	F	G	Н	. 1	J	К	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	33	31	33	33	33	33	33	0	NA	31	0	0	0	0
	·		2	<u>.</u>	·	Had Disease		2 Doses*		•		<u> </u>		· · · · · · · · · · · · · · · · · · ·
						0		25	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-

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	2	31	0	4		

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#### SCHOOL MEDICAL IMMUNIZATION REPORT

#### SCHOOL: CALICO ROCK HIGH SCHOOL

LEA: 3301002

# SCHOOL YEAR: 2020 - 2021

# CYCLE: 3

County: IZARD

		Section I - Number of Students Meeting Requirements										Section II - Exemptions				
Α	В	С	D	E	F	G	н	l	J	ĸ	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		
12	28	28	28	28	28	28	28	2	NA	28	0	0	0	0		
	·		<u></u>	·	·	Had Disease		2 Doses*				<u>-</u>	·			
						0		20	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-

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	28	0	5		