## ILLINOIS REQUIREMENTS & RECOMMENDATIONS

REQUIRED EXAMS	Kindergarten	2 <sup>nd</sup> grade	6 <sup>th</sup> grade	9 <sup>th</sup> grade	JH or HS Student Participating in school- related sport
School Physical Exam	☆		☆	☆	
Sports Physical Exam					$\Rightarrow$
Oral Health Exam	☆	☆	☆	☆	E2 93 17 E KY m
School Eye Exam	$\Rightarrow$				

As of June 3, 2020, no changes have been made to these requirements. As we approach the 2020-2021 school year the Illinois Department of Public Health may issue additions or changes to the requirements. It will be beneficial for you to check with your healthcare provider or health department regarding possible changes.

Illinois does REQUIRE an eye exam for any student that has not previously attended an Illinois School.

## REQUIRED IMMUNIZATIONS

	Required or Recommended	Immunization	More familiar immunization names
Kindergarten	Required	MMR & Varicella	Measles, Mumps, Rubella, Chicken Pox
	Required	DTAP & IPV	Tetanus, Diphtheria, Pertussis Polio
	Recommended	Prevnar 13	Pneumococcal
	Recommended	Hepatitis A(2 shot series)	Hepatitis
6 <sup>th</sup> grade	Recommended if he or she hasn't received it yet	Hepatitis A (2 shot series)	Hepatitis
	Required	TDAP	Tetanus, Diphtheria, Pertussis
	Required	Menactra	Meningitis
	Recommended Boys & Girls beginning @ age 11	Gardasil	HPV
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9 <sup>th</sup> grade	REQUIRED if he or she hasn't received it yet	TDAP	Tetanus, Diphtheria, Pertussis
	Recommended if he or she hasn't received it yet	Menactra	Meningitis
	Recommended Hepatitis A if he or she hasn't received it yet (2 shot series)		Hepatitis
	Recommended (Boys & Girls) if he or she hasn't received it yet	Gardasil	HPV
12 <sup>th</sup> grade	REQUIRED  2 doses required, OR 1 dose required if the first dose was given after he/she's 16th birthday	Menactra	Meningitis
ADDITIONAL REQUIREMENTS	5 3 1 1 1 5		
K-12th Grades	REQUIRED  Must show proof from the Dr. of either 2 doses of  Varicella or proof of history of chicken pox	Varicella	Chicken Pox
K-12 <sup>th</sup> Grades	REQUIRED  Must show proof of 2 doses of MMR, with the first dose received after 1st birthday.	MMR	Measles, Mumps, Rubella
<sup>7th</sup> , 8 <sup>th</sup> , 9 <sup>th</sup> , 10 <sup>th</sup> , 11 <sup>th</sup> & 12 <sup>th</sup> grades	REQUIRED  Must show proof of T-Dap given 1x during 6th thru  12th grade	TDAP	Tetanus, Diphtheria, Pertussis
6th, 7th, 8th, 9th, 10th, 11th & 12th	REQUIRED	Hepatitis B (3 doses administered at recommended intervals)	Hepatitis

If your child is not current on immunizations additional immunizations may be required.

Hancock County Health Department Home Health Agency

217-357-2171

Call us for additional information, pricing & Immunization availability.

Hancock County Dental Center **217-357-6984** 

Call us to make an appointment.