## Indiana 2023-2024 Required and Recommended School Immunizations (Proposed)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Required</th>
<th>Recommended</th>
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</thead>
</table>
| **Pre-K** | 3 Hepatitis B  
4 DTaP (Diphtheria, Tetanus & Pertussis)  
3 Polio | 1 Varicella (Chickenpox)  
1 MMR (Measles, Mumps & Rubella)  
2 Hepatitis A | Annual influenza |
| **K-5th grade** | 3 Hepatitis B  
5 DTaP  
4 Polio | 2 Varicella  
2 MMR  
2 Hepatitis A | Annual influenza  
COVID-19 |
| **6th-11th grade** | 3 Hepatitis B  
5 DTaP  
4 Polio  
2 Varicella | 2 MMR  
2 Hepatitis A  
1 MCV4 (Meningococcal)  
1 Tdap (Tetanus, Diphtheria & Pertussis) | Annual influenza  
2/3 HPV (Human papillomavirus)  
COVID-19 |
| **12th grade** | 3 Hepatitis B  
5 DTaP  
4 Polio  
2 Varicella | 2 MMR  
2 Hepatitis A  
2 MCV4  
1 Tdap | Annual influenza  
2/3 HPV  
2 MenB (Meningococcal)  
COVID-19 |

**HepB:** The minimum age for the 3rd dose of Hepatitis B is 24 weeks of age.

**DTaP:** 4 doses of DTaP/DTP/DT are acceptable if the 4th dose was administered on or after the 4th birthday.

**Polio**<sup>+</sup>: 3 doses of Polio are acceptable for all grade levels if the 3rd dose was given on or after the 4th birthday and at least 6 months after the previous dose.

<sup>+</sup>For students in grades K-10, the final dose must be administered on or after the 4th birthday and be administered at least 6 months after the previous dose.

**Varicella:** Physician documentation of disease history, including month and year, is proof of immunity for children entering preschool through 12th grade. Parent report of disease history is not acceptable.

**Tdap:** There is no minimum interval from the last Td dose.

**MCV4:** Individuals who receive dose 1 on or after the 16th birthday only need 1 dose of MCV4.

**Hepatitis A:** The minimum interval between 1st and 2nd dose is 6 calendar months. 2 doses are required for all grades Pre-K through 12.

**COVID-19:** COVID-19 vaccine is recommended for all students five years of age and older per CDC and FDA’s Emergency Use Authorization. **Review required after FDA full approval.**