

Immunizations Toolkit

for School Leadership



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Section 1: Introduction

Letter to School Leadership

Dear School Leader,

Helping children learn, attend school, socialize, and participate in activities is one of our most important jobs as pediatricians. Keeping children healthy and safe from disease allows all those things to happen. As trusted leaders of your school, you are also trusted leaders in your community. We are asking you to encourage all students and parents/guardians to stay up to date with their routine and required vaccines. Vaccines are safe and effective in protecting individuals and populations against infectious diseases. Research shows that parents whose schools encouraged vaccinations are more likely to report that their child has been vaccinated.

Our state recently recovered from a measles outbreak that resulted in children being hospitalized and missing school. Many others had to be excluded from school for 21 days or more because they did not have documented immunity or their MMR (measles-mumps-rubella) vaccine on file. Vaccines helped stop this outbreak and are essential for preventing future outbreaks. Fewer outbreaks mean less school disruption and better health outcomes for your school communities.

Please ensure that your school tracks and enforces the state's minimum immunization requirements. Resources for your school communities are available on the Illinois Chapter of the American Academy of Pediatrics ([ICAAP website here](#))¹. Providing factual information about vaccines to students and their families is more important now than ever.

The nearly 2,000 pediatricians throughout Illinois who comprise ICAAP are here to support you in any way possible. Please contact info@illinoisAAP.com if you have any questions or are simply interested in connecting with us. Thank you.

Sincerely,

Michelle M. Barnes

Michelle M. Barnes, MD, FAAP
President, Illinois Chapter of the American Academy of Pediatrics



About This Toolkit

This toolkit was designed to aid school and child care center leaders, including principals, superintendents, and school health staff, in developing effective tactics for increasing vaccine confidence, maximizing vaccine compliance, and reducing vaccine exemptions in your school communities. This is not intended to replace state requirements, but to act as a supporting resource to help drive efficient and equitable vaccine uptake throughout the state.

We hope these materials will help support you in all the amazing work you do to make Illinois schools a safe place for learning.

This toolkit was created in collaboration with the Illinois Chapter of the American Academy of Pediatrics, Illinois Department of Public Health, Chicago Department of Public Health, Illinois State Board of Education, Illinois Association of School Nurses, and Chicago Public Schools. Funding for this project was made possible by the Office of Disease Control, through the Illinois Department of Public Health.*

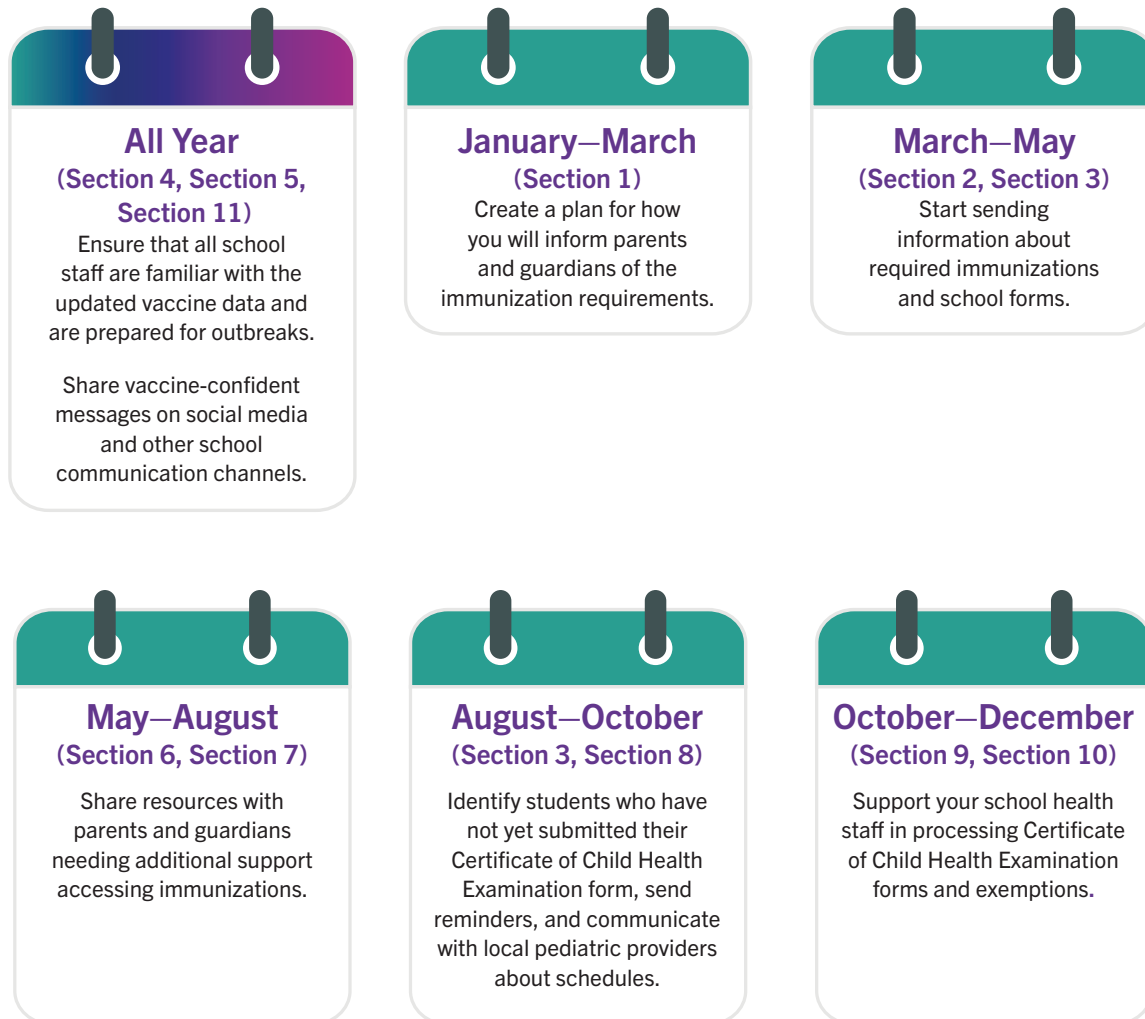
Timeline for Using These Materials

This toolkit is designed in chronological order for ease of use. The best time to start informing students and their parents or guardians about school immunization requirements is in the spring, before the new school year begins.

Throughout this toolkit, you will find resources for conducting outreach to parents and guardians; resources on communicating the requirements around the Certificate of Child Health Examination form, including targeted communication for new families, un- or under-insured families, and students behind on their requirements.

You will also find information on supporting your school health staff and building relationships with pediatric healthcare providers in your community.

Here is an example timeline you can follow with the resources included in this toolkit:



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Chicago, IL

Academic Center/
Pediatric Department Liaison
Benjamin Van Voorhees, MD, MPH
University of Illinois at Chicago
Chicago, IL

Chief Executive Officer

Jennie A. Pinkwater, MNM
M: 312/497-1669
P: 312/733-1026 X 7672
jpinkwater@illinoisAAP.org
Illinois Chapter, AAP
310 S. Peoria Suite 304
Chicago, IL 60607

About the Illinois Chapter of the American Academy of Pediatrics

The Illinois Chapter of the American Academy of Pediatrics, also known as ICAAP, is a non-partisan, nonprofit organization made up of 2,000 pediatricians in Illinois. As an organization, we work to build stronger communities by improving health care for children in our state.

About Our Immunization Initiatives

The ICAAP Immunizations Team, in collaboration with local health departments, is committed to helping pediatric professionals, community leaders, school districts, parents and guardians, and all people who support children as they grow in driving better health with recommended vaccinations. Through data-driven outreach campaigns, welcoming and approachable language, and leading education opportunities, we work to build public trust in medicine, dispel misinformation, and ensure that every child has access to life-saving vaccines.

Why Our Work Together Matters

When children are healthy, they spend more time at school, participating in group activities, and building their character. This leads to healthier lifelong habits that contribute to a more stable career, stronger relationships with others, and sets the foundation for their children to become healthy adults.

When we work together to create healthy environments where children can thrive, we are supporting stronger, healthier communities for all.

**Learn more about ICAAP at
IllinoisAAP.org**



Section 2: Understanding School Immunization Requirements



Minimum Immunization Requirements by Grade

Details and information about the state code minimum immunization requirements set by the Illinois Department of Public Health can be found on [IDPH's website here](#)².

A student must submit documentation of the required immunizations to complete enrollment in Illinois schools and child care facilities. These requirements apply to both public and private schools.

Below is an overview of the requirements by grade.



Child Care Facility, Preschool, Early Childhood, & Pre-Kindergarten Programs

Child care and preschool programs will ask parents and caregivers to submit an immunization record, often from the child's pediatrician or clinic. Exclusion rules apply when a child is not in compliance with immunization requirements for childcare, preschool, or early childhood programs until they are up-to-date on vaccinations.

DTP/DTaP (Diphtheria, Tetanus, Pertussis)	4 doses, with 3 doses by their 1st birthday, and 1 additional dose by the child's 2nd birthday.
Hepatitis B (Hep B)*	3 doses, with the 3rd dose administered on or after 24 weeks of age.
Haemophilus Influenzae Type B (Hib)* †	3–4 doses, given at 2 months, 4 months, 6 months (depending on brand of vaccine), and 12–15 months.
Pneumococcal (PCV)* †	4 doses, given at 2 months, 4 months, 6 months, and 12–15 months.
Polio (IPV)	3 doses, 2 by the child's 1st birthday and 1 by their 2nd birthday.
Measles, Mumps, Rubella (MMR)	1 dose, on or after their 1st birthday. Earlier doses will not be counted for school requirements.
Varicella (Chickenpox)	1 dose, on or after their 1st birthday.



Kindergarten (Entry to School)

Before beginning school, typically kindergarten or first grade, children in Illinois need to have documentation of having received the following vaccinations:

DTP/DTaP (Diphtheria, Tetanus, Pertussis)	4 or more doses, the last booster must be given on or after the child's 4th birthday.
Polio (IPV)	4 doses, the 4th dose must be given on or after the child's 4th birthday.
Measles, Mumps, Rubella (MMR)	2 doses, the 1st dose on or after their 1st birthday and the 2nd dose no less than 4 weeks (28 days) later.
Varicella (Chickenpox)	2 doses, the 1st dose on or after their 1st birthday and the 2nd dose no less than 4 weeks (28 days) later.



6th Grade (Middle School)

Once children reach 6th grade (around age 11), they must have documentation of receiving all the previous requirements, as well as the following vaccinations:

Tdap (Tetanus, Diphtheria, Pertussis)	1 dose, on or after their 11th birthday.
Hepatitis B (Hep B)	3 doses
Meningococcal (MCV4)	1 dose, on or after their 11th birthday.



12th Grade (High School Senior)

Students entering 12th grade (around age 16) must have documentation of receiving all the previous requirements, as well as the following vaccination:

Meningococcal (MCV4)	1 dose on or after their 16th birthday.
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* Indicates the immunization is not required for kindergarten entry.

† The total number of doses may differ and must be verified by a doctor if on a catch-up schedule.

Special Notes:

- Kindergarten and 6th grade are critical points for meeting vaccination requirements.
- Proof of vaccinations is required to begin pre-K, kindergarten, 6th grade, 9th grade, and for any transfer students in Illinois.
- Students without proof of vaccination shall be excluded from school until they fulfill the requirements.
- **Catch-up vaccination**^{*3}: If a child has missed any vaccines, they can always catch up!
- The vaccines help prevent serious diseases and help make communities healthier. Parents and caregivers should work with their child's health care provider to ensure they are ready for school.
- A great website to send families and staff to learn more about vaccines is the American Academy of Pediatrics (AAP) website: [HealthyChildren.org](https://www.healthychildren.org)^{*4}.

Recommended but Not Required Immunizations

Health care providers may recommend vaccines to keep students and school communities healthy during the school year that are not listed on the Certificate of Child Health Examination form. While these vaccines are not required for school admission, they are equally important for protecting and strengthening a child's health against preventable diseases, even some types of cancers. Seasonal vaccines, such as flu and COVID-19, also help protect the rest of the school community, so we highly recommend showing your support for these.

Influenza (Flu)	1 dose, every year for everyone aged 6 months and older.
COVID-19	1 dose, every year for everyone aged 6 months and older.
Human papillomavirus (HPV)	Recommended for everyone between ages 9 and 26, ideally at age 9-12 years. Depending on the timing of their 1st dose, they may need 2 or 3 doses.
Hepatitis A (Hep A)	Recommended as a 2 dose series, beginning at 12 months of age.
Meningococcal B (MenB)	Required for some college programs.

Vaccines for Adolescents

Vaccine requirements for school don't stop at kindergarten – there are requirements and recommendations for middle school and high school children as well. Use this handout to help inform parents and guardians of adolescents of the required and recommended immunizations.



Scan to download and
share this handout^{*5}

Vaccines for Adolescents

Vaccine requirements for school don't stop at kindergarten — there are requirements and recommendations for middle and high school aged children as well. These vaccination appointments are a great time for teens to begin learning how to take the lead of their healthcare decisions and build a trusting relationship with medical providers

Encouraging Teens To Participate of Their Health Decisions

It is important to start getting teenagers involved with their health decisions as it builds their confidence and a sense of responsibility in managing their healthcare.

Encourage your teen to begin actively participating in appointments, ask their doctors questions, and enhance their knowledge of the benefits of vaccines.

► **Meningococcal:** At age 11 or 12, your teen should get their first dose of meningococcal vaccine. The vaccines protect against up to 5 bacterial strains: A, B, C, W and Y. A second dose is given to teens who are 16 years old. This vaccine is required for entry into middle school and high school for students aged 16 and older.

► **Tetanus, diphtheria and pertussis booster (Tdap):** At age 11 or 12, a slightly different version of a vaccine your child received as a baby (DTaP). A person receives a booster of this vaccine every 10 years throughout their adult life, the first one taking place in middle school. This vaccine protects against whooping cough, which is highly contagious and on the rise in Illinois and around the country. This vaccine is required for school entry in middle school.

► **Human papillomavirus (HPV):** At ages 9–12, children who receive the HPV vaccine series will only need two doses. If they don't get the first dose until age 15, they need three doses. This vaccine is not required but is one of the only vaccines proven effective at preventing certain types of cancer.

► **Influenza (Flu):** The AAP and the CDC recommend the flu vaccine every year for everyone aged 6 months and older, including teens.

► **COVID-19:** The AAP and the CDC recommend the COVID-19 vaccine every year for everyone age 6 months and older, including teens. It is also safe to receive a COVID-19 vaccine at the same time as a flu vaccine.



Source: [HealthyChildren.org](https://www.healthychildren.org)

Review of Important School Forms

There are many different forms that parents or guardians may submit to provide information about their child's health. However, the Certificate of Child Health Examination form is the only one that satisfies proper school immunization documentation requirements. Forms for Chicago Public Schools (CPS) are available at cps.edu/medicalforms^{*6}.

Certificate of Child Health Examination Form

The Certificate of Child Health Examination Form (available in [English](#)^{*7} and [Spanish](#)^{*8}) is the form health care providers must complete to document a child's physical health examinations. This is a requirement for all public, private, and parochial schools. Health examinations must be performed within one year before entering school at the following intervals:

- Before entering school (including nursery school, pre-K programs, etc.)
- Upon transferring to Illinois from another state or country
- Before the date of entering kindergarten or first grade
- Before the date of entering sixth grade
- Before the date of entering ninth grade

Starting on January 1, 2024, the Certificate of Child Health Examination form includes a space for the health care provider to record whether proof of social-emotional and developmental screening was conducted. If this part of the form is not completed, the student should not be excluded and may enroll in or remain in school. The form will only indicate whether a screening was conducted and will NOT contain the screening results. **Any child health examination conducted after January 1, 2025, must be completed using the updated form.**

Sports Physical Form

The Sports Physical form does NOT satisfy immunization reporting requirements. A parent who submits only a Sports Physical form, without the Certificate of Child Health Examination form, is not in compliance.

Please note that the completed Certificate of Child Health Examination form is acceptable for meeting a sports physical requirement; refer to iesa.org^{*9} or ihsa.org^{*10} for specifics.



Section 3: Deadlines, Exemptions, and Exclusions

Understanding Immunization Legal and School Code in Illinois

In Illinois, vaccination requirements for school children are primarily governed by the Illinois School Code ([105 ILCS 5](#)¹¹) and the Illinois Administrative Code ([77 Ill. Admin. Code 665](#)¹²), which outline the immunization and exemption requirements. Below is a breakdown of the relevant provisions regarding school vaccination requirements and exemptions, as outlined in Illinois state law.

1. School Immunization Requirements (77 Ill. Admin. Code 665)

Under Section 665.230 of the Illinois Administrative Code, the state mandates specific vaccinations for children attending public and private schools. The key immunization requirements include:

- Polio
- Diphtheria, Tetanus, and Pertussis (DTaP)
- Pneumococcal
- Measles, Mumps, and Rubella (MMR)
- Hepatitis B
- Haemophilus influenzae type b (Hib)
- Varicella (Chickenpox)
- Meningococcal (MCV4)

Schools must have documentation of all required immunizations for each student, including proof of vaccinations from a licensed healthcare provider or documentation of a medical or religious exemption. Schools also have the right to exclude unvaccinated students who do not meet vaccination requirements, per Section 27-8.1 of the School Code.

Note that medical and religious exemptions are the only exemptions permitted in Illinois: [Exemptions Permitted for State Childcare and School \(K–Gr 12\) 2023 | Immunize.org](#)¹³

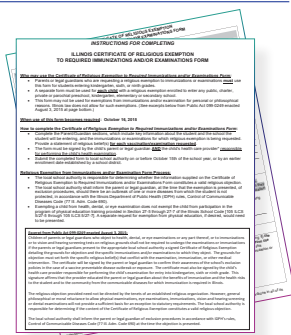
2. Medical Exemption (23 Ill. Admin. Code 665.520)

A medical exemption is permitted when a student cannot receive a required vaccination due to a medical condition. These exemptions must meet the following criteria:

Certification by a Licensed Healthcare Provider: The child's healthcare provider (MD, DO, PA, APRN) must provide a written statement specifying the reason why a vaccine is contraindicated for the student. For example, a medical exemption is granted if a vaccine poses a health risk due to a medical condition.

Temporary or Permanent Exemptions: Medical exemptions can be temporary (for a short duration, such as after surgery or illness) or permanent (if the student has a lifelong contraindication to a vaccine).

Download the Certificate of Religious Exemption Form^{*16}



3. Religious Exemption (23 Ill. Admin. Code 665.510)

Illinois allows religious exemptions to vaccination requirements.^{*14} Parents or guardians must submit a Certificate of Religious Exemption form, including a statement explaining how the vaccine conflicts with their religious beliefs. The form must also be signed by the child's healthcare provider (MD, DO, PA, APRN).

The Certificate of Religious Exemption form should be signed by the same clinician responsible for performing the health examination.

Exemptions are required for students entering kindergarten, sixth grade, ninth grade, or upon initial enrollment. Schools may require the exemption to be submitted annually or at the start of the school year. The local school authority shall inform the parent or legal guardian of exclusion procedures, in accordance with the Illinois Department of Public Health (IDPH)'s rules under Part 690 of Title 77 of the Illinois Administrative Code, at the time the objection is presented.

Important Considerations for Religious Exemptions:

At a minimum, a new exemption form is required with each mandated exam interval (PK, K, 6, 9), and upon transfer from an out of state school. In addition, schools may require that the exemption form be submitted at the beginning of each school year, as well as for students who transfer from another Illinois school during a non-mandated exam interval.

4. McKinney Vento (105 ILCS 45/1-20)

The Education for Homeless Children Act states that schools must enroll a homeless child or youth even if the child or youth is unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation. More information on McKinney-Vento is covered in [Section 6](#).

5. Reporting and Enforcement

Schools are required to report vaccination status to the Illinois State Board of Education (ISBE) and must maintain accurate records for each student. Students who are not in compliance with the vaccination requirements without an approved exemption shall be excluded from school. This can include cases where a student is missing one or more required vaccines or where documentation of the vaccines is not provided. Schools are also responsible for sending notices to parents or guardians regarding the vaccination requirements.

6. Special Considerations for Transfer Students and New Enrollments

Students transferring to an Illinois school from another state or country are required to present proof of immunization within 30 days of enrollment. If a student has not yet received a vaccine required for school attendance, they may be temporarily enrolled under specific conditions, with proof of vaccination pending.

For a complete breakdown of the Illinois vaccination law and specific details, [refer to the entire Illinois Administrative Code here](#)^{*15}.

Your Role with Exemptions

In Illinois, parents or guardians may request a religious exemption from school immunization requirements by submitting a completed Certificate of Religious Exemption form. This form must be signed by both the parent/guardian and the healthcare provider. The clinician must also complete the Child Health Examination —both forms must be completed by the same clinician. If the forms are signed by two separate healthcare providers, the school authority should not accept it as valid. Ultimately, it is the responsibility of the school authority to determine whether the stated religious objection meets the exemption criteria. When the Certificate of Religious Exemption is accepted, it is important for the school authority to remind parents/guardians of the policies around school exclusion during disease outbreaks.

You can use this email template to communicate with parents and guardians about procedures regarding outbreak exclusion policies and procedures. The best time to send this is at the beginning of the school year, when you have collected all exemptions, so parents know ahead of time what your policies are. See the next section for more information on what to do during a disease outbreak at your school.

[Click here or scan to open this template](#)^{*17}



As required by the Illinois Department of Public Health, if a contagious disease spreads at school, your child may need to stay home if they do not have proof of immunity (such as vaccinations) for that disease. This is based on the Illinois Outbreak Control Act (20 ILCS 2305/1.1) and is intended to protect the health and safety of all students.

If a confirmed case of a contagious disease occurs in the school, we will follow guidance from our local health department. If your child has not shown proof of immunity for the disease, they may be excluded from school starting the next day. They will be able to return once we have received proof of immunity or after a set number of days, depending on the disease and health guidelines provided by our local health department.

We understand that this policy may raise questions, and we want to assure you it is in place for your child's protection and the safety of everyone in the school. If you have any questions or need to update your child's immunization records, please contact the school health office.

Thank you for your understanding and cooperation in keeping our school community healthy.

Sincerely,

[YOUR NAME]

Section 4: Outbreak Preparedness and Response

Schools function as large gathering spaces, which also makes them vulnerable to disease outbreaks. When students aren't up-to-date on their routine vaccines, it opens the door for vaccine-preventable disease outbreaks to occur. Make sure you and your school staff are familiar with outbreak preparedness and guidance, so you can respond quickly should an outbreak occur. These strategies do not supersede guidelines from the state of Illinois, the City of Chicago, or local health departments.

General Outbreak Preparedness

Communicable Disease School Nurse Guidance

This guidance outlines the criteria for identifying various types of communicable disease outbreaks and details the reporting requirements for a wide range of infectious conditions. As a primary resource from the Illinois Department of Public Health (IDPH), it should serve as your initial reference for determining the appropriate steps to take when responding to a communicable disease within your school.

It is available in **English**^{*18} and **Spanish**.^{*19}

Additional information available at dph.illinois.gov.^{*20}

[illegible]

Make an Outbreak Preparedness Plan

- Identify the school staff person who will be responsible for reporting to and communicating with the local health department, and ensure you know how to [contact your local health department](#).^{*21}
- At the beginning of the school year, make a list of students who are not vaccinated against [measles](#)^{*22}, [mumps](#)^{*23}, [rubella](#)^{*24}, or [varicella](#)^{*25} and will need to be excluded.
- Work with your school staff to decide how you will share outbreak information in the event of a confirmed case at the school.
- Familiarize yourself with Illinois [reporting requirements](#).^{*26} and the [CDC's guidance for preventing the spread of infections in schools](#)^{*27}.

Data Dashboards

- The new IDPH [Measles Outbreak Simulator Dashboard](#)^{*28} makes it easy for the public to find the measles vaccination rate in any school in Illinois, whether public or private, and to determine the risk of a child being exposed to measles if a case is introduced in their school.
- IDPH will continue to update the [Seasonal Respiratory Illness Dashboard](#)^{*29} on a weekly basis, with updates released every Friday at 2:30 pm.
- CDC's [Measles Cases and Outbreaks](#)^{*30} tracks confirmed measles cases, deaths, and outbreaks around the country.

Reporting and Exclusion Requirements

Below, you'll find guidance for outbreaks that are currently occurring or have recently occurred across the state. You can view a list of the [reporting and exclusion requirements](#)^{*31} for every vaccine-preventable disease [here](#)^{*32}.



**Report
Within
3 Hours**

► Measles

Notify your local health department immediately, within 3 hours, of a suspected measles case. Do not wait for laboratory testing results before calling. Infected individuals should be excluded for 4 full days after the start of the rash. Unvaccinated contacts who do not receive the vaccine within 72 hours of first exposure shall be excluded for at least 21 days after the onset of the last case in the school. Exclusion periods may vary on a case-by-case basis; your local health department will inform you of the criteria for exclusion from school.

► Respiratory Viruses (flu, RSV, and COVID-19)

Report unusual illness, clusters of cases above baseline for group and time of year, or increased/unusual severity of illness to the local health department within 24 hours. Infected individuals should be excluded until they have been fever-free for 24 hours without the use of fever-reducing medications and symptoms are improving. Upon return and for the next 5 days, it is recommended that the individual wear a well-fitted mask.



**Report
Within
24 Hours**

► Varicella

Varicella is required to be reported to your local health department within 24 hours. The infected person must be excluded for at least 5 days, and until all lesions have crusted. Vaccinated children with an atypical rash should be excluded until they are fever-free and no new lesions have developed for at least 24 hours. Non-immune contacts in the school setting do not need to be excluded unless they develop symptoms or unless local health departments direct otherwise.

► Pertussis

Pertussis is required to be reported to your local health department within 24 hours. Students must be excluded from school until 5 days of appropriate antibiotic treatment are completed or 21 days after the onset of cough, if no treatment is received. Susceptible contacts do not need to be excluded unless they become symptomatic.

Communication/Outreach Resources

Information for Your Local Health Department

When reporting a case to your local health department, you will need to include the below information. Please note that both HIPAA and FERPA have exceptions for this type of reporting, and it is required by state law.

- Student name and date of birth (DOB)
- Demographics: address, parent info, phone numbers
- Symptoms and symptom onset date
- Last date present at the school
- Have they seen a clinician? If yes, who, when, and where?
- Were they tested and how?
- Does this family speak a language other than English?
- Are they living in a shelter?
- Any special information that would be helpful, e.g., do they participate in extracurricular activities?

Information for Parents

Parent letters for reportable diseases should be drafted either by or with your local health department. Some outbreaks, like measles, must be lab confirmed before any communication goes out. Some tips for successful communication include:

- Involve your school communications team as soon as you learn of a reportable case.
- Coordinate with your local health department to draft letters to students, staff, or other members of the school community.
- Work with your local health department on determining whether a media release is necessary or to respond to media inquiries.



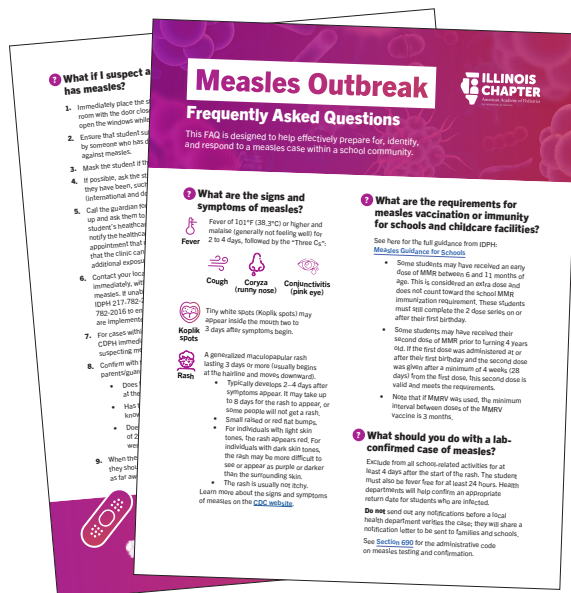
Vaccine-Preventable Disease Resources

Measles

- [Public Health Preparedness Checklist: Measles Clusters and Outbreaks](#)^{*33}
- [Do You Need a Measles Vaccine?](#) available in [English](#)^{*34} and [Spanish](#)^{*35}
- [Measles Vaccine Social Posts for Clinicians](#)^{*36}
- [Measles Infection Control Preparedness](#)^{*37}
- [ICAAP Measles Emerging Issues Page](#)^{*38}
- [What You Should Know During a Measles Outbreak](#) is available in [English](#)^{*39} and [Spanish](#)^{*40}
- [Be Ready for Measles Toolkit](#)^{*41}— CDC
- [There's a Current Outbreak of Measles](#)^{*42}— CDC
- [ICAAP Awaiting Measles Test Results](#) is available in [English](#)^{*43} and [Spanish](#)^{*44}
- [Measles - It Isn't Just a Little Rash](#)^{*45} is available in 20 languages — CDPH

Measles Outbreak FAQ Flyer

[Download PDF](#)^{*50}



Flu

- [ICAAP Flu Toolkit \(2024\)](#)^{*46}
- [Seasonal Influenza Fact Sheet for Parents](#)^{*47}— IDPH

Whooping Cough (Pertussis)

- [Pertussis Fact Sheet for Parents](#)^{*48}— IDPH
- [Whooping Cough \(Pertussis\): Symptoms, Treatment & Prevention](#)^{*49}— Healthy Children



Measles Outbreak FAQ

This FAQ is designed to help effectively prepare for, identify, and respond to a measles case within a school community.

? What are the signs and symptoms of measles?



Fever

Fever of 101°F (38.3°C) or higher and malaise (generally not feeling well) for 2 to 4 days, followed by the “Three Cs”:



Cough



Coryza (runny nose)



Conjunctivitis (pink eye)



Koplik spots

Tiny white spots (Koplik spots) may appear inside the mouth two to 3 days after symptoms begin.



Rash

A generalized maculopapular rash lasting 3 days or more (usually begins at the hairline and moves downward).

- Typically develops 2–4 days after symptoms appear. It may take up to 8 days for the rash to appear, or some people will not get a rash.
- Small raised or red flat bumps.
- For individuals with light skin tones, the rash appears red. For individuals with dark skin tones, the rash may be more difficult to see or appear as purple or darker than the surrounding skin.
- The rash is usually not itchy.

Learn more about the signs and symptoms of measles on the [CDC website](#).⁵¹

? What are the requirements for measles vaccination or immunity for schools and childcare facilities?

See here for the full guidance from IDPH:

[Measles Guidance for Schools](#)⁵²

- Some students may have received an early dose of MMR between 6 and 11 months of age. This is considered an extra dose and does not count toward the school MMR immunization requirement. These students must still complete the 2 dose series on or after their first birthday.
- Some students may have received their second dose of MMR prior to turning 4 years old. If the first dose was administered at or after their first birthday and the second dose was given after a minimum of 4 weeks (28 days) from the first dose, this second dose is valid and meets the requirements.
- Note that if MMRV was used, the minimum interval between doses of the MMRV vaccine is 3 months.

? What should you do with a lab-confirmed case of measles?

Exclude from all school-related activities for at least 4 days after the start of the rash. The student must also be fever free for at least 24 hours. Health departments will help confirm an appropriate return date for students who are infected.

Do not send out any notifications before a local health department verifies the case; they will share a notification letter to be sent to families and schools.

See [Section 690](#)⁵³ for the administrative code on measles testing and confirmation.

? What if I suspect a student has measles?

1. Immediately place the student in a private room with the door closed, and if possible, open the windows while they await pickup.
2. Ensure that student supervision is performed by someone who has documented immunity against measles.
3. Mask the student if they are over the age of 2.
4. If possible, ask the student about the places they have been, such as recent travel (international and domestic).
5. Call the guardian for immediate pickup and ask them to follow up with the student's healthcare provider. Ensure they notify the healthcare clinic **BEFORE** the appointment that measles is suspected so that the clinic can plan appropriately to avoid additional exposures.
6. Contact your local health department immediately, within 3 hours of suspecting measles. If unable to reach your LHD, call IDPH 217-782-2016; after hours 217-782-2016 to ensure that control measures are implemented.
7. For cases within the City of Chicago, contact CDPH immediately within 3 hours of suspecting measles at 312-743-9000.
8. Confirm with the student and/or parents/guardian:
 - Does the student have a fever **AND** rash at the same time?
 - Has the student had a connection to a known case of measles?
 - Does the student have documentation of 2 doses of MMR (and what were the dates)?
9. When the student leaves the building, they should be escorted to a side door as far away from the rest of the student population as possible, and especially as far away as possible from any high-risk students (such as hallways used by pre-K students or immunocompromised students).

10. Close the room where you had the student to anyone else for a minimum of 2 hours after the ill student leaves. Perform routine disinfection protocols using an EPA-approved product.

? If a case of measles is confirmed, who needs to be excluded from school activities?

Any person who has been exposed and cannot prove immunity must be excluded from school for 21 days after exposure.

! EXCEPTION: Previously unvaccinated individuals can return to school if they can receive the vaccine within 72 hours of their first exposure.

- Even if someone is compliant with immunization requirements but does not have documented immunity — meaning they have submitted a medical or religious exemption that has been accepted, **OR** they have McKinney-Vento status — they must be excluded.

Keep an up-to-date exclusion list at all times.

- Proof of immunity must be written documentation and must be 1 or more doses of a measles-containing vaccine on or before their exposure, lab confirmation of previous infection, or lab evidence of immunity (titer with positive IgG).
- Those with proof of immunity may continue to attend school, but should continue to monitor their symptoms and, if any appear, remain home and contact a healthcare provider.



Section 5: Using Data

Data is an important tool that can help you gain a better understanding of the current vaccine landscape in your school community. Understanding the vaccine landscape throughout the year helps tailor your outreach strategies and messaging more effectively, ensuring that you deliver a relevant message to the right people.

Using data, you can answer questions like:

- Are there areas of my community where vaccine rates are lower?
- Is there a specific vaccine that has lower rates than others?
- Are there any disease outbreaks I should be aware of?

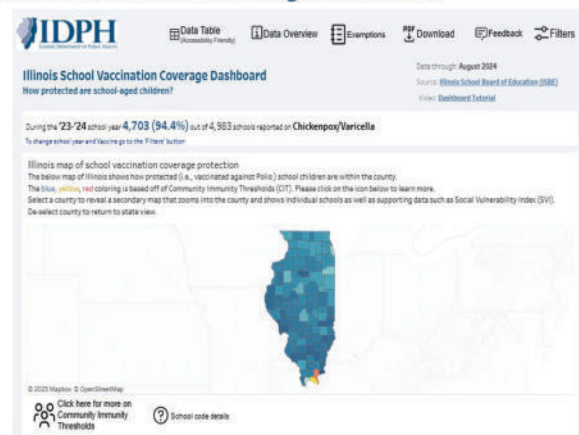
And so much more!

In addition to using your own school health records, there are several local and statewide resources that you can use as well.

Illinois School Vaccination Coverage Dashboard

The [Illinois School Vaccination Dashboard](#)^{*54} was created by the Illinois Department of Public Health (IDPH) Immunizations section, utilizing publicly available student health data reported annually to the Illinois School Board of Education (ISBE). This interactive platform visually displays annual immunization data and comprehensive school program information from 2014 to 2023. You can use this dashboard to monitor vaccination coverage trends by school location, type, and community vulnerability.

School Vaccination Coverage Dashboard

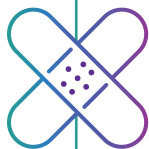


✓	Well - Protected: Above the critical vaccination threshold
🔧	Room for Improvement: Within the critical vaccination threshold
!	Needs Attention: Below the critical vaccination threshold

Community Immunity Thresholds (CIT), by vaccine:

Thresholds are determined based on the most up-to-date evidence and are structured by color as follows: **blue** (above the critical vaccination threshold), **yellow** (within critical vaccination threshold), and **red** (below the critical vaccination threshold).

Chickenpox/Varicella	*	90.0%+	86.0% - 90.0%	< 86.0%	
DTP/DTaP/TD	*	95.0%+	90.0% - 95.0%	< 90.0%	
Hepatitis B	*	90.0%+	85.0% - 90.0%	< 85.0%	
Hib	✂	90.0%+	85.0% - 90.0%	< 85.0%	
Measles	*	96.0%+	91.0% - 96.0%	< 91.0%	* = Pulled from
Meningococcal	✂	95.0%+	80.0% - 95.0%	< 80.0%	Cook County School
Mumps	*	90.0%+	86.0% - 90.0%	< 86.0%	Vaccination Data
Pneumococcal	✂	90.0%+	85.0% - 90.0%	< 85.0%	
Polio	*	84.0%+	80.0% - 84.0%	< 80.0%	✂ = Pulled from
Rubella	*	87.0%+	83.0% - 87.0%	< 83.0%	2020 Healthy
TDAP	*	95.0%+	90.0% - 95.0%	< 90.0%	People Targets



Looking ahead, IDPH is focusing on collaborating with schools to improve vaccination coverage through targeted educational programs, enhanced data-driven strategies, and strengthened partnerships with local health departments to address barriers and promote vaccine confidence.

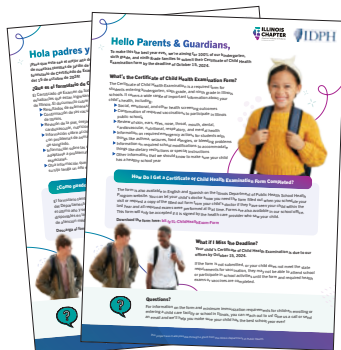


Section 6: Communicating With Parents & Families

It is important to communicate immunization requirements with parents and caregivers before the end of the school year, throughout the summer, and at the start of a new school year. Clear, consistent communication will help build vaccine confidence and promote adherence to deadlines.

Parent/Guardian Outreach Letters

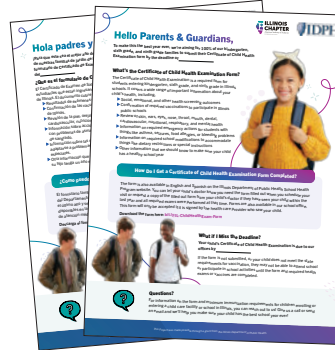
Deadlines: This toolkit includes letter templates to assist you in communicating with parents and guardians about the Certificate of Child Health Examination form and vaccine requirements. Letters and handouts can be printed, emailed, and posted on a district or school website.



Parent/Guardian Flyer

This parent/guardian flyer notes the deadline of October 15th. It is available in [English](#)^{*55} and [Spanish](#)^{*56}.

Schools with a deadline of October 15th can select the English or Spanish file, open it, and save it to their device.



Editable Parent/Guardian Flyer

If a school has an earlier deadline, the date can be edited in this flyer. It is available in [English](#)^{*57} and [Spanish](#)^{*58}.

Open the English or Spanish file, find the underlined open area of text, click into the field, and add the due date.

Next, go to File > Save As, name your updated file, and save it to your device.

Letter for Children Who Are Falling Behind

Parents or guardians with children who are behind on their required immunizations should be declarative. They need to receive timely information on catching up or being out of compliance. School health staff can identify these students and are likely communicating with families—school leadership should too! Use this letter to alert parents and guardians that their student is not yet in compliance and to share resources to help them access vaccinations.

[Click here or scan to open this template](#)^{*59}



Dear Parent or Guardian,

We do not have documentation of [child's name]'s required immunizations for the current school year. As a reminder, this documentation and completion of the Illinois Certificate of Child Health Examination form is due by [CUSTOMIZABLE DATE]. According to Illinois State law, your child may be excluded or kept from attending school if this information is not turned in by this time.

We are here to support you and help ensure that your child can continue learning in a safe and healthy environment. If you have questions about these requirements or need help finding a health care provider, please contact [nurse name] at [phone number].

Sincerely,

[YOUR NAME]

Other Resources

Here are some other resources to communicate with parents about the benefits of school immunizations:



[Attendance Works](#)^{*60}

Use these handouts to educate on the importance of school immunizations in reducing health-related absences.



[American Academy of Pediatrics](#)^{*61}

Use these resources and guides for helpful tips on communicating with vaccine-hesitant parents.

Section 7: Resources for New Arrivals

Illinois is home to a diverse population and numerous cultures, with new arrivals joining our communities every day. Many of these new Illinoisans may not be aware of Illinois school vaccine requirements, may not have had access to vaccines before moving to our state, and may need assistance in getting vaccinated. It is important to be prepared with information on the required immunizations and where families can obtain them. Here are some resources you can use to share information with these families:

- **Accessing Health Services in Illinois:** Visit the [IDPH vaccine locator dashboard](#)^{*62} or print and share this flyer (available in [English](#)^{*63} and [Spanish](#)^{*64}) with key information on how to find a healthcare provider, what vaccines are required in the United States, and how to access specialty care for pregnancy, newborns, and preparing for school.
- **Healthcare Clinics for Immigrants and Refugees:** Interactive map of all the health clinics in Illinois that are available to people regardless of immigration status. Available in multiple languages. [View Resource](#)^{*65}
- **Immigrant Health Coverage:** This website explains the types of health coverage offered to immigrants who are Illinois residents. [View Resource](#)^{*66}
- **Immigrant Family Resource Program (IFRP):** FRPs assist immigrant families with completing public benefit applications. The IFRP Hotline for assistance is 1-855-437-7669, and the Family Support Hotline is available in English, Spanish, Korean, and Polish 1-855-HELP-MY-FAMILY (1-855-435-7693). [View Resource](#)^{*67}
- **Find a Provider:** This HRSA resource helps families find a health center in their area. Available in 16 languages. [View Resource](#)^{*68}
- **Locate a Rural Health Center near you :** [View Directory](#)^{*69}

Visit the Illinois Chapter, American Academy of Pediatrics' (ICAAP) [immigration webpage](#)^{*70} for additional resources to support immigrant and refugee populations with healthcare and vaccination services.

Interpreting International Vaccine Records

Students arriving from other countries may have records with them. These records may have documentation of required vaccines with different names or dates recorded differently than U.S. health records. For example, the day may be listed before the month, e.g., 30/1/2016 for January 30, 2016.

School health staff collecting vaccine records should only accept written, dated records as valid evidence of vaccination. This documentation must also comply with IL requirements. Verbal reports of prior vaccination should not be counted. If a student's documentation does not meet requirements or their records are incomplete, the student may need to be revaccinated. These resources can help your school health staff in interpreting international vaccine records:

- **Global Vaccine Schedule Comparison Chart** — This document helps identify which products may have been used before a child arrived in the U.S. and the timing of any vaccinations. [View Resource](#)^{*71}
- **Navigating Vaccine Gaps** — This handout provides guidance on assessing new arrival patients, sharing important vaccine information, and developing long-term care plans. [View Resource](#)^{*72}

McKinney-Vento Act

Students experiencing homelessness, including new arrivals who may be living in shelters, face many challenges accessing immunizations or producing health records. The McKinney-Vento Act requires schools to enroll students experiencing homelessness without delay, even if the student is unable to provide records of the required immunizations. [Read more about the McKinney-Vento Act here.](#)^{*73}

Children may be eligible for McKinney-Vento services if they are living in the following situations:

- **Doubled-up children:** Living with another family due to lack of a permanent residence
- **Children in shelters:** Including transitional living programs
- **Children living in motels:** Due to a lack of adequate living situation alternatives
- **Migratory children:** If accommodations are not fit for habitation
- **Runaways*:** Children who left home and live in a shelter or inadequate accommodations, even if parents are willing to provide a home
- **Lockouts*:** Children whose parents or guardians will not permit them to live at home

**These two categories are unaccompanied homeless youth. These children are not in the physical custody of their parents or court-ordered guardians and lack a fixed, regular, and adequate abode.*

Any child who qualifies for McKinney-Vento services and is not up to date with their immunizations should work with the McKinney-Vento liaison in their school/district to get immunized as soon as possible. A family can [locate their local McKinney-Vento liaison by visiting this link](#)^{*74}. Follow up with these students/parents at regular intervals to ensure the student is connected to services and minimize the time the student is not up to date.

Section 8: Resources for Students Who Are Uninsured/Underinsured

Students who do not have insurance or are underinsured are not exempt from school vaccine requirements. Schools can help educate and connect families to programs and services that will help them ensure their student can attend school.

The Vaccines for Children (VFC) Program

The Vaccines for Children (VFC) program is a federally funded, state-administered program that provides free vaccines to eligible children ages 18 and younger. All school-required vaccines are provided at little or no cost to the patient through the VFC program. The Illinois Department of Public Health (IDPH) oversees the VFC program for the state (outside of Chicago, including the rest of Cook County), and the Chicago Department of Public Health (CDPH) oversees the VFC program within the city limits of Chicago.

Children through 18 years of age who meet at least one of the following criteria are eligible to receive VFC vaccines:

- **Enrolled in Medicaid**
- **Not insured:** A child who has no health insurance coverage.
- **American Indian or Alaska Native:** As defined by the Indian Health Care Improvement Act (25 U.S.C. 1603).
- **Under-insured:** A child who has commercial (private) health insurance, but the coverage does not include vaccines, a child whose insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only), or a child whose insurance caps vaccine coverage at a certain amount.

Families can [find a VFC Provider using this tool](#)⁷⁵

Local Health Departments

In addition to the VFC Program, local health departments (LHDs) are a great resource for connecting students who are under- or uninsured to free vaccinations. LHDs are often [VFC providers](#)⁷⁶ themselves or offer free vaccine clinics. Reach out to your LHD or visit their website throughout the summer for school immunization information you can share with your school communities.

Chicago Public Schools

Chicago Public Schools (CPS) has many different resources for students who are uninsured or underinsured, ensuring they have access to healthcare services and lifesaving immunizations. This information and more can also be found on [ICAAP's CPS webpage](#)^{*77}.

School-Based Health Centers

Schedule an appointment at one of the 33 [CPS School-Based Health Centers](#)^{*78} where students can receive quality care at no out-of-pocket cost. These services include physical exams, sports physicals, behavioral health care, and more. Students can also get their required and recommended vaccines at no cost. Some health centers are open to the community, while others are open only to enrolled students.

Vaccine Clinics

Chicago Public Schools provides vaccination events across the district at elementary schools, high schools, and charter schools. Parents and guardians can view the calendar of mobile vaccine clinic events and [schedule an appointment here](#)^{*79}. These clinics are open to the entire community and provide all required vaccines, as well as free flu and COVID-19 vaccines.

[Other vaccination sites around the city of Chicago can be found here](#)^{*80}, and [vaccination events hosted by the Chicago Department of Public Health can be found here](#)^{*81}. These clinics serve uninsured, underinsured, Medicaid (Title XIX) insured, and those enrolled in the Children's Health Insurance Program (CHIP).

Please call the CPS Healthy Hotline or the Office of Student Health and Wellness for any questions.

Hotline: (773) 553-5437

Email: oshw@cps.edu

Open 8am–4pm

Coordinators are happy to answer your questions and direct you to any of these resources, including appointments with trained coordinators who can assist parents in signing up for benefits such as Medicaid and SNAP.

Other CPS Health and Wellness Services

Other CPS health and wellness services include access to free vision services through the [CPS Vision Program](#)^{*82}, free audiology services like hearing tests and hearing aids through the [CPS Audiology Clinic](#)^{*83}, and free dental services in [partnership](#)^{*84} with the Chicago Department of Public Health.

CDPH also funds the Vision Exam program in CPS, in a similar partnership to the Dental Program.

McKinney-Vento Eligibility

If a student is under or uninsured **and** is experiencing homelessness, they are eligible for services under the McKinney-Vento Act. The McKinney-Vento Act requires schools to enroll students experiencing homelessness without delay, even if the student is unable to provide records of immunization. Read more about the [McKinney-Vento Act on page 26](#) or on the [ISBE website here](#)^{*85}.



Section 9: Working With Clinicians in Your Community

Whether pediatricians, family physicians, local health departments, or any other pediatric health care provider, strong partnerships with local clinicians in your community can be a tremendous asset in ensuring that your students can easily access healthcare options. We recommend that schools communicate regularly with local health departments (LHDs) and community clinics to ensure coordination of services in response to localized outbreaks, individual school health concerns, and days when students aren't in school. Here are some ways that you can collaborate with pediatric providers in your community to ensure comprehensive, integrated care is available to students:

- Add LHDs and community clinics to your listserv, notifying them about school-based health concerns or alerts.
- Share all the documentation that your district requires so they are aware of what their patients might bring.
- Keep in touch with pediatricians about individual students' health as appropriate.
- Ask if they have any special clinic hours or host or participate in special events, such as vaccination fairs open to students without insurance.
- The Illinois Chapter, American Academy of Pediatrics ([ICAAP](#)^{*86}) is also an excellent resource for connecting with pediatricians – you can also visit our page dedicated to [CPS](#)^{*87}.

Additionally, it's essential to share important dates and deadlines, including the due date for the Certificate of Child Health Examination and any scheduled school days off. No-school days can be busy days for pediatric providers, as they typically mean an influx of students and their families. Notifying LHDs and community clinics about no-school days for students will allow them to plan accordingly for expanded hours and/or staff capacity. Here are some email templates you can copy and paste to connect with providers near you:



Email Template for School Year 2025 Chicago Public Schools

[Click here or scan to
open this template](#)^{*89}



Dear Health Care Provider,

Thank you for all you do in to ensure our school community stays healthy throughout the year!

We wanted to alert you to our upcoming school calendar and some important dates that may affect your offices. Chicago Public Schools (CPS) have at least one day off every month of the school year. Consider expanding hours or staff capacity on some or all these days, as you may see an influx of appointments when students are not in school. You can also consider holding special school physical/vaccine clinics during these days.

CPS students are required to have their Certificate of Child Health Examination signed and submitted by October 15 of each year, so September or early October no-school days can be a great time for special vaccine clinics. However, holding monthly or quarterly special school physical/vaccine clinics during no-school days can also make care and vaccines more accessible for students! See the days students are not in school for the rest of the 2024-2025 school year below:

2025 CPS No-School Days

- January: 1–3, 20 & 21
- February 17 & 25
- March: 24–31
- April: 1 & 18
- May: 26
- Last day of school: June 12

You can start planning for the 2025-2026 school year by visiting the [CPS calendar](#)^{*88}.

Thank you again for all you do to keep our students healthy.

Sincerely,

[YOUR NAME]

Email Template for Outside Chicago Public Schools

[Click here or scan to open this template](#)^{*90}



Dear Health Care Provider,

Thank you for all you do in ensuring our school community stays healthy throughout the year!

We wanted to alert you to our upcoming school calendar and some important dates that may affect your offices.

Our Certificate of Child Health Examination is due on [DUE DATE], so you may see an influx on patients around that time. Additionally, we have some upcoming no-school days on [LIST DAYS], and you may see an influx of appointments when students are not in school. You can also consider holding special school physical/vaccine clinics during these days. However, holding monthly or quarterly special clinics can also make care and vaccines more accessible for students!

Here is a link to our 2025-2026 school calendar [INSERT LINK].

Thank you again for all you do to keep our students healthy.

Sincerely,

[YOUR NAME]



Section 10: Supporting Your School Health Staff

School health nurses do so much to ensure that students are healthy and able to attend school, and the beginning of the school year can be a particularly chaotic time. Here are some ways you can support them and build a culture of promoting health:

- Establish norms for sharing school immunization information with parents
- Create an internal timeline for sharing information with parents, including reaching out to parents about missed immunizations, reporting due dates, and other relevant details.
- Institute a unified protocol for responding to immunization questions
- Set up regular check-in intervals so everyone can be on the same page

I-CARE

I-CARE, Illinois's Immunization Information System, allows pediatric providers and school health staff (school nurses) to document and access student immunization records efficiently. This tool enables the school health staff to review immunization statuses, identify students who may need updates, and generate helpful reports. With I-CARE, managing and tracking student immunizations becomes streamlined and straightforward for your school health team.



Login Procedure For I-CARE

As of November 1, 2024, OKTA is the access point for I-CARE.

All active I-CARE users (those who have signed in since May 1, 2024) have been migrated to OKTA and can now [sign in here](#)^{*91}. Users who have not signed into I-CARE since May 1, 2024, and still require access, must complete a [new enrollment for I-CARE here](#)^{*92}.

New users will need to sign up and complete the I-CARE individual user agreement to access to the Illinois Department of Public Health (IDPH) Web Portal to gain access to ICARE.

Signing the Individual User Agreement

Step 1: Select Individual I-CARE Access.

Welcome!

Welcome to the Illinois Comprehensive Automated Immunization Registry Exchange (I-CARE) Enrollment website.

On this website, you will find tools and resources to complete the following:

- **New Organizations** can complete site enrollments and designate a Portal Registration Authority (PRA)
- **Current Organizations** can report site updates and PRA changes
- **Individuals** can request I-CARE Access*

*This site is not to be used by the public to request individual immunizations records. These requests can be made [here](#).

Please note that I-CARE will not enroll organizations outside of Illinois, enroll for the purpose of research, or human resource departments for employee immunization verification.

New Organizations*

Current Organizations

Individual I-CARE Access

*** New organizations are those with no prior enrollment in I-CARE**
Not sure if your organization is enrolled? Please contact us.



Have Questions? Contact Us

View the I-CARE Glossary

HL7 Onboarding

Become a Vaccine Provider

Step 2: Select I-CARE Individual User Agreement Form.

Individual Access: Helpful Hints

All individuals requesting I-CARE access must complete the **I-CARE Individual User Agreement Form***: The user and their leadership must sign I-CARE's user and confidentiality policies before access can be granted.

***PRA Applicants**: If you have registered or need to register to become the Portal Registration Authority (PRA) at your organization, **please do not complete**. Your user agreement will be completed as part of the [PRA designation process](#).

Individual to Complete

I-CARE Individual User Agreement Form

I-CARE Application Process

I-CARE reviews the submission:

- If clarification is needed, I-CARE will reach out by email to resolve.
- Once approved, I-CARE will email a signature request (**via DocuSign**) to the user. Once signed it will then route to the supervisor and PRA for signing.
- When the completed document is received, the account will be sent to OKTA.
- **The user will receive an email to activate an OKTA account. This will need to be completed within 7 days of receiving the email.**
- I-CARE will notify the user by email when their account is ready.

Have Questions? Contact Us

View the I-CARE Glossary

Step 3: Submit Submitter Information

On the *Submitter Information* page, complete all fields with red asterisks. If you are submitting on behalf of someone else, please provide their first and last name, work email address, web portal username, phone number, and role.

Step 4: Submit User/Organization/Site Information

Complete all fields with red asterisks on the *User Information and Organization/Site information* page.

Step 5: Review Disclaimers

Review the disclaimers on the *Final Disclaimers* page, check the boxes to indicate that you understand, and click submit.

Step 6: Signatures

On the Signature of *Site Leadership* page, confirm if the submitter is the user's supervisor. If not, provide the supervisor's name, email address, and title.

Step 7: Final Submission and Follow-up Email

After applying, the applicant and the supervisor will receive an email from IDPH/DocuSign with documents requiring electronic review and signature. Monitor incoming emails from IDPH and reply within the same email thread. If any information is missing, the applicant and supervisor may receive a follow-up email. Failure to respond to these email requests may result in a delay in processing the application.



Step-by-Step Tip Sheet for Processing Child Health Examination Forms

If your school does not have designated school health staff or if a non-health staff employee is processing Child Health Examination forms, this guide outlines the steps for processing these forms.

Step 1: Gather Required Materials

Form: Ensure you have the latest [Child Health Examination Form](#)⁹³. The latest version was updated on January 31, 2024. **Any child health examination that occurs after January 1, 2025, must utilize the updated child health exam form.**

Reference Documents: Please keep any relevant guidelines or checklists handy for clarification.

Step 2: Verify Child's Information

Demographics: Check the child's name, date of birth, and address. If a family has recently moved, verify their new address.

Parent/Guardian Information: Ensure that all contact details are accurately completed.

Step 3: Assess Medical History

Past Conditions: Look for any chronic conditions or significant medical history.

Medications: Note any ongoing medications the child is currently taking.

Step 4: Review Physical Examination Findings

Health Indicators: Pay attention to the examiner's vision, hearing, and overall physical health notes from the examiner.

Step 5: Check Immunization Records

Completeness: Ensure that all required immunizations are documented.

Dates: Verify that vaccination dates are precise and within the recommended timeframe. If a required vaccination is missing and no religious exemption is on file, the parent or guardian must be contacted to obtain the necessary documentation.

Step 6: Confirm Provider's Signature

Authorization: Make sure the healthcare provider (MD, DO, PA, or APRN) has signed the form, indicating it is complete and valid.

Provider Details: Check that the provider's name, address, and contact information are included.



Step 7: Follow-Up on Incomplete Sections

Missing Information: If any sections are incomplete, contact the parent or guardian for clarification or additional information.

Review the incomplete section with a health supervisor or school administrator before contacting parents. (For example, the social-emotional screener being left blank may be addressed through the school.)

Contact Healthcare Providers: If needed, contact the healthcare provider for any missing details.

Step 8: Share Information as Required

Dissemination: Share the completed form with relevant school personnel in accordance with your school's policies, ensuring confidentiality is maintained.

Step 9: Keep Updated on Regulations

Stay Informed: Regularly check for updates to health regulations and guidelines to ensure compliance.

Additional Tips

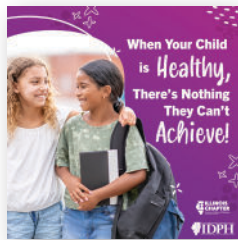
Ask Questions: If you are unsure about any part of the form or process, don't hesitate to ask a knowledgeable colleague or supervisor for assistance.

Training: Consider seeking training on child health issues and the required forms to gain a deeper understanding.

By following these steps, you can effectively process child health examination forms while ensuring that all necessary information is accurate and complete.



Section 11: Social Media Toolkits and Resources



Healthy Kids Achieve More

Encourage vaccination with positive messaging about the connection between health and overall development.

[Download Toolkit](#)^{*94}



Safe Schools

Remind students and their families that there are many factors that go into creating a safe learning environment, including required vaccinations.

[Download Toolkit](#)^{*95}



Getting Back on Track

Reassure parents and guardians who may have a student not yet up-to-date on immunizations that it is never too late to catch up.

[Download Toolkit](#)^{*96}



Get Started Today

bit.ly/icaap-vaccine-socials



Stronger Families

Encourage parents and guardians to have their children vaccinated for preventable diseases.

[Download Toolkit](#)^{*97}



Vaccine Safety

Dispel misinformation about vaccine safety using positive language and bold design to capture the viewer's attention..

[Download Toolkit](#)^{*98}



Vaccine Requirements Campaign

Builds positive associations with vaccination and encourages a healthy school environment for students, teachers, staff, and families.

[Download Toolkit](#)^{*99}

Check out ICAAP's [School Immunizations Resources page](#)^{*100} for more handouts, posters, and other resources that promote vaccine confidence! Safe schools remind students and their families that there are many factors that go into creating a safe learning environment, including required vaccinations.



Get Started Today

bit.ly/icaap-vaccine-socials

Endnotes

- 1 <https://illinoisap.org/school-immunization-resources/>
- 2 <https://dph.illinois.gov/topics-services/prevention-wellness/immunization/minimum-immunization-requirements.html>
- 3 <https://www.cdc.gov/vaccines/hcp/imz-schedules/child-adolescent-catch-up.html>
- 4 <https://www.healthychildren.org/>
- 5 <https://oqr.me/f19re>
- 6 <http://cps.edu/medicalforms>
- 7 <https://dph.illinois.gov/content/dam/soi/en/web/idph/files/forms/child-health-exam-form-revised-01-31-2024.pdf>
- 8 <https://dph.illinois.gov/content/dam/soi/en/web/idph/files/forms/child-health-exam-form-revised-03-2024-es.pdf>
- 9 <https://www.iesa.org/>
- 10 <https://www.ihsa.org>
- 11 <https://www.ilga.gov/legislation/ilcs/ilcs5.asp?ActID=1005>
- 12 https://www.idph.state.il.us/rulesregs/2014_Rules/77_IAC_665_8-26.pdf
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**Getting factual
information
about vaccines
to students and
families is
more important
now than ever.**

Please contact info@illinoisAAP.com
if you have any questions.



Illinois Chapter of American
Academy of Pediatrics
310 South Peoria St., Suite 304
Chicago, IL 60607

Phone: 312-733-1026
Email: info@illinoisAAP.com
Website: illinoisAAP.org