

Worksheet for the Annual Immunization Report On Children Enrolled in Child Care Centers

(Side 1)

Page _____ of _____		Only list ALL children ages 2 through 4 years, 11 months																									
VACCINE DOSE SUMMARY		Check the box indicating the total number of doses received for each vaccine																									
NAME OR I.D. OF CHILD	DOB	Follow-Up Needed	POLIO DOSES				DTP/Td DOSES					MMR ¹		HIB ¹		HEP B				VARICELLA ²		EXEMPT		Type of personal beliefs exemption			
			0	1	2	3+	0	1	2	3	4+	0	1+	0	1+	0	1	2	3+	0	1+	med ³	pers ⁴	Pre-Jan 2014 ⁵	Health Care Pract. Counseled ⁶	Religious Exemption ⁷	
Example: Sierra	4/14/2012				√					√	√		√					√	√		√				√		
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SUBTOTAL (If Applicable)																											
GRAND TOTAL																											
CDPH 8018 SUMMARY REPORT FIELDS		3a.	POLIO0	POLIO1	POLIO2	POLIO3	DTP0	DTP1	DTP2	DTP3	DTP4	MMR0	MMR1	HIB0	HIB1	HEPB0	HEPB1	HEPB2	HEPB3	VARI0	VARI1	2a.	2b.	2b (i)	2b (ii)	2b (iii)	

¹Count as 1+ only if vaccine given on or after the first birthday. (over)

²One dose of varicella vaccine or physician-documented varicella (chickenpox) disease is required by law for children ages 18 months and older effective 7/1/01. If a child has received the vaccine or has physician-documented varicella (chickenpox) disease, check the varicella 1+ column.

³Medical exemption to some or all immunizations

⁴Personal beliefs exemption to some or all immunizations

⁵Personal beliefs exemption to some or all immunizations taken before January 1, 2014 (i.e., parent or guardian signed affidavit on back of blue California School Immunization Record); check this column if the child only has personal beliefs exemption(s) prior to January 1, 2014

⁶Health Care Practitioner Counseled personal beliefs exemption to some or all immunizations taken on or after January 1, 2014; if there is documentation of counseling from an authorized health care practitioner in section A of CDPH 8262 or its equivalent. *Only check this column, and don't check the pre-January 2014 column, when parents have submitted multiple valid exemptions that included this category along with pre-January 2014 personal belief

⁷Religious personal beliefs exemption to some or all immunizations taken on or after January 1, 2014; if the parent had indicated a religious personal beliefs exemption in Section B of CDPH 8262. Only check this column, and don't check the pre-January 2014 column, when parents have submitted multiple valid exemptions that included this category along with pre-January 2014 personal belief exemption(s).

