

# Required and Recommended School Immunizations, Indiana 2024-2025



Updated 1.30.2024

Grade	Required	Recommended
<b>Pre-K</b>	3 Hepatitis B 4 DTaP (Diphtheria, Tetanus and Pertussis) 3 Polio	1 Varicella (Chickenpox) 1 MMR (Measles, Mumps and Rubella) 2 Hepatitis A
<b>K-5</b>	3 Hepatitis B 5 DTaP 4 Polio	2 Varicella 2 MMR 2 Hepatitis A
<b>6-11</b>	3 Hepatitis B 5 DTaP 4 Polio 2 Varicella	2 MMR 2 Hepatitis A 1 MCV4 (Meningococcal) 1 Tdap (Tetanus, Diphtheria and Pertussis)
<b>12</b>	3 Hepatitis B 5 DTaP 4 Polio 2 Varicella	2 MMR 2 Hepatitis A 2 MCV4 1 Tdap

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

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

**Polio\*:** Three doses of Polio are acceptable for all grade levels if the third dose was given on or after the fourth birthday and at least six months after the previous dose.

\*For students in grades K-12, the final dose must be administered on or after the fourth birthday and be administered at least six months after the previous dose.

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

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

**MCV4:** Individuals who receive their first dose on or after their 16<sup>th</sup> birthday only need one dose of MCV4.

**Hepatitis A:** The minimum interval between first and second dose is six calendar months. Two doses are required for all grade levels.

For additional immunization information, visit: [in.gov/health/immunization](https://www.in.gov/health/immunization) or call **1 (800) 701-0704** during normal business hours.