## New Jersey Department of Health Vaccine Preventable Disease Program

## **IMMUNIZATION AUDIT REPORT**

*Name of School/Child Care Center			*A				f School *Grades in Sc						I Enrollment
				□ Pu			blic From:			To:			
*Facility Mailing Address				*City				ni-i dollo					
admy Maining Address										*County			
*School District *School				ol Contact Person				*Telephone Number *Email A					
									J				
☐ Child Care/		otal		Number Deficie			nt/Exe	mpt/P	rovi	sional		Compliance	Total Children
Preschool	Surveyed De	ficient	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Нер В	Varicella	PCV1	3 Flu	MCV4	Rate	Excluded
Audit													
Date													
Religious Exemptions													
Medical Exemptions													
Provisional Status													
Re-Audit/Completion												_ <del></del>	
Date													
New Rel. Exempt.													
New Med. Exempt.													
New Prov. Status													
New Flov. Status								1					
Varicella Disease His Total number of children repo		Docu	mentatio	n Probler	n	Recon	nmendatio	ns:					
varicella disease (confirmed	by physician,			Deficiend	у								
serology, or parental stateme		_	of Enford										
			1 1001011										
☐ Kindergarten													
		otal		Numb	er D	eficie	nt/Exe	mpt/P	rovi	sional		Compliance	Total
☐ Grade 1	Number Ch	ildren	DTaP, DT,	N u m b	er D	e ficie Hib	nt/Exe HepB	m p t / P			MCV4	Compliance Rate	Children
☐ Grade 1 (Entry level)	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		
☐ Grade 1	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level)  Audit Date  Religious Exemptions  Medical Exemptions  Provisional Status	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.  New Med. Exempt.	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.	Number Ch	ildren	DTaP, DT, Td, Tdap								MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date New Rel. Exempt. New Med. Exempt. New Prov. Status	Surveyed Ch De	ildren ficient	Td, Tdap	Polio	MMR	Hib		Varicella			MCV4		Children
Grade 1 (Entry level)  Audit Date  Religious Exemptions  Medical Exemptions  Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.  New Med. Exempt.  New Prov. Status  Varicella Disease Hi Total number of children reporanticella disease (confirmed)	Story orted to have by physician,	Docu	Td, Tdap  mentatio unization	Polio  Probler Deficience	mmr	Hib	Hep B	Varicella			MCV4		Children
Grade 1 (Entry level) Audit Date Religious Exemptions Medical Exemptions Provisional Status  Re-Audit/Completion Date New Rel. Exempt. New Med. Exempt. New Prov. Status  Varicella Disease Hitotal number of children repo	Story onted to have by physician, ant)	Docu	mentatio inization of Enforce	Polio  n Probler Deficiencement	mmr	Hib	Hep B	Varicella			MCV4		Children
Grade 1 (Entry level)  Audit Date  Religious Exemptions  Medical Exemptions  Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.  New Med. Exempt.  New Prov. Status  Varicella Disease Hi Total number of children reporanticella disease (confirmed)	Story onted to have by physician, ant)	Docu	Td, Tdap  mentatio unization	Polio  n Probler Deficiencement	mmr	Hib	Hep B	Varicella			MCV4		Children
Grade 1 (Entry level)  Audit Date  Religious Exemptions  Medical Exemptions  Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.  New Med. Exempt.  New Prov. Status  Varicella Disease Hi Total number of children reporvaricella disease (confirmed)	Story onted to have by physician, ant)	Docu Ilmmu Lack Other	mentatio unization of Enforce	Polio  n Probler Deficience cement	mm	Hib  Recon	Hep B	Varicella ns:	PCV1		MCV4		Children
Grade 1 (Entry level)  Audit Date  Religious Exemptions  Medical Exemptions  Provisional Status  Re-Audit/Completion Date  New Rel. Exempt.  New Med. Exempt.  New Prov. Status  Varicella Disease Hi Total number of children reporvaricella disease (confirmed)	Story onted to have by physician, ant)	Docu Immu Lack	mentatio unization of Enforce	Polio  n Probler Deficiencement n	mm	Hib  Recon	Hep B	Varicella ns:	PCV1				Children

## **IMMUNIZATION AUDIT REPORT, Continued**

□ Crada C	Number	Total		Numb	er De	ficien	t/Exe	mpt/P	rovisi	onal	ı	Compliance	Total
☐ Grade 6	Surveyed	Children Deficient	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Нер В	Varicella	PCV13	Flu	MCV4	Rate	Children Excluded
Audit Date													
Religious Exemptions													
Medical Exemptions													
Provisional Status													
Re-Audit/Completion													
New Rel. Exempt.													
New Med. Exempt.													
New Prov. Status													
Varicella Disease Hi Total number of children repr varicella disease (confirmed serology, or parental statement	orted to have by physician,	☐ Imm ☐ Lack	umentatio unization of Enforcer Problen	Deficiend cement		Recom	mendatio	ons:					
☐ Transfers	Number	Total Children	DTaP, DT,	Numb	er De	ficien	t/Exe	mpt/P	rovisi	onal	T	Compliance	Total Children
(Any Grade)	Surveyed	Deficient	Td, Tdap	Polio	MMR	Hib	Нер В	Varicella	PCV13	Flu	MCV4	Rate	Excluded
Audit Date													
Religious Exemptions													
Medical Exemptions													
Provisional Status													
Re-Audit/Completion Date													
New Rel. Exempt.													
New Med. Exempt.													
New Prov. Status													
Varicella Disease Hi Total number of children rep- varicella disease (confirmed serology, or parental statement	orted to have by physician.	☐ Imm	umentatio unization of Enforcer Problen	Deficiend cement		Recom	mendatio	ons:					
☐ Special Educ./ Unassigned Grades	Number Surveyed	Total Children	DT. D. DT	Numb	oer De	ficien	nt/Exe	mpt/P	rovisi	onal		Compliance	Total Children
		Deficient	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	Rate	Excluded
Audit Date													
Religious Exemptions													
Medical Exemptions													
Provisional Status													
Re-Audit/Completion Date													
New Rel. Exempt.													
New Med. Exempt.													
New Prov. Status													
Varicella Disease Hi Total number of children repr varicella disease (confirmed serology, or parental stateme	orted to have by physician,	☐ Imm ☐ Lack	umentatio unization of Enforcer Problen	Deficiend cement		Recom	mendatio	ons:					

IMM-15 SEP 17