**REMEMBER: SUBMIT AUDIT REPORTS NO LATER THAN JULY 1 OF THE RESPECTIVE ACADEMIC YEAR**

A separate report must be filed for each school that is audited. Electronic submission of the IMM-15 audit report is preferred. Please access the online form at [https://healthapps.state.nj.us/imm/school_audit_report.aspx](https://healthapps.state.nj.us/imm/school_audit_report.aspx) to submit the IMM-15 electronically. If you are unable to submit electronically, please scan and email all reports to imm.reports@doh.state.nj.us.

**DEMOGRAPHIC:** Complete this section in its entirety. All fields are mandatory on the on-line form.

Enter the complete School Name, Annual Immunization Status Report (ASR) School ID, School Type, Grades in School (i.e. K-5), Total School Enrollment, Facility Mailing Address, City, County, School District, School Contact Person, Telephone Number and Email Address.

**IMMUNIZATION STATUS TABLES BY GRADE:** Select and complete the table(s) respective to the grade(s) you are auditing:

1) Childcare/Preschool
2) Kindergarten or Grade 1: (Note: If Kindergarten is the entry level grade in the school and you have new entrants into Grade 1 include them in the Transfer table. If Grade 1 is the entry level grade in the school, then include all children in this table).
3) Grade 6
4) Transfers: Transfers into any grade including new entrants in Grade 1 (excluding grades audited) since the last audit.
5) Special Education with Unassigned Grades: (Note: This table is optional and may be used to capture information for special education children in unassigned classrooms that are the same as children in reported grades. If they are in assigned grades, include them in the respective tables for the above grades).

<table>
<thead>
<tr>
<th><strong>1. Date of Audit</strong></th>
<th>Provide date of initial audit visit.</th>
</tr>
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<tbody>
<tr>
<td><strong>2. Date of Re-Audit/Completion</strong></td>
<td>Provide date of re-audit or provide date of audit completion.</td>
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</tbody>
</table>
| **3. Number Surveyed** | Enter the total number of children surveyed. 

Note: All children surveyed should equal the total number of children enrolled since 100 percent of record audits must be conducted. |
| **4. Total Children Deficient** | Enter the total number of children found deficient. Include any children excluded from school due to deficiencies. |
| **5. Number Deficient by Vaccine** | Enter the total number of children that are deficient for each of the vaccinations. 

Note: Provisional children who are missing vaccination should not be considered deficient. In order for a child to be admitted provisionally he or she must have at least one dose of each required vaccine and must be actively in process of completing series as rapidly as medically feasible. If the minimum interval to receive the next dose in the series has been exceeded, then the child is considered out of compliance. These children should be included in the total number deficient including each vaccination they are missing. |
| **6. Number of Children Excluded** | Enter the total number of children that were excluded from school due to any vaccine deficiency (including a lack of immunization record). |
| **7. Number of Religious Exemptions** | Enter the total number of children who have a religious exemption on file during the initial audit and re-audit/completion (if applicable). Count each child only once, regardless of whether they have exemptions for multiple antigens. 

Note: Children who have religious exemptions for one or more vaccines are not considered deficient. |
8. Number of Religious Exemptions by Vaccine

Enter the total number of children that have a religious exemption for each of the vaccinations.

9. Number of Medical Exemptions

Enter the total number of children who have a medical exemption on file during the initial audit and re-audit/completion (if applicable). Count each child only once, regardless of whether they have exemptions for multiple antigens.

*Note: Children who have medical exemptions for one or more vaccines are not considered deficient.

10. Number of Medical Exemptions by Vaccine

Enter the total number of children that have a medical exemption for each of the vaccinations.

11. Number of Provisional Children

Enter the number of children who have been admitted provisionally during the initial audit and re-audit/completion (if applicable). Provisional children are defined as children who minimally received one dose of all required immunizations AND are in the process of completing the full series within the recommended interval for the next dose in accordance with the Advisory Committee on Immunization Practice's (ACIP) recommended minimum interval catch-up schedule.

*Note: If the minimum interval to receive the next dose in the series has been exceeded then the child is considered out of compliance. These children should be included in the total number deficient including each vaccination they are missing and not included with the Provisional Children.

12. Number of Provisional Children by Vaccine

Enter the total number of children that have been admitted provisionally for each of the vaccinations.

13. Varicella Disease History

Enter the total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement). Do not include children with breakthrough disease as a result of vaccination.

*Note: Children with varicella disease history who have not received a varicella vaccine are considered to meet the immunization requirement. They are not considered deficient or medically exempt for varicella vaccine.

14. Compliance Rate (%)

Manual Calculation: The compliance rate for each grade can be calculated by subtracting the number of children found deficient from the total number of children surveyed. Divide the difference by the total number of children surveyed. Take that number and multiply by 100 to make it a percentage.

*Note: The denominator remains the same as the initial audit for re-audit/audit completion.

*The IMM-15 on-line form will automatically calculate overall and grade compliance rates in the summary report.

Initial Audit Example: Total Deficient = 2, Total Surveyed = 20

Step 1: 20 - 2 = 18
Step 2: 18 ÷ 20 = 0.9
Step 3: 0.9 x 100 = 90% (compliance rate)

Re-Audit Example: Total Re-Surveyed = 2, Total Deficient = 1

Step 1: 20 - 1 = 19
Step 2: 19 ÷ 20 = 0.95
Step 3: 0.95 x 100 = 95% (compliance rate)

*Note: To calculate overall compliance rate of the audited grades, add the total number of deficient children in all grades and the total number of children surveyed in all grades. Then follow the steps above.

LOCAL HEALTH DEPARTMENT AUDITOR INFORMATION

Enter the name of the reviewer, auditing agency, phone number and email address.