

Pre-school Students 3-5 Years Old New Hampshire Immunization Requirements 2018-2019

**Please refer to the Minimum Age & Interval Schedule
for acceptable intervals and age requirements**

DIPHTHERIA, TETANUS, PERTUSSIS (DTaP/DT)

3-5 years	Four doses. The 3 rd and 4 th dose must be separated by at least 6 months.
------------------	--

POLIO

3.5 years	Three doses. Any OPV dose(s) given on or after April 1, 2016 does not count toward the polio vaccine requirement and the series must be completed with IPV.
------------------	--

MEASLES, MUMPS, and RUBELLA

3-5 years	One dose. This dose must be administered on or after age 12 months.
------------------	---

HAEMOPHILUS INFLUENZAE TYPE B (Hib)

3.5 years	One dose on or after 15 months of age OR Four doses with the last dose administered on or after 12 months of age. Hib is not required for children 5 years of age.
------------------	--

HEPATITIS B

3-5 years	Three doses given at acceptable intervals. See attached schedule.
------------------	---

VARICELLA (CHICKEN POX)

3-5 years	One dose. This dose must be administered on or after age 12 months. OR laboratory confirmation of chicken pox disease.
------------------	---