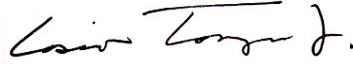





Cosimo Tangorra, Jr., Ed.D.
Deputy Commissioner, Office of P-12 Education

Gus Birkhead, M.D., M.P.H.
Deputy Commissioner, Office of Public Health

To: District Superintendents of Schools
Superintendents of Public Schools
Administrators of Public, Charter, and Nonpublic Schools

From: Cosimo Tangorra, Jr., Ed.D. 
Office of P-12 Education, NYS Education Department


Gus Birkhead, M.D., M.P.H.
Office of Public Health, NYS Department of Health

Subject: Public health and education laws require schools to follow State requirements for vaccinations

Date: February 9, 2015

The New York State Education Department (SED) and the New York State Department of Health (DOH) are committed to ensuring that schools across New York State are adhering to state public health laws requiring vaccination of children prior to school admission. Given the recent media attention and the fact that DOH has confirmed three cases of measles in New York State, including New York City, we write to remind you to continue to take all appropriate measures to protect New York's students through your responsibility to oversee children's admissions to school.

As you know, New York Public Health Law (PHL) § 2164 requires that parents vaccinate their children against serious diseases – including polio, measles, chicken pox, whooping cough, and others. Public and private school officials may not admit unvaccinated children to school in excess of 14 days unless: (1) the student is

transferring from out-of-state or from another country and can show a good faith effort to get the necessary certification or other evidence of immunizations, in which case the 14-day period may be extended to not more than 30 days; or (2) the student has been legally exempted for medical reasons or because the child's parents hold genuine and sincere religious beliefs which are contrary to vaccination practices (PHL § 2164[7][a], [8], [9]; Education Law § 914[1]; 10 NYCRR § 66-1.3).

In January 2015, 102 people from 14 states were reported to have measles in the United States (U.S.). Most of these cases are part of a large, multi-state measles outbreak linked to an amusement park in California. DOH reports that due to high rates of immunization, the measles virus does not readily circulate in the U.S. In 2014, many of the 644 reported cases of disease in the U.S. were associated with travel from other countries having lower measles immunization rates. Since measles continues to be endemic outside of the U.S., the potential for outbreaks domestically remains. This is especially true when unvaccinated individuals, who may cluster in communities, are exposed to the imported measles virus. <http://emergency.cdc.gov/han/han00376.asp>

According to both the DOH and the Centers for Disease Control and Prevention (CDC), measles can be prevented by getting the safe and highly effective Measles, Mumps, and Rubella (MMR) vaccine. Individuals are not considered at risk of acquiring measles if they are immune. Individuals considered immune to measles are those who:

- have received two doses of MMR vaccination
- were born prior to 1/1/57
- have a blood test confirming immunity
- have a history of laboratory-confirmed measles

The DOH reports that NYS has a strong vaccination program along with a school system with high rates of MMR vaccination. As stated by the DOH, individuals not vaccinated are 22 times more likely to acquire measles than those who have received two measles vaccinations, usually given as the MMR vaccine. http://www.health.ny.gov/diseases/communicable/measles/fact_sheet.htm

According to the CDC, measles is a contagious viral respiratory disease which is spread through the air by the coughing and sneezing of an infected individual. It begins with a fever, runny nose, cough, sore throat and red eyes. It is followed by a rash that begins on the face and descends to the trunk and extremities. Individuals infected are contagious four days before the rash through four days after the rash began. The measles virus can live for up to two hours on a surface or in an airspace where the infected person has been present. Approximately 3 out of 10 individuals who are infected with measles can develop one or more complications: pneumonia, ear infections, or diarrhea. For FAQs please refer to: <http://www.cdc.gov/vaccines/vpd-vac/measles/faqs-dis-vac-risks.htm>

The single best way to prevent measles is to be vaccinated. Many New Yorkers have been vaccinated but everyone should check with their health care provider if

uncertain of their measles immune status. In the event of an outbreak of a vaccine preventable disease, all schools must maintain a complete and current list of susceptible students e.g. students who have been granted exemptions, are in process and/or awaiting serologic testing results. Please refer to the SED *Immunization Guidelines for Schools* for more details:

<http://www.p12.nysed.gov/sss/documents/IMMUNIZATIONGUIDELINESFORSCHOOLS.pdf>

School administrators are reminded to review the district's policies to ensure compliance with PHL §2164. Administrators should also share this information with their district medical director and professional healthcare personnel (school nurses). Questions should be directed to your local county health department or the New York City Department of Health and Mental Hygiene where applicable, or the Office of Student Support Services at 518-486-6090.

Additional Resources:

New York State Department of Health Urging Unvaccinated Individuals to Monitor for Symptoms:

https://www.health.ny.gov/press/releases/2015/2015-01-30_measles.htm

Communicable Disease Reporting Requirements in New York State

http://www.health.ny.gov/forms/instructions/doh-389_instructions.pdf

CDC's Measles (Rubeola) website:

<http://www.cdc.gov/measles/index.html>

CDC's Measles Vaccination website:

<http://www.cdc.gov/measles/vaccination.html>