

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

NICK LYON DIRECTOR

2018 Medical Contraindication Form

Michigan immunization law requires that a child enrolled in a school or childcare center be immunized against the diseases specified unless a valid exemption applies. A child is exempt from these requirements for any specific immunization, for any period of time for which a physician certifies that a specific immunization is or may be detrimental to the child's health. A Guide to Contraindications and Precautions to Commonly Used Vaccines can be found at www.immunize.org/catg.d/p3072a.pdf. Any child with a medical contraindication to a particular vaccination is considered susceptible to that vaccine-preventable disease, and is subject to exclusion from the school or childcare center if an outbreak of the disease occurs in the school or childcare center.

PLEASE PRI	NT:	
	NAME OF CHILD (Last, First, Middle Initial)	BIRTH DATE (Mo/Day/Yr)
Preschool	Program or Childcare Center or School Name:	
The following	immunization(s) are medically contraindicated:	
	DTaP, DT, Td, Tdap (Diphtheria, Tetanus, Pertussis)	Haemophilus influenzae type b
	Polio	Pneumococcal Conjugate
	Hepatitis B	Varicella (chickenpox)
	MMR (Measles, Mumps, Rubella)	Meningococcal Conjugate
Commonly Usea	id medical contraindications at www.immunize.org/catg.d/p3072a.p	
	PRINT NAME & ADDRESS OF PHYSICIAN	TELEPHONE ()
	PHYSICIAN'S SIGNATURE (REQUIRED)	DATE
File in the child	''s normanent record	

DCH-0713

AUTHORITY: P. A. 368, PART 92, 1978, as amended

Rev. January 1, 2018

Guide to Contraindications and Precautions to Commonly Used Vaccines 1.*

Vaccine	Contraindications	Precautions
Hepatitis B (HepB)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Hypersensitivity to yeast	Moderate or severe acute illness with or without fever Infant weighing less than 2000 grams (4 lbs, 6.4 oz) ²
Rotavirus (RV5 [RotaTeq], RV1 [Rotarix])	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Severe combined immunodeficiency (SCID) History of intussusception	Moderate or severe acute illness with or without fever Altered immunocompetence other than SCID Chronic gastrointestinal disease ³ Spina bifida or bladder exstrophy ³
Diphtheria, tetanus, pertussis (DTaP) Tetanus, diphtheria, pertussis (Tdap) Tetanus, diphtheria (DT, Td)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component For pertussis-containing vaccines: encephalopathy (e.g., coma, decreased level of consciousness, prolonged seizures) not attributable to another identifiable cause within 7 days of administration of a previous dose of DTP or DTaP (for DTaP); or of previous dose of DTP, DTaP, or Tdap (for Tdap)	 Moderate or severe acute illness with or without fever Guillain-Barré syndrome (GBS) within 6 weeks after a previous dose of tetanus toxoid-containing vaccine History of Arthus-type hypersensitivity reactions after a previous dose of tetanus or diphtheria toxoid-containing vaccine (including MenACWY); defer vaccination until at least 10 years have elapsed since the last tetanus-toxoid containing vaccine For pertussis-containing vaccines: progressive or unstable neurologic disorder (including infantile spasms for DTaP), uncontrolled seizures, or progressive encephalopathy until a treatment regimen has been established and the condition has stabilized For DTaP only: Temperature of 105° F or higher (40.5° C or higher) within 48 hours after vaccination with a previous dose of DTP/DTaP Collapse or shock-like state (i.e., hypotonic hyporesponsive episode) within 48 hours after receiving a previous dose of DTP/DTaP Seizure within 3 days after receiving a previous dose of DTP/DTaP Persistent, inconsolable crying lasting 3 or more hours within 48 hours after receiving a previous dose of DTP/DTaP
Haemophilus influenzae type b (Hib)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Age younger than 6 weeks	Moderate or severe acute illness with or without fever
Inactivated poliovirus vaccine (IPV)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	Moderate or severe acute illness with or without fever Pregnancy
Pneumococcal (PCV13 or PPSV23)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component (including, for PCV13, to any diphtheria toxoid-containing vaccine)	Moderate or severe acute illness with or without fever
Measles, mumps, rubella (MMR) ⁴	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency or long-term immunosuppressive therapy ⁵), or persons with human immunodeficiency virus [HIV] infection who are severely immunocompromised ⁶ Pregnancy	Moderate or severe acute illness with or without fever Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product) ⁷ History of thrombocytopenia or thrombocytopenic purpura Need for tuberculin skin testing ⁸
Varicella (Var)⁴	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency or long-term immunosuppressive therapy ⁵), or persons with HIV infection who are severely immunocompromised ⁶ Pregnancy	Moderate or severe acute illness with or without fever Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product) ⁷ Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination.

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Vaccine	Contraindications	Precautions
Hepatitis A (HepA)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	Moderate or severe acute illness with or without fever
Influenza, inactivated injectable (IIV) ^{9,10}	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	Moderate or severe acute illness with or without fever History of GBS within 6 weeks of previous influenza vaccination Egg allergy other than hives (e.g., angioedema, respiratory distress, lightheadedness, or recurrent emesis); or required epinephrine or another emergency medical intervention (IIV may be administered in an inpatient or outpatient medical setting, under the supervision of a healthcare provider who is able to recognize and manage severe allergic conditions) ⁹
Influenza, recombinant (RIV) ^{9,10}	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component. RIV does not contain any egg protein.	Moderate or severe acute illness with or without fever History of GBS within 6 weeks of previous influenza vaccination
Human papillomavirus (HPV)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	Moderate or severe acute illness with or without fever Pregnancy
Meningococcal: conjugate (MenACWY), serogroup B (MenB), polysaccharide (MPSV4)	Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component	Moderate or severe acute illness with or without fever
Herpes zoster (HZV) ⁴	Severe allergic reaction (e.g., anaphylaxis) to a vaccine component Severe cellular immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, or long-term immunosuppressive therapy ⁵) or persons with HIV infection who are severely immunocompromised. Pregnancy	Moderate or severe acute illness with or without fever Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination.

FOOTNOTES

- 1. The Advisory Committee on Immunization Practices (ACIP) recommendations and package inserts for vaccines provide information on contraindications and precautions related to vaccines. Contraindications are conditions that increase chances of a serious adverse reaction in vaccine recipients and the vaccine should not be administered when a contraindication is present. Precautions should be reviewed for potential risks and benefits for vaccine reipient. For a person with a severe allergy to latex (e.g., anaphylaxis), vaccines supplied in vials or syringes that contain natural rubber latex should not be administered unless the benefit of vaccinaton clearly outweighs the risk for a potential allergic reaction. For latex allergies other than anaphylaxis, vaccines supplied in vials or syringes that contain dry, natural rubber or natural rubber latex may be administered. Whether and when to administer DTaP to children with proven or suspected underlying neurologic disorders should be decided on a case-by-case basis.
- 2. Hepatitis B vaccination should be deferred for preterm infants and infants weighing less than 2000 g if the mother is documented to be hepatitis B surface antigen (HBsAg)-negative at the time of the infant's birth. Vaccination can commence at chronological age 1 month or at hospital discharge. For infants born to women who are HBsAg-positive, hepatitis B immunoglobulin and hepatitis B vaccine should be administered within 12 hours of birth, regardless of weight.
- For details, see CDC. "Prevention of Rotavirus Gastroenteritis among Infants and Children: Recommendations of the Advisory Committee on Immunization Practices. (ACIP)" MMWR 2009; 58(No. RR-2), available at www.cdc.gov/vaccines/hcp/acip-recs/index.html.
- MMR, varicella, or zoster vaccines can be administered on the same day. If not administered on the same day, these live vaccines should be separated by at least 28 days.
- 5. Immunosuppressive steroid dose is considered to be 2 or more weeks of daily receipt of 20 mg prednisone or equivalent. Vaccination should be deferred for at least 1 month after discontinuation of such therapy. Providers should consult ACIP recommendations for complete information on the use of specific live vaccines among persons on immune-suppressing medications or with immune suppression because of other reasons.

- HIV-infected children may receive varicella and measles vaccine if CD4+ T-lymphocyte count is >15%. (Source: Adapted from American Academy of Pediatrics. Immunization in Special Clinical Circumstances. In: Pickering LK, ed. Red Book: 2015 Report of the Committee on Infectious Diseases. 30th ed. Elk Grove Village, IL: American Academy of Pediatrics: 2015.)
- 7. Vaccine should be deferred for the appropriate interval if replacement immune globulin products are being administered (see "Table 5. Recommended Intervals Between Administration of Anti-body-Containing Products and Measles- or Varicella-Containing Vaccine, by Product and Indication for Vaccination" found in "General Recommendations on Immunization: Recommendations of the Advisory Committee on Immunization Practices (ACIP)" MMWR 2011;60(No. RR-2) available at www.cdc.gov/ vaccines/hcp/acip-recs/index.html.)
- Measles vaccination might suppress tuberculin reactivity temporarily. Measles-containing vaccine may be administered on the same day as tuberculin skin testing, or should be postponed for at least 4 weeks after the vaccination.
- For additional information on use of influenza vaccines among persons with egg allergy, see CDC. "Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP) – United States, 2016–17 Influenza Season. MMWR 2016;64(RR-5):1–54 available at www.cdc.gov/mmwr/volumes/65/rr/rr6505a1.htm.
- Live attenuated influenza vaccine (LAIV) should not be used during the 2016–2017 influenza season.
- * Adapted from "Table 6. Contraindications and Precautions to Commonly Used Vaccines" found in: CDC. "General Recommendations on Immunization: Recommendations of the Advisory Committee on Immunization Practices (ACIP)." MMWR 2011;60(No. RR-2), p. 40–41, and from Hamborsky J, Kroger A, Wolfe C, eds. Appendix A. Epidemiology and Prevention of Vaccine-Preventable Diseases, 13th.