## **Immunity and Medical Exemptions**

Oregon law allows both immunity and medical exemptions. A medical exemption or immunity exemption is a written, signed document from a physician stating that a child should not receive one or more specific immunizations.

<u>Immunity Exemption:</u> The child had a disease or had a blood test showing immunity. Children with this kind are considered complete for the vaccines as they cannot contract the disease.

Medical Exemption: A child has a medical condition that puts the child at risk of harm if they receive the vaccine. Children with this type of exemption are considered susceptible because if they are exposed to a disease that they haven't been vaccinated for, they are likely to contract it.

Documentation requires a letter signed by a licensed physician stating the child's name, birth date, medical condition that contradicts the vaccine, list of vaccines contraindicated, approximate time until condition resolves, if applicable, and the physician's signature and date. The letter must be submitted in English and must have the printed name, address, and phone number of the physician who signed it.

These requests should be brought to the school. The school nurse will forward this information to the Multnomah Education Service District's Immunization Program, who will then send it to the Multnomah County Health District for review and determination of status.

All medical exemption requests are reviewed by the health department. Evaluation and determination of exemption status is based on criteria established by the Centers for Disease Control (CDC). Exemptions will be identified as temporary (short term), or permanent. Temporary exemptions require a future review date, at which time the child is required to obtain the necessary vaccinations or a review to determine whether there should be a continuation of the exemption. A child with a permanent exemption will not need to be reviewed again.

## **Medical Exemption Process**

Student has a health condition which may prevent/contraindicate immunizations.

 $NO \rightarrow$ 

Proceed with immunizations as per schedule requirements

## **↓** YES

Physician letter submitted to school nurse by parent.



School Nurse forwards physician letter to immunization supervisor for review



Supervisor forwards physician letter and related information to MCHD for review. Copy kept at MESD pending results.



MCHD Physician reviews request, determines if temporary or permanent exemption. Results returned to MESD.



Proceed with immunizations as per schedule requirements



Results forwarded to school nurse to file in immunization record. Copy kept at MESD. If temporary exemption, is reviewed as per date indicated.