7. Laws

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- Disclosure of Immunization Records (RSMo 167.183)
- Contagious Diseases Excluded from School (RSMo 167.191)
- Consent to Immunize a Child (RSMo 431.058)
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**INTRODUCTION**
Federal and state immunization laws and rules provide an important tool for preventing disease outbreaks. State laws requiring the immunization of school children are in effect in all 50 states, the District of Columbia, and Puerto Rico. Many immunization laws refer to child care and school settings, because these are settings in which immunization status can be easily assessed and where children, adolescents, and adults congregate and communicable diseases can flourish.

The various laws that refer to immunizations are summarized in this section. Missouri statutes and the specific rules that apply to them are reproduced in full in Appendixes G and H, pp. 197 and 205.
are reproduced in full in Appendixes G and H, pp. 197 and 205, from the Revised Statutes of the State of Missouri (RSMo) and rules in the Code of State Regulations (CSR). Depending upon how you work with immunizations, different parts of this section will be of interest to you.

If you administer immunizations, pay particular attention to:
- consent to immunize a child law;
- Vaccine Information Statement requirement;
- Missouri school immunization law;
- sharing of immunization data;
- state-mandated benefits for child health services.
- Vaccine Adverse Events Reporting System;
- National Vaccine Injury Compensation Program;

If you are a school nurse, pay particular attention to:
- Missouri school immunization law;
- excluding children with contagious diseases from school;
- sharing of immunization data.

If you work in a licensed child care facility, pay particular attention to:
- Missouri child care immunization law;
- sharing of immunization data.

**MISSOURI IMMUNIZATION STATUTES AND RULES**

**Missouri's School Immunization Statute and Rule (RSMo 167.181)**

The Missouri legislature first enacted a school immunization law in 1961. It has been changed several times to incorporate recommendations of the major advisory bodies that govern immunization practice (the U.S. Public Health Service Advisory Committee on Immunization Practices [ACIP], the American Academy of Pediatrics [AAP] Committee on Infectious Diseases, and the American Academy of Family Physicians).

Each school is required to maintain, on file, immunization records for each student enrolled. The Missouri Department of Health and Senior Services or the local health department may have access to these files at any time. Any immunization that has been received after the beginning of the 1990-1991 school year must be recorded with the month, day, and year in order to be acceptable for school documentation.

There are 2 circumstances under which evidence of immunization is not required. A child may continue to attend school without required immunizations if:
1) a physician submits a signed statement to the administrator of the school stating that an immunization is contraindicated for medical reasons or because of laboratory confirmation of adequate immunity. (See Figure 7-1, p. 108.)

2) a child’s parent or guardian or an adult submits a signed statement to the administrator of the school stating that the person has not been immunized because of religious beliefs. The immunization(s) objected to must be specified in the statement. (See Figure 7-2, p. 108.)

A child may also attend school if he or she has begun the process of obtaining the required immunizations and can provide satisfactory evidence that he or she is doing so in the prescribed manner. (See Figure 7-3, p. 109.)

Signature cards for all 3 circumstances are available from the Department of Health and Senior Services or your local health department.

Required immunizations are listed in 19 CSR 20-28.010 (Appendix H, p. 205). The Department of Health and Senior Services issues this list to schools and to health care providers each year. Requirements for school year 2001-2002 are also in Figure 1-10, p. 17.

Retention of School Immunization Records

Schools must retain immunization records of all students who have attended until 2 years after the student has reached the age of majority, or 23 years. Schools must retain exemption forms until a student graduates from high school (Missouri Public School Records Manual, Missouri Secretary of State, Local Records Agency, 1998). Schools must retain cumulative reports on immunizations permanently.

**Missouri’s Child Care Immunization Statute and Rule (RSMo 210.003)**

Missouri’s child care immunization law was enacted in 1988. The requirements reflect the recommendation of the Advisory Committee on Immunization Practices and the American Academy of Pediatrics. Each child care facility is required to maintain, on file, immunization records for each person enrolled. The Missouri Department of Health and Senior Services or the local health department may have access to these files at any time.

There are 2 circumstances under which evidence of immunization is not required. A child may continue to attend a child care facility without required immunizations if:

1) a physician submits a signed statement to the administrator of the child care facility stating that an immunization is contraindi-
1)  a child’s parent or guardian submits a signed statement to the administrator of the school or child care facility stating that the person has not been immunized because of philosophical objections. The immunization(s) objected to must be specified in the statement. (See Figure 7-4, p. 109.)

A child may also attend the child care facility if he or she has begun the process of obtaining the required immunizations and can provide satisfactory evidence that he or she is doing so in the prescribed manner. Signature cards for all 3 circumstances are available from the Department of Health and Senior Services or your local health department.

Required immunizations are listed in 19 CSR 20-28.040 (Appendix H, p. 215). The Department of Health and Senior Services issues this list to child care facilities and health care providers each year. Requirements for school year 2001-2002 are also in Figure 1-10, p. 17.

**Missouri law requires that all pregnant women be screened for hepatitis B.**

**Blood Tests for Pregnant Women (RSMo 210.030)**

As of May 3, 1993, Missouri law requires that all pregnant women be serologically screened for hepatitis B during their first prenatal examination or no later than 20 days after the first examination. If a pregnant woman has a positive test for HBsAg, the health care provider must report the results to the local public health agency or to the Missouri Department of Health and Senior Services. (See Section 4. Screening, pp. 60-61, for additional information on screening pregnant women for hepatitis B.)

**Disclosure of Immunization Records (RSMo 167.183)**

Missouri law allows health care providers, child care facilities, and schools to share a child’s immunization information without the consent of that individual or his or her parent or guardian.

**Contagious Diseases Excluded from School (RSMo 167.191)**

In order to protect all school children, state statute prohibits any child from attending school while afflicted with a contagious disease or if a child is liable to transmit a contagious disease. A child who is excluded from school may be readmitted either:

- with certification in writing by an attending physician that the child is not infectious, or;
- after a period of time equal to the longest period of communicability of the disease.
A child who is not immunized is “liable to transmit” a disease during an outbreak, so that child must be excluded from school unless and until he or she is vaccinated or until the outbreak is over.

Specific information concerning enforcement and practice of this statute are in 19 CSR 20-20.030 (Appendix H, p. 209).

**Consent to Immunize a Child (RSMo 431.058)**

In 1996, the Missouri legislature enacted a law allowing adults other than a child’s parent or legal guardian to give consent for a child to receive an immunization under a number of circumstances:

- A parent may delegate his or her authority to another adult in writing.
- Another adult may give consent if a parent is not “reasonably available,” that is, if the location of a parent cannot be determined in spite of “diligent searching.” The adult who gives consent must confirm in writing that a parent is not reasonably available.
- A grandparent, brother, sister, aunt, uncle, or stepparent who is the primary caregiver of a child may delegate authority to give consent for immunization to another adult.
- A document from another state, territory, or country that contains appropriate information to give consent is acceptable.

A health care provider must give the same vaccine information statements to an adult designated to give consent and must obtain a signature on those materials in the same way as a parent. A person may not consent to the immunization if the person has actual knowledge that the parent has refused to give consent for the child to receive the immunization.

**State-Mandated Benefits for Immunization (RSMo 376.1215)**

According to Missouri law, individual and group health insurance plans must provide immunizations for children from birth to age 5. This statute prohibits charges such as copayments and deductibles for immunizations. All routine immunizations recommended by the ACIP are covered.

There are exceptions to this statute due to federal law. For more information, call the Immunization Program at 800-699-2313.

**Federal Immunization Laws**

**National Vaccine Injury Compensation Program (NVICP)**

The National Childhood Vaccine Injury Act of 1986 established the National Vaccine Injury Compensation Program (NVICP). This pro-
gram is a federal, no-fault system designed to compensate those individuals, or families of individuals, who have been injured by childhood vaccines, whether administered in the public or private sector.

The vaccines covered by the program include diphtheria, tetanus, pertussis (DTP, DTaP, DT, TT, or Td), measles, mumps, rubella (MMR or any components), polio (OPV or IPV), hepatitis B, Haemophilus influenzae type b, and varicella vaccines. As vaccines are added to the program, retroactive coverage will be provided for those claiming injury or death resulting from the added vaccines.

A claim may be made for any injury or death thought to be a result of a covered vaccine. These injuries may include, but are not limited to, anaphylaxis, paralytic polio, and encephalopathy. The injured individual may file; or a parent, legal guardian, or trustee may file on behalf of a child or an incapacitated person.

For injuries resulting from a vaccine administered on or after October 1, 1988, the following restrictions apply:

a. In the case of an injury, the effects must have continued at least 6 months after vaccine administration, and the claim must be filed within 36 months after the first symptoms appeared.

b. In the case of a death, the claim must be filed within 24 months of the death and within 48 months after the onset of the vaccine-related injury from which the death occurred.

The time for filing claims for injuries resulting from vaccines administered prior to October 1, 1988, has expired.

To obtain an information packet detailing how to file a claim, criteria for eligibility, and the documentation required, you may call the toll-free number for the National Vaccine Injury Compensation Program, 800-338-2382. Or you may write to:

National Vaccine Injury Compensation Program
Parklawn Building, Room 8A-35
5600 Fischers Lane
Rockville, MD 20857

Other components of the National Childhood Vaccine Injury Act relate to the Vaccine Adverse Events Reporting System (VAERS), the recording of immunization information and requirements for providing risk/benefit information to vaccine recipients or their parents.

Vaccine Adverse Event Reporting System (VAERS)

VAERS is operated by the Food and Drug Administration (FDA) and the CDC. Health care providers who administer vaccines are re-
required to report any adverse event by completing a VAERS reporting form, included as Appendix F, p. 195, of this guide. The VAERS form may also be obtained by calling 800-822-7967.

The following events must be reported:

a. Any event set forth in the Vaccine Injury Table, Appendix E, p. 189, of this guide, that occurs within the time period specified or within 7 days, if that is longer.

b. Any contraindicating event listed in the manufacturer’s package insert.

In addition, VAERS accepts all reports by any interested party of proven or suspected adverse events that occur after administration of any vaccine.

**Vaccine Information Statements, Vaccine Information Materials, Fact Sheets**

In April 1992, a federal law was enacted to require providers to provide vaccine information to anyone receiving immunizations. This information is referred to as Vaccine Information Statements or VISs, Vaccine Information Materials or VIMs, or vaccine fact sheets.

The amendment requires that a specific Vaccine Information Sheet be given to the legal representative of any child or to any other individual, including adults, who will be immunized each time a particular vaccine is administered. Immunizations for which information must be given are measles, mumps, rubella, poliomyelitis, diphtheria, tetanus, pertussis, Haemophilus influenzae type b, hepatitis B, and varicella. VISs exist for several vaccines not covered by the NVICP. These VISs must be used when the vaccine given has been purchased under CDC contract. Currently, the VISs available under this category are for immunization for influenza, hepatitis A, PCV7, PPV23, Lyme disease, and meningococcal disease.

In Missouri the patient or guardian must give written consent for each vaccination. Missouri providers may use either forms that are altered to include a signature block or a separate immunization consent and history form. The immunization consent and history form may also serve as an immunization record, which can be a convenient resource when conducting assessments or when providing information to parents, to schools or to other health care providers. A sample of the form is in Appendix D, p. 187.

Camera-ready copies of the VISs and materials in languages other than English are available from the CDC, Immunization Action Coalition, and Missouri Department of Health and Senior Services.
**Figure 7-1. Medical Immunization Exemption Form**

MISSOURI DEPARTMENT OF HEALTH  
SECTION OF VACCINE-PREVENTABLE AND  
TUBERCULOSIS DISEASE ELIMINATION  
MEDICAL IMMUNIZATION EXEMPTION  
REQUIRED UNDER THE STATE IMMUNIZATION LAWS (Section 167.181 and Section 210.003, RSMo) FOR SCHOOL, PRE-SCHOOL, DAY CARE AND NURSERY SCHOOL ATTENDANCE

<table>
<thead>
<tr>
<th>THIS IS TO CERTIFY THAT</th>
<th>NAME OF PATIENT (PRINT OR TYPE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SHOULD BE EXEMPTED FROM RECEIVING THE FOLLOWING CHECKED IMMUNIZATION(S) BECAUSE:  
☐ The child has documented laboratory evidence of immunity to the disease. (Attach the lab slip to this form.)  
☐ In my medical judgment, the immunization(s) checked would endanger the child's health or life.  
☐ Diphtheria ☐ Tetanus ☐ Pertussis ☐ Td ☐ Polio ☐ Hib  
☐ MMR ☐ Measles ☐ Mumps ☐ Rubella ☐ Hepatitis B ☐ Other  

1. Unimmunized children have a greater risk of getting these vaccine-preventable diseases which can lead to serious complications.  
2. Unimmunized children are subject to exclusion from child care facilities and school when outbreaks of vaccine-preventable diseases occur.

<table>
<thead>
<tr>
<th>PHYSICIAN NAME (PRINT OR TYPE)</th>
<th>PHYSICIAN REGISTRATION NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE OF PHYSICIAN</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

MO 560-0807 (6-01)  
Imm.P12

**Figure 7-2. Religious Immunization Exemption Form**

MISSOURI DEPARTMENT OF HEALTH  
SECTION OF VACCINE-PREVENTABLE AND  
TUBERCULOSIS DISEASE ELIMINATION  
RELIGIOUS IMMUNIZATION EXEMPTION  
REQUIRED UNDER THE STATE IMMUNIZATION LAW (Section 167.181, RSMo) FOR SCHOOL ATTENDANCE

<table>
<thead>
<tr>
<th>THIS IS TO CERTIFY THAT</th>
<th>NAME OF CHILD (PRINT OR TYPE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SHOULD BE EXEMPTED FROM RECEIVING THE FOLLOWING CHECKED IMMUNIZATION(S) BECAUSE IMMUNIZATION VIOLATES MY RELIGIOUS BELIEFS:  
☐ Diphtheria ☐ Tetanus ☐ Pertussis ☐ Td ☐ Polio ☐ Other  
☐ MMR ☐ Measles ☐ Mumps ☐ Rubella ☐ Hepatitis B

1. Unimmunized children have a greater risk of getting these vaccine-preventable diseases which can lead to serious complications.  
2. Unimmunized children are subject to exclusion from school when outbreaks of vaccine-preventable diseases occur.

<table>
<thead>
<tr>
<th>PARENT/GUARDIAN NAME (PRINT OR TYPE)</th>
<th>PARENT/GUARDIAN SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MO 100-1723 (4-06)  
Imm.P11A

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Figure 7-3. Immunizations In Progress Form

<table>
<thead>
<tr>
<th>MISSOURI DEPARTMENT OF HEALTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION OF VACCINE-PREVENTABLE AND TUBERCULOSIS DISEASE ELIMINATION</td>
</tr>
<tr>
<td>IMMUNIZATIONS IN PROGRESS</td>
</tr>
</tbody>
</table>

REQUIRED UNDER THE STATE IMMUNIZATION LAWS (Section 167.181 and Section 210.003, RSMo Cum. Supp. 1990) FOR SCHOOL, PRESCHOOL, DAY CARE AND NURSERY SCHOOL ATTENDANCE

THIS IS TO CERTIFY THAT

| NAME OF CHILD (PRINT OR TYPE) |

received the following immunization(s) on ________________, as required by State Immunization Laws

☐ DIPHTHERIA ☐ TETANUS ☐ PERTUSSIS ☐ Td ☐ POLIO ☐ Hib
☐ MMR ☐ MR ☐ MEASLES ☐ MUMPS ☐ RUBELLA ☐ Hepatitis B
☐ VARICELLA

and is scheduled to return on ________________, for the following immunization(s)

NOTE: This child is in compliance with Missouri Immunization Laws as long as he/she continues to receive the appropriate immunization(s) at the correct intervals according to the Missouri Department of Health Immunization Schedule.

| PHYSICIAN NAME (PRINT OR TYPE) |
| PHYSICIAN SIGNATURE |

PUBLIC HEALTH NURSE NAME DATE CITY OR COUNTY OF ASSIGNMENT

MO 580-0828 (6-01)

Figure 7-4. Parent/Guardian Immunization Exemption Form
(For Child Care Facilities Only)

<table>
<thead>
<tr>
<th>MISSOURI DEPARTMENT OF HEALTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION OF VACCINE-PREVENTABLE AND TUBERCULOSIS DISEASE ELIMINATION</td>
</tr>
<tr>
<td>PARENT/GUARDIAN IMMUNIZATION EXEMPTION</td>
</tr>
</tbody>
</table>

REQUIRED UNDER THE STATE IMMUNIZATION LAWS (Section 210.003, RSMo) FOR PRESCHOOL, DAY CARE AND NURSERY SCHOOL ATTENDANCE

THIS IS TO CERTIFY THAT I, THE PARENT/GUARDIAN OF

| NAME OF CHILD (PRINT OR TYPE) |

DO OBJECT TO MY CHILD RECEIVING THE FOLLOWING CHECKED IMMUNIZATION(S):

☐ Diphtheria ☐ Tetanus ☐ Pertussis ☐ Polio ☐ Hib
☐ MMR ☐ Measles ☐ Mumps ☐ Rubella ☐ Hepatitis B
☐ Varicella

1. Unimmunized children have a greater risk of getting these vaccine-preventable diseases which can lead to serious complications.
2. Unimmunized children are subject to exclusion from child care facilities and school when outbreaks of vaccine-preventable diseases occur.

| PARENT/GUARDIAN NAME (PRINT OR TYPE) |
| PARENT/GUARDIAN SIGNATURE |

DATE

MO 580-0959 (6-01)