NSW SCHOOL VACCINATION PROGRAM
NEWSLETTER

Each year NSW Health works in partnership with schools to offer the vaccines recommended by the National Health and Medical Research Council (NHMRC) for adolescents as part of the school vaccination program.

In 2015 the following vaccines will be offered:

**Year 7 students***
- dTpa vaccine (Diphtheria, Tetanus & Pertussis (whooping cough)) as a single dose
- varicella vaccine (chickenpox) as a single dose; and
- human papillomavirus (HPV) vaccine in a 3-dose schedule at 0, 2 and 6 months (students who commence HPV vaccination in Year 7 but do not complete the course may be offered catch-up doses at school in Year 8)

**Year 11-12 students***
- measles-mumps-rubella (MMR) vaccine as a single dose as part of a catch-up vaccination program for students who are not fully protected.

PLEASE CHECK HOW MANY DOSES OF MMR VACCINE YOUR CHILD HAS RECEIVED BY CHECKING THEIR BABY VACCINATION BOOK (BLUE BOOK) OR CONTACTING MEDICARE ON 1800 653 809. IF THEY HAVE EVIDENCE OF TWO PREVIOUS DOSES – DO NOT COMPLETE THE CONSENT FORM.

* The Parent Information Kits contain a consent form, information sheet and privacy statement that details how personal information will be collected, stored and utilised.

Consent form kits will be sent home to parents/guardians. To consent to the vaccination of their child, parents/guardians are advised to:
- read all the information provided
- complete the consent form, including signing their name next to the vaccine/s they would like their child to receive
- return the completed consent form to their child’s school
- ensure that their child eats breakfast on the day of the school vaccination clinic.

Parents/guardians who wish to withdraw their consent for any reason may do so by writing to the school Principal or phoning the school. The Procedure for Withdrawal of Consent is available on the NSW Health website at [www.health.nsw.gov.au/immunisation](http://www.health.nsw.gov.au/immunisation)

To improve vaccination completion, students will be opportunistically offered any missed doses throughout the year where possible.

Please note that for HPV vaccine only, parents/guardians must record their Medicare Number (all 10 digits and the 11th number beside the child’s name) on the consent form, as this is required to record the student’s information on the National HPV Vaccination Register and (for female students only) link to the National or State Cervical Screening Program.

A Record of Vaccination will be provided to each student vaccinated at each clinic. Parents/guardians should ensure that this record is kept for future reference and should not assume that their child has been vaccinated if they do not receive this Record of Vaccination.