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CHAPTER 21

[Reserved]

CHAPTER 23. SCHOOL HEALTH

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Authority

The provisions of this Subchapter A issued under the Public School Code of 1949 (24 P.S. §§ 14-1401—14-1422), unless otherwise noted.

Source

The provisions of this Subchapter A adopted October 30, 1959, unless otherwise noted.

HEALTH SERVICES**§ 23.1. Required health services.**

School districts and joint school boards shall provide the following health services for children of school age who are attending or who should attend an elementary, grade or high school, either public or private, and children who are attending a kindergarten which is an integral part of a local school district:

- (1) Medical examinations.

- (2) Dental examinations.
- (3) Vision screening tests.
- (4) Hearing screening tests.
- (5) Threshold screening tests.
- (6) Height and weight measurements.
- (7) Maintenance of medical and dental records.
- (8) Tuberculosis tests.
- (9) Special examinations.

Cross References

This section cited in 28 Pa. Code § 23.2 (relating to medical examinations); and 28 Pa. Code § 23.21 (relating to general).

§ 23.2. Medical examinations.

(a) Medical examinations as required by § 23.1 (relating to required health services) shall be provided on original entry into school, in grade six and in grade 11.

(b) For purposes of this section, on original entry into school means entrance into kindergarten if it is part of the school system or into the first grade if the school system does not have a kindergarten. In instances where there are kindergartens in some schools of a district and not in others, the board or joint board may decide whether medical and dental examinations shall begin in grade one or in the kindergarten.

(c) Children transferred from other school systems shall be examined as soon as possible after the transfer regardless of their age or grade if an adequate health record is not made available by the original school.

(d) Medical examinations shall be conducted carefully and in sufficient detail to command medical respect and to provide an educational experience for the child and his parents. Examinations shall be scheduled so that an average of no more than four children will be examined in an hour. Results of vision and hearing screening tests shall be available to the physician at the time of the examination.

(e) The school medical examination may be conducted by the family physician and reported to the school on forms supplied by the school. Administrators are urged to have as many children examined privately as possible to provide for continuity in the medical care of the child. Payment for these examinations shall be the responsibility of the parent; however, children examined privately shall be counted as part of the enrollment for reimbursement purposes as provided in § 23.23 (relating to maximum reimbursement for medical services).

Cross References

This section cited in 22 Pa. Code § 51.14 (relating to medical examinations); 28 Pa. Code § 23.21 (relating to general); 55 Pa. Code § 3270.131 (relating to health information); 55 Pa. Code § 3280.131 (relating to health information); 55 Pa. Code § 3290.131 (relating to health information); and 55 Pa. Code § 3800.312 (relating to additional requirements).

§ 23.3. Dental examinations.

(a) Dental examinations shall be required on original entry into school and in grades three and seven. In instances where there are kindergartens in some schools of a district and not in others, the board or joint board may decide whether medical and dental examinations shall begin in the first grade or in the kindergarten.

(b) Children transferred from other school systems shall be examined as soon as possible after the transfer regardless of their age or grade if an adequate dental record is not made available by the original school.

(c) Dental examinations shall be conducted with sufficient care and detail to command dental respect and to provide an educational experience for the child and his parents. Examinations shall be scheduled so that an average of no more than eight children are examined in an hour.

(d) The school dental examination may be conducted by the family dentist and reported to the school on forms supplied by the school. Administrators are urged to have as many children examined privately as possible to provide for continuity in the dental care of the child. Payment for these examinations shall be the responsibility of the parent; however, children examined privately shall be counted as part of the enrollment for reimbursement purposes as provided in § 23.24 (relating to maximum reimbursement for dental services).

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.4. Vision screening tests.

Vision screening tests shall be conducted annually by a nurse, teacher or medical technician. The Snellen Chart or other screening device approved by the Department of Health shall be utilized for vision screening.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.5. Hearing screening tests.

(a) *Identity.* A hearing screening test determines the response to discrete frequencies presented at a specified decibel level.

(b) *Test equipment.* An individual pure tone audiometer or other screening equipment approved by the Department of Health shall be utilized for hearing screening tests.

(c) *Frequencies employed.* Frequencies of 250, 500, 1,000, 2,000 and 4,000 cycles per second shall be employed in screening testing.

(d) *Pupils to be tested.* Each year, pupils in kindergarten, special ungraded classes and grades one, two, three, seven and 11 shall be given a hearing screening test.

Cross References

This section cited in 28 Pa. Code § 23.6 (relating to threshold hearing tests); and 28 Pa. Code § 23.21 (relating to general).

§ 23.6. Threshold hearing tests.

(a) *Identity.* A threshold hearing test determines the lowest decibel level required to elicit responses, at least 50% of the time, to a series of discrete frequencies.

(b) *Test equipment.* An individual pure tone audiometer or other screening equipment approved by the Department of Health shall be utilized for threshold hearing tests.

(c) *Frequencies employed.* Frequencies of 250, 500, 1,000, 2,000, 4,000 and 8,000 cycles per second shall be employed in threshold testing.

(d) *Pupils to be tested.* The following pupils shall be given threshold hearing tests:

(1) A pupil in any grade who is known to have a loss which meets or exceeds the criteria for otologic referral established by the Department of Health shall be given a test each year.

(2) A pupil who fails a hearing screening test given under § 23.5 (relating to hearing screening tests).

(3) A pupil who presents a history of recurrent upper respiratory infection or may evidence other possible ear, nose and throat pathology.

(4) A pupil who shows, by classroom behavior or speech pattern, or both, that a hearing difficulty may exist.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.7. Height and weight measurements.

(a) Height and weight measurement shall be conducted at least once annually and preferably twice annually. Every effort shall be made to determine the pattern of growth for each child so that his weight and height can be interpreted in light of his own growth pattern rather than those of his classmates.

(b) Height and weight measurements shall be conducted by a nurse or teacher.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.8. Maintenance of medical and dental records.

(a) School districts and joint school boards shall maintain comprehensive medical and dental records of each individual child.

(b) The records shall contain all the information the school obtains concerning the health of the child.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.9. Tuberculosis tests.

(a) *Pupils to be tested.* A test for tuberculosis shall be administered upon original entry into school, and in grade nine by a tuberculin test.

(b) *Testing methods.* The tuberculin test may be administered by either the multiple puncture method or by the Mantoux test using intermediate strength tuberculin (PPD 0.0001 mg.).

(c) *All tuberculin reactors.* Tuberculin reactors shall be X-rayed. Chest X-rays of tuberculin reactors may be provided by local public or private health agencies. Arrangements for the examinations are the responsibility of the local school authorities.

(d) *Tuberculin testing programs.* A school board or joint school board which finds that individual schools within the school district or jointure have significant differences in the reactor rate may implement tuberculin testing programs for individual schools in accordance with the following:

(1) A test for tuberculosis shall be done annually on original entry into school and in the ninth grade by a tuberculin test in schools with a prior tuberculin reactor rate of 0.5% or above in these grades.

(2) A test for tuberculosis shall be done every third year upon original entry into school and in the ninth grade by a tuberculin test in those schools with a tuberculin reactor rate below 0.5% in these grades. A school which subsequently shows an increase to a level above 0.5% shall renew the annual testing program until the reactor rate descends below 0.5% again.

Source

The provisions of this § 23.9 amended July 22, 1971, effective July 23, 1971, 1 Pa.B. 2163.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.10. Scoliosis screening.

(a) *Scope.* Screening for scoliosis shall be included in school health programs. Scoliosis is an appreciable lateral deviation of the normally straight vertical line of the spine or one or more lateral rotary curvatures of the spine.

(b) *Pupils to be tested.* A scoliosis screening test shall be administered to students in grade six and grade seven and to age-appropriate students in ungraded classes.

(c) *Testing methods.* Scoliosis screening shall be conducted in accordance with administrative and professional guidelines by personnel who meet the qualifications standards adopted by the Secretary of Health and the Secretary of Education.

(d) *Exceptions.* Students who are under observation or care for scoliosis by a physician or students whose parents object in writing to the screening need not be tested.

(e) *Standards.* The Department of Health will issue administrative guidelines to schools to assure compliance with this section. Results of this screening shall become part of the pupil's school health record.

(f) *Evaluation.* Data from the screening program will be evaluated in 5 years, and the need for its continuation will be considered.

Authority

The provisions of this § 23.10 issued under sections 2102(g) and 2111(b) of The Administrative Code of 1929 (71 P. S. §§ 532(g) and 541(b)); section 1402(a) and (f) of the Public School Code of 1949 (24 P. S. § 14-1402(a) and (f)); and section 6 of the Disease Prevention and Control Law of 1955 (35 P. S. § 521.16).

Source

The provisions of this § 23.10 amended June 11, 1982, effective September 1, 1982, 12 Pa.B. 1819. Immediately preceding text appears at serial page (6928).

Cross References

This section cited in 22 Pa. Code § 23.21 (relating to general).

§ 23.11. Special examinations.

Children who appear to the school teacher, nurse, physician, dentist or dental hygienist to deviate from their normal growth and development pattern shall be reported to the parents or guardians who shall be requested to have the children examined by their family physician or family dentist. The results of these examinations shall be reported to the school. If the children are not examined within a reasonable length of time and their growth and development pattern continues to deviate from normal, the nurse, school physician, school dentist or dental hygienist shall arrange special school examinations for these children.

Authority

The provisions of this § 23.11 issued under sections 2102(g) and 2111(b) of The Administrative Code of 1929 (71 P. S. §§ 532(g) and 541(b)); section 1402(a) and (f) of the Public School Code of 1949 (24 P. S. § 14-1402(a) and (f)); and section 6 of the Disease Prevention and Control Law of 1955 (35 P. S. § 521.16).

Source

The provisions of this § 23.11 adopted June 11, 1982, effective September 1, 1982, 12 Pa.B. 1819.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

REIMBURSEMENT FOR HEALTH SERVICES**§ 23.21. General.**

Each school district and joint school board which renders health services as described in §§ 23.1—23.11 (relating to health services) and which conform to standards approved by the Department of Health shall be reimbursed by the Commonwealth in accordance with §§ 23.21—23.28 (relating to reimbursement for health services).

§ 23.22. Amount of reimbursement.

The amount of reimbursement shall be the actual cost of health services less any charges deemed unreasonable by the Department of Health.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.23. Maximum reimbursement for medical services.

(a) Reimbursement for medical services may not for a school year exceed the sum of \$1.60 multiplied times the number of children enrolled in a school for the entire school term of that school year and for whom the school district or joint school board maintains comprehensive health records, plus a proportionate part of \$1.60 for each child enrolled for a part of the school term of that school year and for whom the school district or joint school board maintains a comprehensive health record.

(b) The average daily membership may be used to determine the amount of reimbursement.

Authority

The provisions of this § 23.23 issued under sections 2102(e) and 2102(g) of The Administrative Code of 1929 (71 P. S. §§ 532(c) and (g)); and section 2505.1 of the Public School Code of 1949 (24 P. S. § 25-2505.1).

Source

The provisions of this § 23.23 amended May 28, 1982, effective May 29, 1982, 12 Pa.B. 1696. Immediately preceding text appears at serial page (3415).

Cross References

This section cited in 28 Pa. Code § 23.2 (relating to medical examinations); and 28 Pa. Code § 23.21 (relating to general).

§ 23.24. Maximum reimbursement for dental services.

(a) Reimbursement for dental services may not for a school year exceed the sum of 80¢ multiplied times the number of children enrolled in a school for the entire school term of that school year and for whom the school district or joint school board maintains comprehensive health records, plus a proportionate part of 80¢ for each child enrolled for a part of the school term of that school year and for whom the school district or joint school board maintains a comprehensive health record.

(b) The average daily membership may be used to determine the amount of reimbursement.

Authority

The provisions of this § 23.24 issued under section 2102(e) and (g) of The Administrative Code of 1929 (71 P. S. § 532(c) and (g)); and section 2505.1 of the Public School Code of 1949 (24 P. S. § 25-2505.1).

Source

The provisions of this § 23.24 amended May 28, 1982, effective May 29, 1982, 12 Pa.B. 1696. Immediately preceding text appears at serial page (3415).

Cross References

This section cited in 28 Pa. Code § 23.3 (relating to dental examinations); and 28 Pa. Code § 23.21 (relating to general).

§ 23.25. Eligible expenses.

Reimbursement may be applied to the cost of the following:

- (1) Employment of school physicians on an hourly, monthly or yearly basis.
- (2) Employment of school dentists on an hourly, monthly or yearly basis.
- (3) Employment of medical and dental assistants.
- (4) Employment of school dental hygienists on a full-time or part-time basis.
- (5) Payment for special screening examinations, such as otological, by properly qualified medical specialists.
- (6) Supplies and equipment such as instruments, tongue depressors, dietary fluoride tablets, corrective services, dental supplies and equipment or forms used in the program.
- (7) Payment for health services to school personnel as described in § 23.43 (relating to preemployment medical examinations).

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.26. Noneligible expenses.

No reimbursement shall be made for items for which the Commonwealth reimburses school districts in whole or in part under any other section of Article XXV of the Public School Code (24 P. S. §§ 25-2501—25-2593). Reimbursement for the employment of school nurses shall continue to be made under section 2505 of such act (24 P. S. § 25-2505) (Repealed).

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.27. Determining enrollment.

(a) Enrollment for reimbursement for health services shall include children in all grades, kindergarten through grade 12, in the public and private schools of the district.

(b) Children shall be credited to the district in which they go to school and not in the district in which they reside if the two are not the same.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

§ 23.28. Application.

(a) Application for reimbursement shall be made to the Department of Health within three months after the end of the school year during which the payment for the services was made by the school district or joint school board.

(b) Applications for reimbursement shall be accompanied by a certified statement in detail of the amounts actually spent for medical and dental services.

Cross References

This section cited in 28 Pa. Code § 23.21 (relating to general).

PERSONNEL**§ 23.31. Administration.**

(a) *General.* The administration of the local school health program shall be the responsibility of the school board or joint school board. The administrative officer shall be the district superintendent, the supervising principal or the county superintendent.

(b) *Duties of the administrative officer.* The administrative officer, through the board of school directors, shall arrange for the appointment of all health personnel including physicians, dentists, nurses, dental hygienists, medical and dental assistants, and medical technicians. With the assistance of these personnel, the

administrative officer shall plan the health program. He shall check and file periodic progress reports and sign all reports for the various Commonwealth departments. He shall integrate the educational phases of the school health program with the school curriculum, promote the formation of advisory school health councils and attempt to integrate the school health program with community health programs.

§ 23.32. School physicians.

(a) *Qualifications.* School physicians shall be legally qualified to practice medicine and surgery, osteopathy or osteopathic surgery in this Commonwealth.

(b) *Employment.* School districts alone or jointly with other districts or joint school boards shall employ school physicians and compensate them on a basis agreed between the physician and the board. Compensation may not be less than \$6 per hour. Appointments shall be approved by the Department of Health. School districts shall submit through the county or district medical director or the county health director to the regional medical director the names of school physicians for approval by the Secretary of Health.

(c) *Duties.* School physicians shall perform the required examinations of children in the specified grades. They shall, if their agreement with the board so states, give preemployment examinations to school personnel. They shall examine children who appear to deviate from their normal health or growth and development pattern and such examinations shall be given at the request of the administrator or teacher or nurse or on the initiative of the physicians. The school physicians shall vaccinate children of indigent parents, revaccinate children with temporary vaccination certificates, examine children incident to the issuance of employment certificates, approve return of children who have been absent due to a contagious disease or suspected contagious disease, and perform other duties that may be required by the board of school directors not inconsistent with the rules and regulations of the Department of Health.

§ 23.33. School dentists.

(a) *Qualifications.* A school dentist shall be a doctor of dental surgery or dental medicine legally qualified to practice dentistry in this Commonwealth.

(b) *Employment.* School districts alone or with other districts or joint school boards shall employ school dentists and shall compensate them on a basis agreed upon by the school dentist and the employing district or joint school board. Compensation may not be less than \$6 per hour. Appointments shall be approved by the Department of Health. School districts shall submit to the regional dental officer the names of school dentists for approval by the Department of Health.

(c) *Duties.* School dentists shall perform the required dental examinations. They shall also examine children referred to them by the administrator, teacher, dental hygienist, nurse or physician because of suspected dental disease. They

shall also perform other duties as may be required by the board which are not inconsistent with the rules and regulations of the Department of Health.

§ 23.34. School nurses.

The duties of school nurses shall be those assigned by the school district or joint school board which are exclusively connected with medical and dental school health activities. The technical content of the duties of the nurse shall be those prescribed by the Department of Health.

§ 23.35. Dental hygienists.

(a) *Qualifications.* A dental hygienist shall be licensed by the State Dental Council and Examining Board and be certified as a school dental hygienist by the Department of Education.

(b) *Employment.* Dental hygienists shall be employed by a school district or joint school board.

(c) *Duties.* The duties of a dental hygienist shall be those exclusively performed in connection with school dental health activities and to include those preventive services as recommended by the Department of Health.

Cross References

This section cited in 49 Pa. Code § 33.205b (relating to practice as a public health dental hygiene practitioner).

§ 23.36. Medical technicians.

(a) *Employment.* A medical technician shall be employed by the school district or joint school board.

(b) *Duties.* The duties of a medical technician shall be those established by the joint school board or school district.

§ 23.37. Sanitarians.

(a) *Qualifications.* Sanitarians shall meet the qualifications prescribed by the regulations of the Advisory Health Board.

(b) *Appointment.* Sanitarians shall be appointed by the Secretary of Health or by local health authorities delegated this responsibility by the Secretary of Health.

(c) *Duties.* Sanitarians shall perform sanitary inspection of school buildings and grounds in accordance with the rules and regulations of the Advisory Health Board regarding school sanitation.

MISCELLANEOUS PROVISIONS

§ 23.41. Farm and domestic service permits.

All children for whom farm or domestic service permits are requested shall be medically examined unless they have had a school health examination within the past four months. These examinations may be performed by the family physician if the family so desires; otherwise, by the school physician.

§ 23.42. Modified health program.

A modified school health program may be initiated with the approval of the Department of Health. Such a program shall be regarded as a demonstration or research project and shall permit valid statistical appraisals of the various components of the program.

§ 23.43. Preemployment medical examinations.

A school employe shall obtain a preemployment medical examination, performed by the school physician, if the school district has contracted with a physician to provide this service, or by a physician of the employe's choice legally qualified to practice medicine and surgery or osteopathy or osteopathic surgery in this Commonwealth. A prospective employe shall provide the examination results to the employing school authority, on a form prescribed by the Department of Health and completed by the examining physician.

Source

The provisions of this § 23.43 amended through July 3, 1986, effective July 5, 1986, 16 Pa.B. 2412. Immediately preceding text appears at serial pages (6931) to (6932).

Cross References

This section cited in 28 Pa. Code § 23.25 (relating to eligible expenses).

§ 23.44. Tuberculin testing of school personnel.

- (a) School personnel shall receive a tuberculin skin test under this section.
- (b) School personnel to be tested include employes and independent contractors who provide direct services to students on behalf of a school, including but not limited to teachers, nurses, administrators, physicians, dentists, dental hygienists, custodians, janitors, cooks, cafeteria workers, bus drivers, librarians, psychologists, audiologists and counselors, and student teachers and volunteers who provide direct services to students on behalf of a school.
- (c) This section applies to public, private, parochial, residential or nonresidential schools or intermediate units in this Commonwealth that enroll students in grades K-12 and ungraded classes.
- (d) The tuberculin skin test shall be administered by either the intracutaneous Mantoux test method with the two-step tuberculin skin test procedure or the percutaneous multiple puncture test method. Purified Protein Derivative (PPD) shall be the tuberculin used for the intracutaneous Mantoux skin test. PPD or Old Tuberculin—OT—shall be the tuberculin used when administering the percutaneous multiple puncture skin test. The Department of Health may issue guidelines setting forth recommended procedures for the performance of the tuberculin skin tests.
- (e) The tuberculin skin test shall be performed by the school physician, or by a physician of the employe's choice legally qualified to practice medicine and

surgery or osteopathy or osteopathic surgery in this Commonwealth, or the physician's legally qualified designee.

(f) Prior to working for the school, the person tested for tuberculosis shall provide to the school a form, completed and signed by the physician responsible for the performance of the test, that indicates either of the following:

(1) A nonsignificant Mantoux test reaction using the two-step skin test procedure, or a nonsignificant multiple puncture test reaction.

(2) A significant tuberculin skin test reaction, with a negative chest x-ray for current tuberculosis disease.

(g) The form shall state that the applicant is free of active infectious tuberculosis disease and shall indicate that the applicant was or was not referred for preventive antituberculosis chemotherapy.

(h) If the intracutaneous Mantoux test method is used, the following information shall be provided on the form:

(1) A nonsignificant or negative reaction shall be filed when the test reveals an induration of 9 mm or less 48 to 72 hours after the test is administered.

(2) A significant or a positive reaction shall be filed when the test reveals either of the following:

(i) Ten mm or larger induration 48 to 72 hours after the test is administered in a person with no known exposure to a case of active tuberculosis.

(ii) Five mm or larger induration 48 to 72 hours after the test is administered in a person recently exposed to a case of active tuberculosis.

(iii) Five mm or larger induration 48 to 72 hours after the test is administered in a person suspected of having active tuberculosis.

(i) If the percutaneous multiple puncture test method is used, the following information shall be provided on the form:

(1) A nonsignificant or negative reaction shall be filed when the test reveals no induration or vesiculation—blistering—48 to 72 hours after the test is administered.

(2) A significant or positive reaction shall be filed when the test reveals vesiculation 48 to 72 hours after the test is administered.

(3) When the test reveals another reaction—discrete papules, coalescence of papules or induration—the administration of the intracutaneous Mantoux tuberculin skin test is required, and results shall be filed as specified in subsection (g)(1) or (2).

(j) The tuberculin skin test shall be administered within 3 months prior to the date the school receives the form.

(k) School personnel who have a documented nonsignificant tuberculin skin test are not required to have further tuberculin tests unless they are exposed to a case of active tuberculosis or are directed otherwise by the Secretary of the Department of Health to have an additional test. If the conditions in paragraphs (1) or (2) occur, the individual is required to have a chest X-ray and an evalua-

tion by a physician for the presence of infectious tuberculosis. School personnel who have a significant tuberculin skin test reaction, a negative chest X-ray and a statement from the physician indicating that they are free from infectious tuberculosis are not required to have further tuberculosis tests unless one of the following occurs:

- (1) They are exposed to an active case of tuberculosis.
- (2) They develop a productive cough which does not respond to usual medical treatment within 14 days.
- (l) The school shall submit requested data regarding the School Personnel Tuberculin Testing Program to the local health department on forms supplied by the Department of Health.

Source

The provisions of this § 23.44 amended July 3, 1986, effective July 5, 1986, 16 Pa.B. 2412. Immediately preceding text appears at serial page (70617).

§ 23.45. Objections to examination on religious grounds.

- (a) School children or school employes may be excused from regular or special medical or dental examinations on presentation of written evidence to the school administrator that the examinations are contrary to the religious beliefs of the parent or guardian of the child or of the employe.
- (b) Exemption from medical or dental examinations will not be granted if the Department of Health finds that facts exist under which the exemption constitutes a present substantial menace to the health of other persons exposed to contact with the unexamined person.

Source

The provisions of this § 23.45 adopted July 3, 1986, effective July 5, 1986, 16 Pa.B. 2412.

Subchapter B. SCHOOL NURSE SERVICES

GENERAL PROVISIONS

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Authority

The provisions of this Subchapter B issued under sections 1401—1422 of the Public School Code of 1949 (24 P. S. §§ 14-1401—14-1422), unless otherwise noted.

Source

The provisions of this Subchapter B adopted January 26, 1962.

GENERAL PROVISIONS**§ 23.51. Children to be provided nursing services.**

A child in private, parochial and public schools shall be provided with school nurse services in the school which the child attends.

§ 23.52. Administration.

The school nurse services shall be provided through the public school system and the administration of this service shall be the responsibility of the public school administrator in consultation, as needed, with the private or parochial school administrator.

§ 23.53. Determination of pupils to be served.

The school administrator, in determining the number of pupils to be served by a school nurse, shall consider the number of schools, distance between schools, travel difficulties and special health needs of the area.

§ 23.54. Certification by Department of Education.

School nurses employed by school districts of joint school districts shall be properly certificated by the Department of Education as school nurses.

§ 23.55. Maintenance of health records.

Health records shall be maintained for each child. These records shall be kept in the school building where the child attends school and shall be available to the school nurse at all times. Records shall be transferred with the child when he moves from one school to another or from one district to another.

REIMBURSEMENT**§ 23.61. Maximum reimbursement.**

(a) Reimbursement for school nurse services by the Department of Health shall be made to the school board or joint school board annually. Reimbursement may not exceed the sum expended by the board or joint school board for school nurse services and may not exceed \$7.00 for each pupil in average daily membership.

(b) The average daily membership shall be computed for children in private, public and parochial schools in accordance with the rules or procedure established by the Department of Education.

(c) Each school board or joint school board shall submit to the Department of Health within 3 months after the end of the school year the average daily membership of children attending school.

Authority

The provisions of this § 23.61 issued under section 2102(e) and (g) of The Administrative Code of 1929 (71 P. S. § 532(e) and (g)); and section 2505.1 of the Public School Code of 1949 (24 P. S. § 25-2505.1).

Source

The provisions of this § 23.61 amended May, 28 1982, effective May 29, 1982, 12 Pa.B. 1696. Immediately preceding text appears at serial page (3423).

§ 23.62. Contracts with public agencies.

School districts, with the approval of the Department of Education and the Department of Health, may contract with public agencies engaged in health work to provide school health and school nurse services. Public agencies under contract shall provide health services of a standard acceptable to the Department of Health.

§ 23.63. Limitation on reimbursement.

Reimbursement for school nurse services shall be limited to that part of the cost of employment and travel expenses of school nurses incurred in the operation of the school health program.

DUTIES OF SCHOOL NURSES**§ 23.71. Assist in health program and examining.**

(a) School nurses shall assist the school administrator and the school physicians and dentists in planning and organizing the school health program and shall encourage parents to have the required medical and dental examinations done by their family physicians and family dentists.

(b) School nurses shall schedule physical and dental examinations conducted in the school, assist at examinations, and arrange for special tests, examinations and immunization programs included in the school program for health services.

§ 23.72. Maintenance of records.

School nurses shall maintain comprehensive health records of each child and records of school nursing services.

§ 23.73. Advise pupils, teachers and parents.

School nurses shall advise pupils and teachers about the procedures of the health examination and shall encourage the attendance of parents at the time of examination.

§ 23.74. Assist in interpreting health needs.

School nurses shall assist in interpreting the health needs of individual children to parents and teachers and assist families to utilize community resources for improving the health of their children.

§ 23.75. Provide information.

School nurses shall provide current information for use of school personnel on such subjects as the growth and development pattern of children, first aid practice, accident prevention, communicable disease regulations, home nursing and civil defense, and shall assist in evaluating the content material used for health teaching, and offer assistance in providing sources of information.

§ 23.76. Plan for environmental needs.

School nurses shall plan with school administrative, maintenance and sanitation personnel for the environmental needs of the school group, and shall advise school officials of environmental adjustment necessary to meet the needs of the handicapped individual.

§ 23.77. Assist in budget preparation.

School nurses shall advise the school administrator in preparing a budget for the health program and facilities, and shall advise him on the financial needs for a program.

§ 23.78. Coordinate the school health program with community programs.

School nurses shall work with school health councils and community groups to coordinate the school health program with community health programs and to develop needed health services. This includes work with private physicians, dentists, and dental hygienists to coordinate private medical and dental examinations with the school program.

§ 23.79. Provide first aid services.

School nurses shall plan for first aid services and instruct personnel responsible for giving first aid.

Subchapter C. IMMUNIZATION

Sec.

- 23.81. Purpose and scope.
- 23.82. Definitions.
- 23.83. Immunization requirements.
- 23.84. Exemption from immunization.
- 23.85. Responsibilities of schools and school administrators.
- 23.86. School reporting.
- 23.87. Responsibilities of the Department.

Authority

The provisions of this Subchapter C issued under the Disease Prevention and Control Law of 1955 (35 P. S. §§ 521.1—521.21); the act of April 11, 1974 (P. L. 257, No. 66) (71 P. S. § 541(c.1)); and section 1303a of the Public School Code of 1949 (24 P. S. § 13-1303a); amended under section 1303a of the Public School Code of 1949 (24 P. S. § 13-1303a); section 16(a)(6) and (7) of the Disease Prevention and Control Law of 1955 (35 P. S. § 521.16(a)(6) and (7)); section 2111(c.1) of The Administrative Code of 1929 (71 P. S. § 541(c.1)); and Hepatitis B Prevention Act (35 P. S. §§ 630.1—630.3), unless otherwise noted.

Source

The provisions of this Subchapter C adopted August 2, 1974, effective August 3, 1974, 4 Pa.B. 1626, unless otherwise noted.

Cross References

This subchapter cited in 22 Pa. Code § 11.20 (relating to nonimmunized children); and 22 Pa. Code § 51.13 (relating to immunization).

§ 23.81. Purpose and scope.

This subchapter has been promulgated to insure that school children are immunized against diseases which spread easily in schools and interrupt school life and learning for individuals and groups. This subchapter affects public, private and parochial schools, including kindergartens, special education classes, home education programs and vocational classes in this Commonwealth.

Source

The provisions of this § 23.81 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317. Immediately preceding text appears at serial page (164331).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.82. Definitions.

The following words and terms, when used in this subchapter, have the following meanings, unless the context clearly indicates otherwise:

Ascertain—To determine whether or not a child is immunized as defined in this subchapter.

Attendance at school—

(i) The attendance at a grade, or special classes, kindergarten through 12th grade, including public, private, parochial, vocational, intermediate unit and home education students, and students of cyber and charter schools.

(ii) The term does not cover the attendance of children at a childcare group setting, defined in § 27.1 (relating to definitions), located in a public, private or vocational school, or in an intermediate unit.

Certificate of immunization—The official form furnished by the Department. The certificate is filled out by the parent or health care provider and signed by the health care provider, public health official or school nurse or a designee. The certificate is given to the school as proof of full immunization. The school maintains the certificate as the official school immunization record or stores the details of the record in a computer database.

Department—The Department of Health of the Commonwealth.

Full immunization—The completion of the requisite number of dosages of the specific antigens at recommended time and age intervals as set forth in § 23.83 (relating to immunization requirements).

Immunization—The requisite number of dosages of the specific antigens at the recommended time intervals under this subchapter.

Medical certificate—The official form furnished by the Department setting out the immunization plan for a student who is not fully immunized, filled out and signed by a physician, certified registered nurse practitioner or physician assistant, or by a public health official when the immunization is provided by the Department or a local health department, and given to a school as proof that the student is scheduled to complete the required immunizations.

Record of immunization—A written document showing the date of immunization—that is, baby book, Health Passport, family Bible, other states' official immunization documents, International Health Certificate, immigration records, physician record, school health records and other similar documents or history.

Secretary—The Secretary of the Department.

Authority

The provisions of this § 23.82 amended under section 1303 of the Public School Code of 1949 (24 P.S. § 13-1303); section 16(a)(6) and (b) of the Disease Prevention and Control Law of 1955 (35 P.S. § 521.16(a)(6) and (b)); and sections 2102(g) and 2111 of The Administrative Code of 1929 (71 P.S. §§ 532(g) and 541).

Source

The provisions of this § 23.82 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317; amended May 28, 2010, effective August 1, 2011, 40 Pa.B. 2747; amended March 3, 2017, effective August 1, 2017, 47 Pa.B. 1300. Immediately preceding text appears at serial pages (386396) and (349627).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.83. Immunization requirements.

(a) *Duties of a school director, superintendent, principal or other person in charge of a public, private, parochial or nonpublic school.* Each school director, superintendent, principal, or other person in charge of a public, private, parochial or nonpublic school in this Commonwealth, including vocational schools, intermediate units, and special education and home education programs, cyber and charter schools, shall ascertain that a child has been immunized in accordance with the requirements in subsections (b), (c) and (e) prior to admission to school for the first time, under section 1303 of the Public School Code of 1949 (24 P.S. § 13-1303a), regarding immunization required; penalty.

(b) *Required for attendance.* All of the following immunizations are required as a condition of attendance at school in this Commonwealth:

(1) *Diphtheria, tetanus and pertussis.* Four or more properly-spaced doses administered in a combination form (diphtheria and tetanus toxoids and acellular pertussis (DTaP) or diphtheria and tetanus toxoids and pertussis (DTP)). If a child has a contraindication to pertussis vaccine, the child shall receive diphtheria—tetanus toxoid vaccine (DT) to complete the vaccination series. The fourth dose shall be administered on or after the 4th birthday.

(2) *Poliomyelitis.* Four properly-spaced doses of either oral polio vaccine or inactivated polio vaccine, which may be administered as a single antigen vaccine, or in a combination form. The fourth dose shall be administered on or after the 4th birthday and at least 6 months after the previous dose.

(3) *Measles (rubeola), mumps and rubella (German measles).* One of the following:

(i) *Multiple antigens.* Two properly-spaced doses of live attenuated measles, mumps, rubella combination vaccine, the first dose administered at 12 months of age or older.

(ii) *Single antigens.* In the event the antigens were given separately, and not in a combination vaccine, the dosage is as follows:

(A) Two properly-spaced doses of live attenuated measles vaccine, the first dose administered at 12 months of age or older.

(B) One dose of live attenuated rubella vaccine, administered at 12 months of age or older.

(C) Two properly-spaced doses of live attenuated mumps vaccine, administered at 12 months of age or older.

(iii) *Evidence of immunity.* Evidence of immunity may be shown by a history of measles and rubella immunity proved by laboratory testing by a laboratory with the appropriate certification and a written statement of a history of mumps disease from a physician, certified registered nurse practitioner or physician assistant.

(4) *Hepatitis B.* Three properly-spaced doses of hepatitis B vaccine, unless a child receives a vaccine as approved by the United States Food and Drug Administration for a two-dose regimen, or a history of hepatitis B immunity proved by laboratory testing. Hepatitis B vaccine may be administered as single antigen vaccine or in a combination form.

(5) *Varicella (chickenpox).* One of the following:

(i) *Varicella vaccine.* Two properly-spaced doses of varicella vaccine, the first dose administered at 12 months of age or older. Varicella vaccine may be administered as a single antigen vaccine or in a combination form.

(ii) *Evidence of immunity.* Evidence of immunity may be shown by one of the following:

(A) Laboratory evidence of immunity or laboratory confirmation of disease.

(B) A written statement of a history of chickenpox disease from a parent, guardian, physician, certified registered nurse practitioner or physician assistant.

(c) *Special requirements for tetanus and diphtheria toxoids and acellular pertussis vaccine and meningococcal conjugate vaccine (MCV).*

(1) *Required for entry into 7th grade.* In addition to the immunizations listed in subsection (b), the following immunizations are required at any public, private, parochial or nonpublic school in this Commonwealth, including vocational schools, intermediate units, special education and home education programs, and cyber and charter schools, as a condition of entry for students entering the 7th grade, or, in an ungraded class, for students in the school year that the student is 12 years of age:

(i) *Tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap).* One dose of Tdap in a combination form.

(ii) *Meningococcal conjugate vaccine (MCV).* One dose of MCV.

(iii) *Exclusion.* A child who does not have an exemption as permitted by § 23.84 (relating to exemption from immunization) and who does not receive the immunizations as required in subparagraphs (i) and (ii) may be excluded in that school year and each succeeding school year that the child fails to obtain the required immunization.

(2) *Required for entry into 12th grade.* In addition to the immunizations listed in subsection (b) and this subsection, one dose of MCV is required for entry into 12th grade at any public, private, parochial or nonpublic school in this Commonwealth, including vocational schools, intermediate units, special education and home education programs, and cyber and charter schools, or, in an ungraded class, for students in the school year that the student is 18 years

of age, if the child has not received a previous dose on or after the child's 16th birthday. A dose of MCV received at 16 years of age or older shall count as the 12th grade dose.

(d) *Child care group setting.* Attendance at a child care group setting located in a public, private or vocational school, or in an intermediate unit, is conditional upon the child's satisfaction of the immunization requirements in § 27.77 (relating to immunization requirements for children in child care group settings).

(e) *Prekindergarten programs, early intervention programs' early childhood special education classrooms and private academic preschools.* Attendance at a prekindergarten program operated by a school district, an early intervention program operated by a contractor or subcontractor including intermediate units, school districts and private vendors, or at private academic preschools is conditional upon the child's satisfaction of the immunization requirements in § 27.77.

(f) *Grace period.* A vaccine dose administered within the 4-day period prior to the minimum age for the vaccination or prior to the end of the minimum interval between doses shall be considered a valid dose of the vaccine for purposes of this chapter. A dose administered greater than 4 days prior to minimum age or interval for a dose is invalid for purposes of this regulation and shall be repeated.

Authority

The provisions of this § 23.83 amended under section 1303 of the Public School Code of 1949 (24 P.S. § 13-1303); section 16(a)(6) and (b) of the Disease Prevention and Control Law of 1955 (35 P.S. § 521.16(a)(6) and (b)); and sections 2102(g) and 2111 of The Administrative Code of 1929 (71 P.S. §§ 532(g) and 541).

Source

The provisions of this § 23.83 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317; amended September 28, 2001, effective September 29, 2001, 31 Pa.B. 5525; amended May 28, 2010, effective August 1, 2011, 40 Pa.B. 2747; amended March 3, 2017, effective August 1, 2017, 47 Pa.B. 1300. Immediately preceding text appears at serial pages (349627) to (349629).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); 28 Pa. Code § 23.82 (relating to definitions); 28 Pa. Code § 23.85 (relating to responsibilities of schools and school administrators); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.84. Exemption from immunization.

(a) *Medical exemption.* Children need not be immunized if a physician or the physician's designee provides a written statement that immunization may be detrimental to the health of the child. When the physician determines that immunization is no longer detrimental to the health of the child, the child shall be immunized according to this subchapter.

(b) *Religious exemption.* Children need not be immunized if the parent, guardian or emancipated child objects in writing to the immunization on religious grounds or on the basis of a strong moral or ethical conviction similar to a religious belief.

Source

The provisions of this § 23.84 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317. Immediately preceding text appears at serial pages (164332) to (164333) and (129145).

Cross References

This section cited in 22 Pa. Code § 51.13 (relating to immunization); 22 Pa. Code § 405.49 (relating to immunizations); 28 Pa. code § 23.83 (relating to immunization requirements); 28 Pa. Code § 23.85 (relating to responsibilities of schools and school administrators); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.85. Responsibilities of schools and school administrators.

(a) *Inform of requirements and ascertain immunization status.* The administrator in charge of a school shall appoint a knowledgeable person to perform all of the following:

(1) Inform the parent, guardian or emancipated child at registration or prior to registration, if possible, of the requirements of this subchapter.

(2) Ascertain the immunization status of a child prior to admission to school or continued attendance at school.

(i) The parent, guardian or emancipated child shall be asked for a completed certificate of immunization.

(ii) In the absence of a certificate of immunization, the parent, guardian or emancipated child shall be asked for a record or history of immunization which indicates the month, day and year that immunizations were given. This information shall be recorded on the certificate of immunization and signed by the school official or the school official's designee, or the details of the record shall be stored in a computer database.

(b) *Admission to school or continued attendance.* If the knowledgeable person designated by the school administrator is unable to ascertain whether a child has received the immunizations required under § 23.83 (relating to immunization requirements) or under subsection (e) or is exempt under § 23.84 (relating to exemption from immunization), the school administrator may admit the child to school or allow the child's continued attendance at school only according to the requirements of subsections (d) and (e).

(c) *Inform of specific immunization requirements.* The parent or guardian of a child or the emancipated child who has not received the immunizations required under § 23.83 shall be informed of the specific immunizations required and advised to go to the child's usual source of care or nearest public clinic to obtain the required immunizations.

(d) *Requirements under which admission or continued attendance is permitted.* A child not previously admitted to or not allowed to continue attendance at school because the child has not had the required immunizations shall be admitted to or permitted to continue attendance at school only upon presentation to the school administrator or school administrator's designee of a completed certificate

of immunization or immunization record, upon submission of information sufficient for an exemption under § 23.84, or upon compliance with subsection (e).

(e) *Provisional admittance to school.*

(1) *Multiple dose vaccine series.* If a child has not received all of the antigens for a multiple dose vaccine series described in § 23.83 on the child's first day of attendance for that school year, the school administrator or the school administrator's designee may not provisionally admit the child to school unless the child has at least one dose of each multiple dose vaccine series required under § 23.83, and one of the following occurs:

(i) The child receives the final dose of each multiple dose vaccine series required under § 23.83 within 5 school days of the child's first day of attendance, and the child's parent or guardian provides a certificate of immunization on or before the 5th school day.

(ii) If the child needs additional doses of a multiple dose vaccine series to meet the requirements of § 23.83, the child receives the next scheduled dose during the 5 school days referenced in subparagraph (i), and the child's parent or guardian provides a medical certificate on or before the 5th school day scheduling the additional required doses.

(iii) If the child needs additional doses of a multiple dose vaccine series to meet the requirements of § 23.83, but the next dose is not medically appropriate during the 5 school days referenced in subparagraph (i), the child's parent or guardian provides a medical certificate on or before the 5th school day scheduling the additional required doses.

(2) *Single dose vaccines.* If a child has not received a vaccine for which only a single dose is required on the child's first day of attendance for that school year, the child may not be admitted to school.

(3) *Completion of required immunizations.* The medical certificate shall be reviewed at least every 30 days by the school administrator or the school administrator's designee. Subsequent immunizations shall be entered on the certificate of immunization or entered in the school's computer database. Immunization requirements described in § 23.83 shall be completed in accordance with the requirements of the medical certificate. If, upon review, the requirements of the medical certificate are not met, the school administrator or the school administrator's designee may exclude the child from school.

(4) *Medical certificate.* A school shall maintain the medical certificate until the official school immunization record is completed.

(f) *Certificate of immunization.* A school shall maintain on file a certificate of immunization for a child enrolled. An alternative to maintaining a certificate on file is to transfer the immunization information from the certificate to a computer database. The certificate of immunization or a facsimile thereof generated by computer shall be returned to the parent, guardian or emancipated child or the school shall transfer the certificate of immunization (or facsimile) with the child's

record to the new school when a child withdraws, transfers is promoted, graduates or otherwise leaves the school.

(g) *Applicability.* This section does not apply to a child if one of the following occurs:

(1) The child has not been immunized or is unable to provide immunization records due to being homeless. A school shall comply with Federal laws pertaining to the educational rights of homeless children, including the McKinney-Vento Homeless Education Assistance Improvements Act of 2001 (42 U.S.C.A. §§ 11431—11435).

(2) The child, when moving or transferring into a school in this Commonwealth, is unable to provide immunization records immediately upon enrollment into the school. The child's parent or guardian shall have 30 days to provide immunization records to the school to show proof of immunization as set forth in § 23.83, a medical certificate as set forth in subsection (e) or to satisfy the requirements for an exemption as set forth in § 23.84. A child who is unable to provide the necessary records, medical certificate or exemption may be excluded at the end of the 30-day period and in subsequent school years until the requirements of this subchapter are met.

(3) The child has not been immunized or is unable to provide immunization records on the first day of attendance for the school year due to being in foster care. A school shall comply with Federal laws pertaining to the educational rights of children in foster care, including the Fostering Connections to Success and Increasing Adoptions Act of 2008 (42 U.S.C.A. §§ 670—679c). The child's foster parent shall have 30 days to provide immunization records to the school to show proof of immunization as set forth in § 23.83, a medical certificate as set forth in subsection (e) or to satisfy the requirements for an exemption as set forth in § 23.84. A child who is unable to provide the necessary records, medical certificate or exemption may be excluded at the end of the 30-day period and in subsequent school years until the requirements of this subchapter are met.

(4) The child obtains an exemption under § 23.84.

(h) *Temporary waiver.* The Secretary may issue a temporary waiver of the immunization requirements in § 23.83. The details of the temporary waiver will be set out in a notice published in the *Pennsylvania Bulletin*. A temporary waiver may be issued under either of the following circumstances:

(1) The Centers for Disease Control and Prevention, United States Department of Health and Human Services, recognizes a Nationwide shortage of supply for a particular vaccine.

(2) In the event of a disaster impacting the ability of children transferring into a school to provide immunization records.

Authority

The provisions of this § 23.85 amended under section 1303 of the Public School Code of 1949 (24 P. S. § 13-1303); section 16(a)(6) and (b) of the Disease Prevention and Control Law of 1955 (35 P.S. § 521.16(a)(6) and (b)); and sections 2102(g) and 2111 of The Administrative Code of 1929 (71 P.S. §§ 532(g) and 541).

Source

The provisions of this § 23.85 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317; amended May 28, 2010, effective August 1, 2011, 40 Pa.B. 2747; amended March 3, 2017, effective August 1, 2017, 47 Pa.B. 1300. Immediately preceding text appears at serial pages (349629) to (349631).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.86. School reporting.

(a) A public, private, parochial or nonpublic school in this Commonwealth, including vocational schools, intermediate units, special education and home education programs, and cyber and charter schools, shall report immunization data to the Department electronically by December 31 of each year using a format and system provided by the Department.

(b) In the event a public, private, parochial or nonpublic school is unable to complete its report electronically, it shall report to the Department by December 15 of each year using a form provided by the Department.

(c) The school administrator or the school administrator's designee shall forward the reports to the Department as indicated on the reporting form provided by the Department.

(d) Duplicate reports shall be submitted to the county health department if the school is located in a county with a full-time health department.

(e) The school administrator or the school administrator's designee shall ensure that the school's identification information, including the name of the school, school district, county and school address, is correct, and shall make any necessary corrections prior to submitting the report.

(f) Content of the reports must include all of the following information:

(1) The month, day and year of the report.

(2) The number of students attending school in each grade-level, or in an ungraded school, in each age group, as indicated on the reporting form.

(3) The number of doses of each individual antigen given in each grade-level, or in an ungraded school, in each age group, as indicated on the reporting form.

(4) The number of students attending school who were classed as medical exemptions in each grade-level, or in an ungraded school, in each age group, as indicated on the reporting form.

(5) The number of students attending school who were classed as religious exemptions in each grade level, or in an ungraded school, in each age group, as indicated on the reporting form.

(6) The number of students provisionally admitted in each grade level or, in an ungraded school, in any age group, as indicated on the reporting form.

- (7) The number of students in kindergarten, 7th grade or in an ungraded school, 12 years of age only, who were denied admission because of the student's inability to provide documentation of the required vaccine doses.
- (8) Other information as required by the Department.

Authority

The provisions of this § 23.86 amended under section 1303 of the Public School Code of 1949 (24 P.S. § 13-1303); section 16(a)(6) and (b) of the Disease Prevention and Control Law of 1955 (35 P.S. § 521.16(a)(6) and (b)); and sections 2102(g) and 2111 of The Administrative Code of 1929 (71 P.S. §§ 532(g) and 541).

Source

The provisions of this § 23.86 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended January 23, 1987, effective January 24, 1987, 17 Pa.B. 375; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317; amended May 28, 2010, effective August 1, 2011, 40 Pa.B. 2747; amended March 3, 2017, effective August 1, 2017, 47 Pa.B. 1300. Immediately preceding text appears at serial pages (349631) to (349632).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

§ 23.87. Responsibilities of the Department.

- (a) The Department will provide the certificates of immunization to schools.
- (b) The Department will monitor school districts for compliance with this subchapter and shall have access to school immunization records whether the records are maintained as certificates or whether the records are contained in a school's computer database.
- (c) Questions concerning this subchapter should be addressed to the Immunization Program, Bureau of Communicable Diseases, 625 Forester St., Room 1026, Harrisburg, Pennsylvania 17120, (717) 787-5681.

Source

The provisions of this § 23.87 amended through September 17, 1982, effective August 1, 1983, 12 Pa.B. 3288; amended August 22, 1997, effective August 23, 1997, 27 Pa.B. 4317. Immediately preceding text appears at serial page (116439).

Cross References

This section cited in 22 Pa. Code § 405.49 (relating to immunizations); and 28 Pa. Code § 27.77 (relating to immunization requirements for children in child care group settings).

[Next page is 25-1.]