

## Measles

### Sample: Exclusion notice to parent of pupil who is out-of-compliance

(Date)

Dear Parent/Guardian:

There has been at least one case of measles (also known as rubeola, red measles, or ten-day measles) in your child's school (or other facility). Measles is highly infectious and while most cases recover fully, measles can cause pneumonia, brain damage, and even death. Many children have had the recommended two doses of combined measles, mumps and rubella (MMR) vaccine by the time they have entered Kindergarten, but pupils with exemptions to immunization or with legally inadequate school measles immunization records are being given notice that they are being excluded from school attendance temporarily.

The school record indicates that your son/daughter \_\_\_\_\_ (name) does not meet California's legal measles immunization requirements for school attendance for the reason circled below:

- A. One of the immunizations was received before the first birthday and must be repeated.
- B. The record is legally incomplete; it does not show the month and year of immunization. Immunizations received during the month of the first birthday must show the month, day and year.
- C. No record of measles immunization is on file.
- D. The record indicates that immunization cannot or need not be given for a medical reason. We must have a letter from a doctor verifying the reason.

Therefore, according to California State Law, **your son/daughter will have to be excluded from school** starting \_\_\_\_\_ (date) and continuing until the Local Health Officer determines that it is safe for him/her to return.

Usually a pupil **may avoid exclusion or may be readmitted** by doing ONE of the following:

- Present to the school a record of two measles immunizations received after the first birthday, including the month and year that the vaccine was given. For immunization given during the month of the first birthday the exact day is needed.
- Present to the school a record indicating a history of having had measles disease or a record of a blood test showing immunity to measles.
- Obtain a measles vaccination and bring a record of this immunization to school.

Measles vaccine can be obtained from your doctor or from the \_\_\_\_\_ (name) Public Health Clinic(s) for a fee at \_\_\_\_\_ (address) on \_\_\_\_\_ (dates) from \_\_\_\_\_ (time). A parent or guardian must read and sign a consent form before anyone under age 18 years is immunized. If you have questions, please call the \_\_\_\_\_ (name) Health Department at \_\_\_\_\_ (telephone number). Thank you for your cooperation in preventing the spread of measles.

Sincerely,

\_\_\_\_\_  
 \_\_\_\_\_ (Health Officers name)  
 \_\_\_\_\_ (County) Health Officer