

Department of Associate Degree Nursing 4400 College Drive Vernon, TX 76384 940/552-6291 www.vernoncollege.edu

Documenting History of Varicella (Chickenpox) Illness

"All histories of varicella illness must be supported by a written statement from a physician or the child's/student's parent or guardian containing wording such as: "This is to verify that (name of student) had varicella disease (chickenpox) on or about (month/day/year) and does not need varicella vaccine" or by serologic confirmation of varicella immunity. School nurses may also write this statement to document cases of chickenpox that they observe. The school shall accurately record the existence of any statements attesting to previous varicella illness or the results of any serologic tests supplied as proof of immunity. The original should be returned to the child/student or the child's/student's parent or guardian. If a child or student is unable to submit such a statement or serologic evidence, varicella vaccine is required."

For further Information:

Contact the Texas Department of Health at 800-252-9152, or visit the Texas Department of Health Immunization Division's website: www.tdh.state.txus/immpage1.htm

Instruction for documenting prior illness

Please complete the statement below or submit a serologic confirmation of varicella immunity.

This is to verify that	had varicella disease (chickenpox) on
(name of s	tudent)
or about and does not and does not	need varicella vaccine.
Signature	Relationship to student
 Date	