

New Jersey Department of Health
Vaccine Preventable Disease Program

IMMUNIZATION AUDIT REPORT

* Required Fields

*Name of School/Child Care Center	*ASR School ID	*Type of School <input type="checkbox"/> Public <input type="checkbox"/> Non-Public	*Grades in School From: _____ To: _____	*Total School Enrollment
*Facility Mailing Address		*City	*County	
*School District	*School Contact Person	*Telephone Number	*Email Address	

<input type="checkbox"/> Child Care/Preschool	Number Surveyed
Audit Date	
Religious Exemptions	
Medical Exemptions	
Provisional Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Re-Audit/Completion Date	
New Rel. Exempt.	
New Med. Exempt.	
New Prov. Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Varicella Disease History
Total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement)

Documentation Problem Recommendations:
 Immunization Deficiency
 Lack of Enforcement
 Other Problem

<input type="checkbox"/> Kindergarten <input type="checkbox"/> Grade 1 (Entry level)	Number Surveyed
Audit Date	
Religious Exemptions	
Medical Exemptions	
Provisional Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Re-Audit/Completion Date	
New Rel. Exempt.	
New Med. Exempt.	
New Prov. Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Varicella Disease History
Total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement)

Documentation Problem Recommendations:
 Immunization Deficiency
 Lack of Enforcement
 Other Problem

LOCAL HEALTH DEPARTMENT AUDITOR INFORMATION			
*Name of Reviewer	*Auditing Agency	*Telephone Number	*Email Address

IMMUNIZATION AUDIT REPORT, Continued

<input type="checkbox"/> Grade 6	Number Surveyed
Audit Date	
Religious Exemptions	
Medical Exemptions	
Provisional Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Re-Audit/Completion Date	
New Rel. Exempt.	
New Med. Exempt.	
New Prov. Status	

Varicella Disease History
 Total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement)

Documentation Problem Recommendations:
 Immunization Deficiency
 Lack of Enforcement
 Other Problem

<input type="checkbox"/> Transfers (Any Grade)	Number Surveyed
Audit Date	
Religious Exemptions	
Medical Exemptions	
Provisional Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Re-Audit/Completion Date	
New Rel. Exempt.	
New Med. Exempt.	
New Prov. Status	

Varicella Disease History
 Total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement)

Documentation Problem Recommendations:
 Immunization Deficiency
 Lack of Enforcement
 Other Problem

<input type="checkbox"/> Special Educ./Unassigned Grades	Number Surveyed
Audit Date	
Religious Exemptions	
Medical Exemptions	
Provisional Status	

Total Children Deficient	Number Deficient/Exempt/Provisional									Compliance Rate
	DTaP, DT, Td, Tdap	Polio	MMR	Hib	Hep B	Varicella	PCV13	Flu	MCV4	

Total Children Excluded

Re-Audit/Completion Date	
New Rel. Exempt.	
New Med. Exempt.	
New Prov. Status	

Varicella Disease History
 Total number of children reported to have varicella disease (confirmed by physician, serology, or parental statement)

Documentation Problem Recommendations:
 Immunization Deficiency
 Lack of Enforcement
 Other Problem