2022-23

FLORIDA MANDATED SCHOOL IMMUNIZATIONS

PRE-KIND	<u>ERGARTEN</u>
DTAP	4-5
POLIO	4-5
MMR	1
HIB (varies by age	, none after age 5)
HEPATITIS B	3
VARICELLA	1*
*Or a documented	d history of
Chickenpox diseas	se. The FL 680
Form must not be	expired.

GRADES KG-6	
DTAP	4-5**
POLIO	3-5**
MMR	2
HEPATITIS B	3
VARICELLA	2**
*Or a documented	I history of
Chickenpox diseas	e.
** 1 dose of DTAP	and POLIO must be
after the 4th birthd	ay.

GRADE	S 7-12
DTAP	4-5
POLIO	4-5
MMR	2
HEPATITIS B	3
TDAP BOOSTER	1
VARICELLA	2*
*Or a documented hi	istory of
Chickenpox disease	

Call **(352) 540-6800** for an appointment

FLORIDA DEPT. OF HEALTH IN HERNANDO COUNTY

300 s. Main St. Brooksville

or

7551 Forest Oaks Blvd. Spring Hill

BRING A COPY OF PREVIOUS SHOT RECORDS