

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Amity Creek Magnet School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Amity Creek Magnet School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 168

Students not counted : 0

Adjusted Enrollment : 168

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	136	Polio	135
Varicella	139	Measles	135
Mumps	144	Rubella	144
Hep B	129		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 168

Number of students in K through 11th grade who are complete for Hep A vaccine 131

Number of students with **all** the vaccines required for their grade 126

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 42

How many nonmedical exemptions are from :

- the online module 38
- a health care practitioner 6

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	31	Polio	33
Varicella	29	Measles	33
Mumps	24	Rubella	24
Hep B	39	Hep A	37

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 19

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

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**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Bear Creek Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Bear Creek Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 543

Students not counted : 0

Adjusted Enrollment : 543

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	519	Polio	519
Varicella	523	Measles	519
Mumps	527	Rubella	527
Hep B	517		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 543

Number of students in K through 11th grade who are complete for Hep A vaccine 512

Number of students with **all** the vaccines required for their grade 508

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 32

How many nonmedical exemptions are from :

- the online module 32
- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	24	Polio	23
Varicella	20	Measles	24
Mumps	16	Rubella	16
Hep B	25	Hep A	29

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 15

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Buckingham Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																		
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u></p> <p>Children not counted: <u>0</u></p> <p>Children ≤ 18 months of age: <u>0</u></p> <p>Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u></p> <p>Medical exemptions: <u>0</u></p> <p>Nonmedical exemptions: <u>0</u></p> <p>How many of the 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Buckingham Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 492

Students not counted : 0

Adjusted Enrollment : 492

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	467	Polio	466
Varicella	466	Measles	463
Mumps	473	Rubella	473
Hep B	470		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 492

Number of students in K through 11th grade who are complete for Hep A vaccine 461

Number of students with all the vaccines required for their grade 454

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 34

How many nonmedical exemptions are from :

- the online module 30
- a health care practitioner 4

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	25	Polio	26
Varicella	26	Measles	29
Mumps	19	Rubella	19
Hep B	21	Hep A	28

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 14

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Elk Meadow Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Elk Meadow Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 520

Students not counted : 0

Adjusted Enrollment : 520

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	491	Polio	489
Varicella	491	Measles	484
Mumps	496	Rubella	496
Hep B	489		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 520

Number of students in K through 11th grade who are complete for Hep A vaccine 485

Number of students with **all** the vaccines required for their grade 472

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 44

How many nonmedical exemptions are from :

- the online module 44
- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	29	Polio	29
Varicella	29	Measles	36
Mumps	24	Rubella	24
Hep B	29	Hep A	32

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 21

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule



**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Ensworth Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Ensworth Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 200

Students not counted : 0

Adjusted Enrollment : 200

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	188	Polio	188
Varicella	191	Measles	188
Mumps	190	Rubella	189
Hep B	189		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 200

Number of students in K through 11th grade who are complete for Hep A vaccine 188

Number of students with **all** the vaccines required for their grade 185

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 12

How many nonmedical exemptions are from :

- the online module 12

- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	11	Polio	11
Varicella	9	Measles	11
Mumps	10	Rubella	10
Hep B	11	Hep A	11

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 9

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: High Lakes Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																									
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u></p> <p>Children not counted: <u>0</u></p> <p>Children ≤ 18 months of age: <u>0</u></p> <p>Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u></p> <p>Medical exemptions: <u>0</u></p> <p>Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Child has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1 dose or disease history)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	All <u>0</u> (Child has received all of the above doses)	Rubella <u>0</u> (1+ dose)	HIB <u>0</u> (Complete or 5 yrs old)			DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	All <u>0</u>	<p><i>Complete only for students in kindergarten</i></p> <p>Total Enrollment: <u>57</u></p> <p>Children not counted: <u>0</u></p> <p>Adjusted enrollment: <u>57</u></p> <hr/> <p><i>List the number of students with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>52</u> (5 doses, or 4th after age 4)</td> <td>Polio <u>52</u> (4 doses, or 3rd after age 4)</td> <td>Measles <u>55</u> (1+ dose)</td> <td>Rubella <u>55</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>54</u> (1+ dose or disease history)</td> <td>Hepatitis B <u>53</u> (3+ doses)</td> <td>Hepatitis A <u>52</u> (2 doses)</td> <td>All <u>51</u> (Student has received all of the above doses)</td> </tr> <tr> <td>2nd Measles <u>53</u> (1 dose)</td> <td>Mumps <u>55</u> (1+ dose)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of students with:</i></p> <p>No record: <u>0</u></p> <p>Medical exemptions: <u>0</u></p> <p>Nonmedical exemptions: <u>4</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>3</u></li> <li>• a health care practitioner <u>1</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of students with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>4</u></td> <td>Polio <u>4</u></td> <td>Measles <u>4</u></td> <td>Mumps <u>2</u></td> <td>Hepatitis B <u>2</u></td> <td>Hepatitis A <u>3</u></td> <td>All <u>1</u></td> </tr> </table> <p style="text-align: center;">(Student has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>52</u> (5 doses, or 4th after age 4)	Polio <u>52</u> (4 doses, or 3rd after age 4)	Measles <u>55</u> (1+ dose)	Rubella <u>55</u> (1+ dose)	Varicella <u>54</u> (1+ dose or disease history)	Hepatitis B <u>53</u> (3+ doses)	Hepatitis A 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: High Lakes Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 522

Students not counted : 0

Adjusted Enrollment : 522

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	491	Polio	489
Varicella	497	Measles	493
Mumps	505	Rubella	505
Hep B	488		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 522

Number of students in K through 11th grade who are complete for Hep A vaccine 490

Number of students with all the vaccines required for their grade 473

Fill in the number of students with:

No record : 0

Medical exemptions : 2

Nonmedical exemptions : 42

How many nonmedical exemptions are from :

- the online module 38
- a health care practitioner 4

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	29	Polio	31
Varicella	24	Measles	29
Mumps	16	Rubella	16
Hep B	31	Hep A	28

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 14

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

Follow-Up Statistical Report

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Highland Magnet School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																																																																								
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>       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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Highland Magnet School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 388

Students not counted : 0

Adjusted Enrollment : 388

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	358	Polio	351
Varicella	361	Measles	358
Mumps	371	Rubella	371
Hep B	346		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 388

Number of students in K through 11th grade who are complete for Hep A vaccine 344

Number of students with **all** the vaccines required for their grade 335

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 51

How many nonmedical exemptions are from :

- the online module 47
- a health care practitioner 4

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	30	Polio	37
Varicella	27	Measles	30
Mumps	17	Rubella	17
Hep B	42	Hep A	42

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 16

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

Follow-Up Statistical Report

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Juniper Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<p><i>Complete only for children younger than kindergarten</i></p>	<p><i>Complete only for students in kindergarten</i></p>	<p><i>Complete only for students in 7th grade</i></p>
<p>Total Enrollment: <u>0</u> Children not counted: <u>0</u> Children ≤ 18 months of age: <u>0</u> Adjusted Enrollment: <u>0</u></p>	<p>Total Enrollment: <u>58</u> Children not counted: <u>0</u> Adjusted enrollment: <u>58</u></p>	<p>Total Enrollment: <u>0</u> Children not counted: <u>0</u> Adjusted enrollment: <u>0</u></p>
<p><i>List the number of children with the indicated number of doses</i></p>	<p><i>List the number of students with the indicated number of doses</i></p>	<p><i>List the number of students with the indicated number of doses</i></p>
<p>DTaP/Tdap <u>0</u> Polio <u>0</u> (4+ doses) (3+ doses) Varicella <u>0</u> Measles <u>0</u> (1 dose or disease history) (1+ dose) Rubella <u>0</u> Mumps <u>0</u> (1+ dose) (1+ dose) Hepatitis B <u>0</u> Hepatitis A <u>0</u> (3+ doses) (1+ dose) HIB <u>0</u> All <u>0</u> (Complete or 5 yrs old) (Child has received all of the above doses)</p>	<p>DTaP/Tdap <u>52</u> Polio <u>50</u> (5 doses, or 4th after age 4) (4 doses, or 3rd after age 4) Varicella <u>51</u> Measles <u>52</u> (1+ dose or disease history) (1+ dose) 2nd Measles <u>49</u> Rubella <u>50</u> (1 dose) (1+ dose) Mumps <u>50</u> Hepatitis B <u>50</u> (1+ dose) (3+ doses) Hepatitis A <u>46</u> All <u>44</u> (2 doses) (Student has received all of the above doses)</p>	<p>DTaP/Tdap <u>0</u> Polio <u>0</u> (1 dose after age 7) (4 doses, or 3rd after age 4) Varicella <u>0</u> Measles <u>0</u> (1+ dose or disease history) (1+ dose) 2nd Measles <u>0</u> Rubella <u>0</u> (1 dose) (1+ dose) Mumps <u>0</u> Hepatitis B <u>0</u> (1+ dose) (3+ doses) Hepatitis A <u>0</u> All <u>0</u> (2 doses) (Student has received all of the above doses)</p>
<p><i>Fill in the number of children with:</i></p>	<p><i>Fill in the number of students with:</i></p>	<p><i>Fill in the number of students with:</i></p>
<p>No record: <u>0</u> Medical exemptions: <u>0</u> Nonmedical exemptions: <u>0</u></p>	<p>No record: <u>0</u> Medical exemptions: <u>1</u> Nonmedical exemptions: <u>10</u></p>	<p>No record: <u>0</u> Medical exemptions: <u>0</u> Nonmedical exemptions: <u>0</u></p>
<p><i>How many of the nonmedical exemptions are from:</i></p>	<p><i>How many of the nonmedical exemptions are from:</i></p>	<p><i>How many of the nonmedical exemptions are from:</i></p>
<p>• the online module <u>0</u> • a health care practitioner <u>0</u> • a religious exemption signed prior to 3/1/14 <u>0</u></p>	<p>• the online module <u>10</u> • a health care practitioner <u>0</u> • a religious exemption signed prior to 3/1/14 <u>0</u></p>	<p>• the online module <u>0</u> • a health care practitioner <u>0</u> • a religious exemption signed prior to 3/1/14 <u>0</u></p>
<p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p>	<p><i>Fill in the number of students with a nonmedical exemption for each vaccine</i></p>	<p><i>Fill in the number of students with a nonmedical exemption for each vaccine:</i></p>
<p>DTaP/Tdap <u>0</u> Polio <u>0</u> Varicella <u>0</u> Measles <u>0</u> Rubella <u>0</u> Mumps <u>0</u> Hepatitis B <u>0</u> Hepatitis A <u>0</u> HIB <u>0</u> All <u>0</u> (Child has a nonmedical exemption for all vaccines)</p>	<p>DTaP/Tdap <u>5</u> Polio <u>8</u> Varicella <u>7</u> Measles <u>8</u> Rubella <u>7</u> Mumps <u>7</u> Hepatitis B <u>8</u> Hepatitis A <u>9</u> All <u>3</u> (Student has a nonmedical exemption for all vaccines)</p>	<p>DTaP/Tdap <u>0</u> Polio <u>0</u> Varicella <u>0</u> Measles <u>0</u> Rubella <u>0</u> Mumps <u>0</u> Hepatitis B <u>0</u> Hepatitis A <u>0</u> All <u>0</u> (Student has a nonmedical exemption for all vaccines)</p>

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Juniper Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 437

Students not counted : 0

Adjusted Enrollment : 437

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	408	Polio	402
Varicella	416	Measles	407
Mumps	419	Rubella	418
Hep B	406		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 437

Number of students in K through 11th grade who are complete for Hep A vaccine 401

Number of students with all the vaccines required for their grade 393

Fill in the number of students with:

No record : 0

Medical exemptions : 2

Nonmedical exemptions : 37

How many nonmedical exemptions are from :

- the online module 37

- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	26	Polio	33
Varicella	20	Measles	29
Mumps	17	Rubella	18
Hep B	29	Hep A	31

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 12

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule



**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: La Pine Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<i>Complete only for children younger than kindergarten</i>	<i>Complete only for students in kindergarten</i>	<i>Complete only for students in 7th grade</i>
Total Enrollment: <u>0</u>	Total Enrollment: <u>63</u>	Total Enrollment: <u>0</u>
Children not counted: <u>0</u>	Children not counted: <u>0</u>	Children not counted: <u>0</u>
Children ≤ 18 months of age: <u>0</u>	Adjusted enrollment: <u>63</u>	Adjusted enrollment: <u>0</u>
Adjusted Enrollment: <u>0</u>		
<i>List the number of children with the indicated number of doses</i>		
DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	DTaP/Tdap <u>0</u> (1 dose after age 7)
Polio <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Polio <u>0</u> (4 doses, or 3rd after age 4)
Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1+ dose or disease history)
Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Measles <u>0</u> (1+ dose)
HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	2nd Measles <u>0</u> (1 dose)
		Rubella <u>0</u> (1+ dose)
		Mumps <u>0</u> (1+ dose)
		Hepatitis B <u>0</u> (3+ doses)
		Hepatitis A <u>0</u> (2 doses)
		All <u>0</u> (Student has received all of the above doses)
<i>Fill in the number of children with:</i>		
No record: <u>0</u>	No record: <u>0</u>	No record: <u>0</u>
Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>
Nonmedical exemptions: <u>0</u>	Nonmedical exemptions: <u>6</u>	Nonmedical exemptions: <u>0</u>
<i>How many of the nonmedical exemptions are from:</i>		
• the online module <u>0</u>	• the online module <u>5</u>	• the online module <u>0</u>
• a health care practitioner <u>0</u>	• a health care practitioner <u>1</u>	• a health care practitioner <u>0</u>
• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>
<i>Fill in the number of children with a nonmedical exemption for each vaccine</i>		
DTaP/Tdap <u>0</u>	Polio <u>0</u>	DTaP/Tdap <u>0</u>
Varicella <u>0</u>	Measles <u>0</u>	Varicella <u>0</u>
Rubella <u>0</u>	Mumps <u>0</u>	Rubella <u>0</u>
Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Hepatitis B <u>0</u>
HIB <u>0</u>	All <u>0</u>	Hepatitis A <u>0</u>
	(Child has a nonmedical exemption for all vaccines)	All <u>0</u>
		(Student has a nonmedical exemption for all vaccines)

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: La Pine Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
 Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 367

Students not counted : 2

Adjusted Enrollment : 365

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	345	Polio	347
Varicella	349	Measles	346
Mumps	351	Rubella	351
Hep B	348		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 365

Number of students in K through 11th grade who are complete for Hep A vaccine 343

Number of students with **all** the vaccines required for their grade 340

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 21

How many nonmedical exemptions are from :

- the online module 20
- a health care practitioner 1

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	19	Polio	18
Varicella	16	Measles	19
Mumps	14	Rubella	14
Hep B	16	Hep A	19

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 13

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Lava Ridge Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																									
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Child has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	All <u>0</u>	<p><i>Complete only for students in kindergarten</i></p> <p>Total Enrollment: <u>86</u>                      Children not counted: <u>0</u>                      Adjusted enrollment: <u>86</u></p> <hr/> <p><i>List the number of students with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>80</u> (5 doses, or 4th after age 4)</td> <td>Polio <u>80</u> (4 doses, or 3rd after age 4)</td> <td>Measles <u>82</u> (1+ dose)</td> <td>Rubella <u>82</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>80</u> (1+ dose or disease history)</td> <td>Measles <u>82</u> (1+ dose)</td> <td>Hepatitis B <u>77</u> (3+ doses)</td> <td>Hepatitis A <u>73</u> (2 doses)</td> </tr> <tr> <td>2nd Measles <u>78</u> 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Lava Ridge Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 533

Students not counted : 0

Adjusted Enrollment : 533

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	510	Polio	509
Varicella	509	Measles	505
Mumps	513	Rubella	512
Hep B	505		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 533

Number of students in K through 11th grade who are complete for Hep A vaccine 500

Number of students with **all** the vaccines required for their grade 490

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 36

How many nonmedical exemptions are from :

- the online module 35
- a health care practitioner 3

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	22	Polio	23
Varicella	23	Measles	28
Mumps	20	Rubella	20
Hep B	28	Hep A	27

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 16

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: North Star Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																		
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> </tr> <tr> <td>Varicella <u>0</u></td> <td>Measles <u>0</u></td> </tr> <tr> <td>Rubella <u>0</u></td> <td>Mumps <u>0</u></td> </tr> <tr> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> </tr> <tr> <td>HIB <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Child has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1 dose or disease history)	Hepatitis B 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: North Star Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 278

Students not counted : 7

Adjusted Enrollment : 271

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	253	Polio	249
Varicella	259	Measles	253
Mumps	259	Rubella	259
Hep B	251		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 271

Number of students in K through 11th grade who are complete for Hep A vaccine 248

Number of students with **all** the vaccines required for their grade 243

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 25

How many nonmedical exemptions are from :

- the online module 24
- a health care practitioner 1

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	18	Polio	22
Varicella	12	Measles	18
Mumps	12	Rubella	12
Hep B	19	Hep A	21

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 11

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Pine Ridge Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																		
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td></td> <td></td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>       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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Pine Ridge Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 516

Students not counted : 0

Adjusted Enrollment : 516

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	471	Polio	467
Varicella	478	Measles	473
Mumps	482	Rubella	482
Hep B	479		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 516

Number of students in K through 11th grade who are complete for Hep A vaccine 469

Number of students with all the vaccines required for their grade 455

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 57

How many nonmedical exemptions are from :

- the online module 53
- a health care practitioner 4

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	43	Polio	46
Varicella	37	Measles	42
Mumps	33	Rubella	33
Hep B	35	Hep A	43

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 27

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule



**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Ponderosa Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<i>Complete only for children younger than kindergarten</i>	<i>Complete only for students in kindergarten</i>	<i>Complete only for students in 7th grade</i>
Total Enrollment: <u>0</u>	Total Enrollment: <u>69</u>	Total Enrollment: <u>0</u>
Children not counted: <u>0</u>	Children not counted: <u>0</u>	Children not counted: <u>0</u>
Children ≤ 18 months of age: <u>0</u>	Adjusted enrollment: <u>69</u>	Adjusted enrollment: <u>0</u>
Adjusted Enrollment: <u>0</u>		
<i>List the number of children with the indicated number of doses</i>		
DTaP/Tdap <u>0</u> Polio <u>0</u> <small>(4+ doses) (3+ doses)</small>	DTaP/Tdap <u>63</u> Polio <u>64</u> <small>(5 doses, or 4th after age 4) (4 doses, or 3rd after age 4)</small>	DTaP/Tdap <u>0</u> Polio <u>0</u> <small>(1 dose after age 7) (4 doses, or 3rd after age 4)</small>
Varicella <u>0</u> Measles <u>0</u> <small>(1 dose or disease history) (1+ dose)</small>	Varicella <u>65</u> Measles <u>66</u> <small>(1+ dose or disease history) (1+ dose)</small>	Varicella <u>0</u> Measles <u>0</u> <small>(1+ dose or disease history) (1+ dose)</small>
Rubella <u>0</u> Mumps <u>0</u> <small>(1+ dose) (1+ dose)</small>	2nd Measles <u>64</u> Rubella <u>66</u> <small>(1 dose) (1+ dose)</small>	2nd Measles <u>0</u> Rubella <u>0</u> <small>(1 dose) (1+ dose)</small>
Hepatitis B <u>0</u> Hepatitis A <u>0</u> <small>(3+ doses) (1+ dose)</small>	Mumps <u>66</u> Hepatitis B <u>65</u> <small>(1+ dose) (3+ doses)</small>	Mumps <u>0</u> Hepatitis B <u>0</u> <small>(1+ dose) (3+ doses)</small>
HIB <u>0</u> All <u>0</u> <small>(Complete or 5 yrs old) (Child has received all of the above doses)</small>	Hepatitis A <u>62</u> All <u>60</u> <small>(2 doses) (Student has received all of the above doses)</small>	Hepatitis A <u>0</u> All <u>0</u> <small>(2 doses) (Student has received all of the above doses)</small>
<i>Fill in the number of children with:</i>		
No record: <u>0</u>	No record: <u>0</u>	No record: <u>0</u>
Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>
Nonmedical exemptions: <u>0</u>	Nonmedical exemptions: <u>6</u>	Nonmedical exemptions: <u>0</u>
<i>How many of the nonmedical exemptions are from:</i>		
• the online module <u>0</u>	• the online module <u>6</u>	• the online module <u>0</u>
• a health care practitioner <u>0</u>	• a health care practitioner <u>1</u>	• a health care practitioner <u>0</u>
• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>
<i>Fill in the number of children with a nonmedical exemption for each vaccine</i>		
DTaP/Tdap <u>0</u> Polio <u>0</u>	DTaP/Tdap <u>5</u> Polio <u>5</u>	DTaP/Tdap <u>0</u> Polio <u>0</u>
Varicella <u>0</u> Measles <u>0</u>	Varicella <u>4</u> Measles <u>5</u>	Varicella <u>0</u> Measles <u>0</u>
Rubella <u>0</u> Mumps <u>0</u>	Rubella <u>3</u> Mumps <u>3</u>	Rubella <u>0</u> Mumps <u>0</u>
Hepatitis B <u>0</u> Hepatitis A <u>0</u>	Hepatitis B <u>4</u> Hepatitis A <u>6</u>	Hepatitis B <u>0</u> Hepatitis A <u>0</u>
HIB <u>0</u> All <u>0</u> <small>(Child has a nonmedical exemption for all vaccines)</small>	All <u>3</u> <small>(Student has a nonmedical exemption for all vaccines)</small>	All <u>0</u> <small>(Student has a nonmedical exemption for all vaccines)</small>

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Ponderosa Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 513

Students not counted : 0

Adjusted Enrollment : 513

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	489	Polio	488
Varicella	490	Measles	486
Mumps	492	Rubella	492
Hep B	489		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 513

Number of students in K through 11th grade who are complete for Hep A vaccine 482

Number of students with **all** the vaccines required for their grade 473

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 37

How many nonmedical exemptions are from :

- the online module 35
- a health care practitioner 3

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	23	Polio	25
Varicella	23	Measles	27
Mumps	20	Rubella	20
Hep B	24	Hep A	30

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 16

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: R E Jewell Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<i>Complete only for children younger than kindergarten</i>	<i>Complete only for students in kindergarten</i>	<i>Complete only for students in 7th grade</i>
Total Enrollment: <u>0</u>	Total Enrollment: <u>64</u>	Total Enrollment: <u>0</u>
Children not counted: <u>0</u>	Children not counted: <u>0</u>	Children not counted: <u>0</u>
Children ≤ 18 months of age: <u>0</u>	Adjusted enrollment: <u>64</u>	Adjusted enrollment: <u>0</u>
Adjusted Enrollment: <u>0</u>		
<i>List the number of children with the indicated number of doses</i>	<i>List the number of students with the indicated number of doses</i>	<i>List the number of students with the indicated number of doses</i>
DTaP/Tdap <u>0</u> Polio <u>0</u> <small>(4+ doses) (3+ doses)</small>	DTaP/Tdap <u>61</u> Polio <u>61</u> <small>(5 doses, or 4th after age 4) (4 doses, or 3rd after age 4)</small>	DTaP/Tdap <u>0</u> Polio <u>0</u> <small>(1 dose after age 7) (4 doses, or 3rd after age 4)</small>
Varicella <u>0</u> Measles <u>0</u> <small>(1 dose or disease history) (1+ dose)</small>	Varicella <u>61</u> Measles <u>61</u> <small>(1+ dose or disease history) (1+ dose)</small>	Varicella <u>0</u> Measles <u>0</u> <small>(1+ dose or disease history) (1+ dose)</small>
Rubella <u>0</u> Mumps <u>0</u> <small>(1+ dose) (1+ dose)</small>	2nd Measles <u>61</u> Rubella <u>61</u> <small>(1 dose) (1+ dose)</small>	2nd Measles <u>0</u> Rubella <u>0</u> <small>(1 dose) (1+ dose)</small>
Hepatitis B <u>0</u> Hepatitis A <u>0</u> <small>(3+ doses) (1+ dose)</small>	Mumps <u>61</u> Hepatitis B <u>61</u> <small>(1+ dose) (3+ doses)</small>	Mumps <u>0</u> Hepatitis B <u>0</u> <small>(1+ dose) (3+ doses)</small>
HIB <u>0</u> All <u>0</u> <small>(Complete or 5 yrs old) (Child has received all of the above doses)</small>	Hepatitis A <u>60</u> All <u>60</u> <small>(2 doses) (Student has received all of the above doses)</small>	Hepatitis A <u>0</u> All <u>0</u> <small>(2 doses) (Student has received all of the above doses)</small>
<i>Fill in the number of children with:</i>	<i>Fill in the number of students with:</i>	<i>Fill in the number of students with:</i>
No record: <u>0</u>	No record: <u>0</u>	No record: <u>0</u>
Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>
Nonmedical exemptions: <u>0</u>	Nonmedical exemptions: <u>3</u>	Nonmedical exemptions: <u>0</u>
<i>How many of the nonmedical exemptions are from:</i>	<i>How many of the nonmedical exemptions are from:</i>	<i>How many of the nonmedical exemptions are from:</i>
• the online module <u>0</u>	• the online module <u>3</u>	• the online module <u>0</u>
• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>
• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>
<i>Fill in the number of children with a nonmedical exemption for each vaccine</i>	<i>Fill in the number of students with a nonmedical exemption for each vaccine</i>	<i>Fill in the number of students with a nonmedical exemption for each vaccine:</i>
DTaP/Tdap <u>0</u> Polio <u>0</u>	DTaP/Tdap <u>3</u> Polio <u>3</u>	DTaP/Tdap <u>0</u> Polio <u>0</u>
Varicella <u>0</u> Measles <u>0</u>	Varicella <u>3</u> Measles <u>3</u>	Varicella <u>0</u> Measles <u>0</u>
Rubella <u>0</u> Mumps <u>0</u>	Rubella <u>3</u> Mumps <u>3</u>	Rubella <u>0</u> Mumps <u>0</u>
Hepatitis B <u>0</u> Hepatitis A <u>0</u>	Hepatitis B <u>3</u> Hepatitis A <u>3</u>	Hepatitis B <u>0</u> Hepatitis A <u>0</u>
HIB <u>0</u> All <u>0</u> <small>(Child has a nonmedical exemption for all vaccines)</small>	All <u>3</u> <small>(Student has a nonmedical exemption for all vaccines)</small>	All <u>0</u> <small>(Student has a nonmedical exemption for all vaccines)</small>

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: R E Jewell Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 485

Students not counted : 0

Adjusted Enrollment : 485

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	462	Polio	464
Varicella	469	Measles	465
Mumps	473	Rubella	473
Hep B	464		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 485

Number of students in K through 11th grade who are complete for Hep A vaccine 462

Number of students with **all** the vaccines required for their grade 450

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 31

How many nonmedical exemptions are from :

- the online module 29
- a health care practitioner 2

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	23	Polio	20
Varicella	16	Measles	20
Mumps	12	Rubella	12
Hep B	20	Hep A	20

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 12

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Rosland Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<i>Complete only for children younger than kindergarten</i>		
Total Enrollment: <u>0</u>	Total Enrollment: <u>41</u>	Total Enrollment: <u>0</u>
Children not counted: <u>0</u>	Children not counted: <u>0</u>	Children not counted: <u>0</u>
Children ≤ 18 months of age: <u>0</u>	Adjusted enrollment: <u>41</u>	Adjusted enrollment: <u>0</u>
Adjusted Enrollment: <u>0</u>		
<i>List the number of children with the indicated number of doses</i>		
DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	DTaP/Tdap <u>0</u> (1 dose after age 7)
Polio <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Polio <u>0</u> (4 doses, or 3rd after age 4)
Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1+ dose or disease history)
Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Measles <u>0</u> (1+ dose)
HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	2nd Measles <u>0</u> (1 dose)
		Rubella <u>0</u> (1+ dose)
		Mumps <u>0</u> (1+ dose)
		Hepatitis B <u>0</u> (3+ doses)
		Hepatitis A <u>0</u> (2 doses)
		All <u>0</u> (Student has received all of the above doses)
<i>Fill in the number of children with:</i>		
No record: <u>0</u>	No record: <u>0</u>	No record: <u>0</u>
Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>
Nonmedical exemptions: <u>0</u>	Nonmedical exemptions: <u>3</u>	Nonmedical exemptions: <u>0</u>
<i>How many of the nonmedical exemptions are from:</i>		
• the online module <u>0</u>	• the online module <u>3</u>	• the online module <u>0</u>
• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>
• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>
<i>Fill in the number of children with a nonmedical exemption for each vaccine</i>		
DTaP/Tdap <u>0</u>	Polio <u>0</u>	DTaP/Tdap <u>0</u>
Varicella <u>0</u>	Measles <u>0</u>	Varicella <u>0</u>
Rubella <u>0</u>	Mumps <u>0</u>	Rubella <u>0</u>
Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Hepatitis B <u>0</u>
HIB <u>0</u>	All <u>0</u>	Hepatitis A <u>0</u>
	(Child has a nonmedical exemption for all vaccines)	All <u>0</u>
		(Student has a nonmedical exemption for all vaccines)

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Rosland Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
 Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 213

Students not counted : 0

Adjusted Enrollment : 213

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	205	Polio	204
Varicella	205	Measles	202
Mumps	205	Rubella	205
Hep B	207		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 213

Number of students in K through 11th grade who are complete for Hep A vaccine 201

Number of students with all the vaccines required for their grade 199

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 13

How many nonmedical exemptions are from :

- the online module 13
- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	8	Polio	9
Varicella	8	Measles	11
Mumps	8	Rubella	8
Hep B	6	Hep A	11

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 5

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Silver Rail Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																								
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> </tr> <tr> <td>Varicella <u>0</u></td> <td>Measles <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> </tr> <tr> <td>Rubella <u>0</u></td> <td>Mumps <u>0</u></td> <td>HIB <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Child has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>	Varicella <u>0</u>	Measles <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Rubella <u>0</u>	Mumps <u>0</u>	HIB <u>0</u>	All <u>0</u>	<p><i>Complete only for students in kindergarten</i></p> <p>Total Enrollment: <u>84</u>                      Children not counted: <u>0</u>                      Adjusted enrollment: <u>84</u></p> <hr/> <p><i>List the number of students with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>78</u> (5 doses, or 4th after age 4)</td> <td>Polio <u>77</u> (4 doses, or 3rd after age 4)</td> <td>Measles <u>81</u> (1+ dose)</td> <td>Rubella <u>81</u> (1+ 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Silver Rail Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 503

Students not counted : 3

Adjusted Enrollment : 500

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	473	Polio	470
Varicella	476	Measles	474
Mumps	483	Rubella	483
Hep B	483		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 500

Number of students in K through 11th grade who are complete for Hep A vaccine 468

Number of students with **all** the vaccines required for their grade 457

Fill in the number of students with:

No record : 0

Medical exemptions : 0

Nonmedical exemptions : 36

How many nonmedical exemptions are from :

- the online module 36
- a health care practitioner 0

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	26	Polio	29
Varicella	24	Measles	26
Mumps	17	Rubella	17
Hep B	16	Hep A	26

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 13

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule



**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Three Rivers Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																													
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: right; 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## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Three Rivers Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05,06,07,08

Total Enrollment : 445

Students not counted : 0

Adjusted Enrollment : 445

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	401	Polio	402
Varicella	411	Measles	401
Mumps	412	Rubella	412
Hep B	408		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 445

Number of students in K through 11th grade who are complete for Hep A vaccine 392

Number of students with **all** the vaccines required for their grade 384

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 55

How many nonmedical exemptions are from :

- the online module 54
- a health care practitioner 1

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	42	Polio	43
Varicella	34	Measles	44
Mumps	33	Rubella	33
Hep B	37	Hep A	48

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for **all** the vaccines required for their grade 30

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: Westside Village Magnet School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade
<i>Complete only for children younger than kindergarten</i>		
Total Enrollment: <u>0</u>	Total Enrollment: <u>27</u>	Total Enrollment: <u>27</u>
Children not counted: <u>0</u>	Children not counted: <u>0</u>	Children not counted: <u>0</u>
Children ≤ 18 months of age: <u>0</u>	Adjusted enrollment: <u>27</u>	Adjusted enrollment: <u>27</u>
Adjusted Enrollment: <u>0</u>		
<i>List the number of children with the indicated number of doses</i>		
DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	DTaP/Tdap <u>22</u> (1 dose after age 7)
Varicella <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Polio <u>22</u> (4 doses, or 3rd after age 4)
Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>24</u> (1+ dose or disease history)
Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Measles <u>25</u> (1+ dose)
HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	2nd Measles <u>24</u> (1 dose)
		Rubella <u>25</u> (1+ dose)
		Mumps <u>25</u> (1+ dose)
		Hepatitis B <u>22</u> (3+ doses)
		Hepatitis A <u>22</u> (2 doses)
		All <u>20</u> (Student has received all of the above doses)
<i>Fill in the number of children with:</i>		
No record: <u>0</u>	No record: <u>0</u>	No record: <u>0</u>
Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>	Medical exemptions: <u>0</u>
Nonmedical exemptions: <u>0</u>	Nonmedical exemptions: <u>10</u>	Nonmedical exemptions: <u>7</u>
<i>How many of the nonmedical exemptions are from:</i>		
• the online module <u>0</u>	• the online module <u>10</u>	• the online module <u>7</u>
• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>	• a health care practitioner <u>0</u>
• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>	• a religious exemption signed prior to 3/1/14 <u>0</u>
<i>Fill in the number of children with a nonmedical exemption for each vaccine</i>		
DTaP/Tdap <u>0</u>	Polio <u>0</u>	DTaP/Tdap <u>5</u>
Varicella <u>0</u>	Measles <u>0</u>	Polio <u>5</u>
Rubella <u>0</u>	Mumps <u>0</u>	Varicella <u>3</u>
Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Rubella <u>2</u>
HIB <u>0</u>	All <u>0</u> (Child has a nonmedical exemption for all vaccines)	Hepatitis B <u>5</u>
		Hepatitis A <u>5</u>
		All <u>2</u> (Student has a nonmedical exemption for all vaccines)

## IMMUNIZATION PRIMARY REVIEW SUMMARY SECTION H

### Follow-Up Statistical Report

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: Westside Village Magnet School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714

Date of Report: 03/02/2020

Assessment Date: 03/02/2020

#### H. All Students enrolled at this school in grades K-12

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05,06,07,08

Total Enrollment : 248

Students not counted : 0

Adjusted Enrollment : 248

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	205	Polio	206
Varicella	220	Measles	214
Mumps	221	Rubella	221
Hep B	203		

Number of students in K through 11th grade (these students are required to have Hep A vaccine) 248

Number of students in K through 11th grade who are complete for Hep A vaccine 207

Number of students with all the vaccines required for their grade 191

Fill in the number of students with:

No record : 0

Medical exemptions : 1

Nonmedical exemptions : 54

How many nonmedical exemptions are from :

- the online module 53
- a health care practitioner 1

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	41	Polio	39
Varicella	28	Measles	34
Mumps	27	Rubella	27
Hep B	43	Hep A	40

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade 25

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools, preschools, head start and certified child care programs)  
**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of school or program: William E. Miller Elementary School  
 Name of person completing report: Jamie Roberts  
 Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

E. Preschool, Child Care, Head Start	F. Kindergarten	G. Seventh Grade																																																																								
<p><i>Complete only for children younger than kindergarten</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Children ≤ 18 months of age: <u>0</u>                      Adjusted Enrollment: <u>0</u></p> <hr/> <p><i>List the number of children with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (4+ doses)</td> <td>Polio <u>0</u> (3+ doses)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1 dose or disease history)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (1+ dose)</td> </tr> <tr> <td>Rubella <u>0</u> (1+ dose)</td> <td>Mumps <u>0</u> (1+ dose)</td> <td>HIB <u>0</u> (Complete or 5 yrs old)</td> <td>All <u>0</u> (Child has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of children with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of children with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> </tr> <tr> <td>Varicella <u>0</u></td> <td>Measles <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> </tr> <tr> <td>Rubella <u>0</u></td> <td>Mumps <u>0</u></td> <td>HIB <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Child has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	Varicella <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)	Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)	DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>	Varicella <u>0</u>	Measles <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Rubella <u>0</u>	Mumps <u>0</u>	HIB <u>0</u>	All <u>0</u>	<p><i>Complete only for students in kindergarten</i></p> <p>Total Enrollment: <u>68</u>                      Children not counted: <u>0</u>                      Adjusted enrollment: <u>68</u></p> <hr/> <p><i>List the number of students with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>61</u> (5 doses, or 4th after age 4)</td> <td>Polio <u>60</u> (4 doses, or 3rd after age 4)</td> <td>Measles <u>64</u> (1+ dose)</td> <td>Rubella <u>64</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>62</u> (1+ dose or disease history)</td> <td>Measles <u>64</u> (1+ dose)</td> <td>Hepatitis B <u>62</u> (3+ doses)</td> <td>Hepatitis A <u>61</u> (2 doses)</td> </tr> <tr> <td>2nd Measles <u>62</u> (1 dose)</td> <td>Rubella <u>64</u> (1+ dose)</td> <td>Hepatitis B <u>62</u> (3+ doses)</td> <td>All <u>59</u> (Student has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of students with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>8</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>8</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of students with a nonmedical exemption for each vaccine</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>7</u></td> <td>Polio <u>8</u></td> <td>Measles <u>6</u></td> <td>Mumps <u>4</u></td> </tr> <tr> <td>Varicella <u>6</u></td> <td>Measles <u>6</u></td> <td>Hepatitis B <u>6</u></td> <td>Hepatitis A <u>7</u></td> </tr> <tr> <td>Rubella <u>4</u></td> <td>Mumps <u>4</u></td> <td>HIB <u>3</u></td> <td>All <u>3</u></td> </tr> </table> <p style="text-align: center;">(Student has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>61</u> (5 doses, or 4th after age 4)	Polio <u>60</u> (4 doses, or 3rd after age 4)	Measles <u>64</u> (1+ dose)	Rubella <u>64</u> (1+ dose)	Varicella <u>62</u> (1+ dose or disease history)	Measles <u>64</u> (1+ dose)	Hepatitis B <u>62</u> (3+ doses)	Hepatitis A <u>61</u> (2 doses)	2nd Measles <u>62</u> (1 dose)	Rubella <u>64</u> (1+ dose)	Hepatitis B <u>62</u> (3+ doses)	All <u>59</u> (Student has received all of the above doses)	DTaP/Tdap <u>7</u>	Polio <u>8</u>	Measles <u>6</u>	Mumps <u>4</u>	Varicella <u>6</u>	Measles <u>6</u>	Hepatitis B <u>6</u>	Hepatitis A <u>7</u>	Rubella <u>4</u>	Mumps <u>4</u>	HIB <u>3</u>	All <u>3</u>	<p><i>Complete only for students in 7th grade</i></p> <p>Total Enrollment: <u>0</u>                      Children not counted: <u>0</u>                      Adjusted enrollment: <u>0</u></p> <hr/> <p><i>List the number of students with the indicated number of doses</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u> (1 dose after age 7)</td> <td>Polio <u>0</u> (4 doses, or 3rd after age 4)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Rubella <u>0</u> (1+ dose)</td> </tr> <tr> <td>Varicella <u>0</u> (1+ dose or disease history)</td> <td>Measles <u>0</u> (1+ dose)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>Hepatitis A <u>0</u> (2 doses)</td> </tr> <tr> <td>2nd Measles <u>0</u> (1 dose)</td> <td>Rubella <u>0</u> (1+ dose)</td> <td>Hepatitis B <u>0</u> (3+ doses)</td> <td>All <u>0</u> (Student has received all of the above doses)</td> </tr> </table> <hr/> <p><i>Fill in the number of students with:</i></p> <p>No record: <u>0</u>                      Medical exemptions: <u>0</u>                      Nonmedical exemptions: <u>0</u></p> <p>How many of the nonmedical exemptions are from:</p> <ul style="list-style-type: none"> <li>• the online module <u>0</u></li> <li>• a health care practitioner <u>0</u></li> <li>• a religious exemption signed prior to 3/1/14 <u>0</u></li> </ul> <hr/> <p><i>Fill in the number of students with a nonmedical exemption for each vaccine:</i></p> <table style="width:100%;"> <tr> <td>DTaP/Tdap <u>0</u></td> <td>Polio <u>0</u></td> <td>Measles <u>0</u></td> <td>Mumps <u>0</u></td> </tr> <tr> <td>Varicella <u>0</u></td> <td>Measles <u>0</u></td> <td>Hepatitis B <u>0</u></td> <td>Hepatitis A <u>0</u></td> </tr> <tr> <td>Rubella <u>0</u></td> <td>Mumps <u>0</u></td> <td>HIB <u>0</u></td> <td>All <u>0</u></td> </tr> </table> <p style="text-align: center;">(Student has a nonmedical exemption for all vaccines)</p>	DTaP/Tdap <u>0</u> (1 dose after age 7)	Polio <u>0</u> (4 doses, or 3rd after age 4)	Measles <u>0</u> (1+ dose)	Rubella <u>0</u> (1+ dose)	Varicella <u>0</u> (1+ dose or disease history)	Measles <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (2 doses)	2nd Measles <u>0</u> (1 dose)	Rubella <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	All <u>0</u> (Student has received all of the above doses)	DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>	Varicella <u>0</u>	Measles <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>	Rubella <u>0</u>	Mumps <u>0</u>	HIB <u>0</u>	All <u>0</u>
DTaP/Tdap <u>0</u> (4+ doses)	Polio <u>0</u> (3+ doses)	Measles <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)																																																																							
Varicella <u>0</u> (1 dose or disease history)	Measles <u>0</u> (1+ dose)	Hepatitis B <u>0</u> (3+ doses)	Hepatitis A <u>0</u> (1+ dose)																																																																							
Rubella <u>0</u> (1+ dose)	Mumps <u>0</u> (1+ dose)	HIB <u>0</u> (Complete or 5 yrs old)	All <u>0</u> (Child has received all of the above doses)																																																																							
DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>																																																																							
Varicella <u>0</u>	Measles <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>																																																																							
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Varicella <u>6</u>	Measles <u>6</u>	Hepatitis B <u>6</u>	Hepatitis A <u>7</u>																																																																							
Rubella <u>4</u>	Mumps <u>4</u>	HIB <u>3</u>	All <u>3</u>																																																																							
DTaP/Tdap <u>0</u> (1 dose after age 7)	Polio <u>0</u> (4 doses, or 3rd after age 4)	Measles <u>0</u> (1+ dose)	Rubella <u>0</u> (1+ dose)																																																																							
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DTaP/Tdap <u>0</u>	Polio <u>0</u>	Measles <u>0</u>	Mumps <u>0</u>																																																																							
Varicella <u>0</u>	Measles <u>0</u>	Hepatitis B <u>0</u>	Hepatitis A <u>0</u>																																																																							
Rubella <u>0</u>	Mumps <u>0</u>	HIB <u>0</u>	All <u>0</u>																																																																							

**IMMUNIZATION PRIMARY REVIEW SUMMARY  
SECTION H**

**Follow-Up Statistical Report**

(For use by public, charter, alternative and private schools Kindergarten through 12th Grade)

**THIS SECTION IS DUE TO YOUR COUNTY HEALTH DEPARTMENT NO LATER THAN 12 DAYS AFTER EXCLUSION DAY.**

Demographic Information: This is information about your school or program. We use this information to contact you if we have questions. Please be neat and accurate. Thanks!

Name of School or Program: William E. Miller Elementary School

Name of person completing report: Jamie Roberts

Phone: 541-355-7714 Date of Report: 03/02/2020 Assessment Date: 03/02/2020

**H. All Students enrolled at this school in grades K-12**

Complete for entire student body, grades K-12.  
Grades served at this school (mark all that apply) :

Grades Served: KG,01,02,03,04,05

Total Enrollment : 552

Students not counted : 0

Adjusted Enrollment : 552

Fill in the total number of students who have all of the vaccines required for their grade level

D/T/P	<input type="text" value="514"/>	Polio	<input type="text" value="510"/>
Varicella	<input type="text" value="516"/>	Measles	<input type="text" value="513"/>
Mumps	<input type="text" value="526"/>	Rubella	<input type="text" value="526"/>
Hep B	<input type="text" value="509"/>		

Number of students in K through 11th grade (these students are required to have Hep A vaccine)

Number of students in K through 11th grade who are complete for Hep A vaccine

Number of students with all the vaccines required for their grade

Fill in the number of students with:

No record : 0

Medical exemptions : 2

Nonmedical exemptions : 51

How many nonmedical exemptions are from :

- the online module 48
- a health care practitioner 3

Fill in the number of students with a nonmedical exemption for each vaccine

D/T/P	<input type="text" value="38"/>	Polio	<input type="text" value="39"/>
Varicella	<input type="text" value="36"/>	Measles	<input type="text" value="39"/>
Mumps	<input type="text" value="25"/>	Rubella	<input type="text" value="25"/>
Hep B	<input type="text" value="43"/>	Hep A	<input type="text" value="40"/>

( only include students in K through 11th grade who have nonmedical exemptions for Hep A vaccine)

Number of students with a nonmedical exemption for all the vaccines required for their grade

\* Not all immunizations are required for all grades. These numbers may not total to 100% if some children have medical exemptions, or are incomplete or in process with immunizations but do not need an exemption because they are on schedule