

# State Immunization Certificate (Colorado) [.2247 - .2331]

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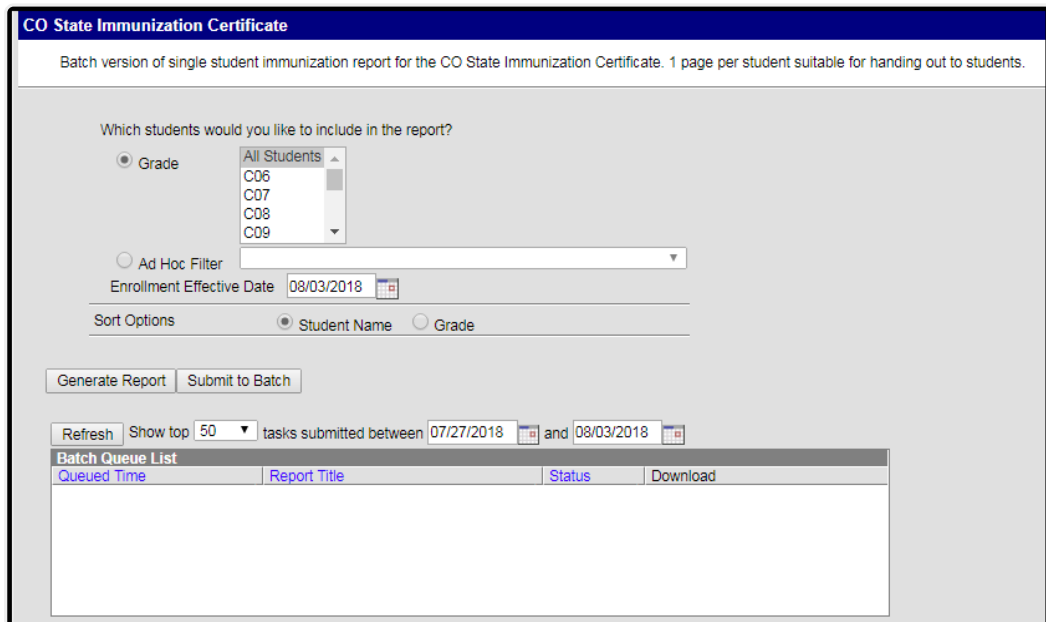
You are viewing a previous version of this article. See [State Immunization Certificate \(Colorado\)](#) for the most current information.

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**Classic View:** Health > Reports > CO State Immunization Cert

**Search Terms:** CO State Immunization Cert

The Colorado State Immunization Certificate is used to generate a report of immunization compliance rules for students.



**CO State Immunization Certificate**

Batch version of single student immunization report for the CO State Immunization Certificate. 1 page per student suitable for handing out to students.

Which students would you like to include in the report?

Grade  Ad Hoc Filter

Enrollment Effective Date: 08/03/2018

Sort Options:  Student Name  Grade

Buttons: Generate Report, Submit to Batch

Refresh | Show top 50 tasks submitted between 07/27/2018 and 08/03/2018

Batch Queue List			
Queued Time	Report Title	Status	Download

CO State Immunization Certificate

## Report Logic

Students report on separate pages of the report.

## Generation Steps

1. Select the students to include in the report, either by **Grade** or by selecting an **Ad hoc Filter**.
2. Enter an **Enrollment Effective Date**.
3. Choose how the report should sort, either by **Student Name** or by **Grade**.

4. Click **Generate Report** or **Submit to Batch**. The report displays as a PDF.

# Report Example

**COLORADO CERTIFICATE OF IMMUNIZATION**  
www.coloradoimmunizations.com

**COLORADO**  
Department of Public Health & Environment

This form is to be completed by a health care provider (physician (MD, DO), advanced practice nurse (APN) or delegated physician's assistant (PA)) or school health authority. School required immunizations follow the ACIP schedule. Note: Final doses of DTaP, IPV, MMR and Varicella are required prior to kindergarten entry. Tdap is required at 6th grade entry.

Student Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Parent/guardian: \_\_\_\_\_

Required Vaccines	Immunization date(s) MM/DD/YY	Titer Date* MM/DD/YY
Hep B Hepatitis B		
DTaP Diphtheria, Tetanus, Pertussis (pediatric)		
Tdap Tetanus, Diphtheria, Pertussis		
Td Tetanus, Diphtheria		
Hib Haemophilus Influenzae type b		
IPV/OPV Polio		
PCV Pneumococcal Conjugate		
MMR Measles, Mumps, Rubella		
Measles		
Mumps		
Rubella		
Varicella Chickenpox		

Varicella - date of disease

Varicella - positive screen date

\*A positive laboratory titer report must be provided to the school to document immunity.

\*The shaded area under "Titer Date" indicates that a titer is not acceptable proof of immunity for this vaccine.

Recommended Vaccines	Immunization date(s) MM/DD/YY
HPV Human Papillomavirus	
Rota Rotavirus	
MCV4/MPSV4 Meningococcal	
Men B Meningococcal	
Hep A Hepatitis A	
Flu Influenza	
COVID-19	
Other	

Health care provider Signature or Stamp: \_\_\_\_\_ Date: \_\_\_\_\_

Student is current on required immunizations for age (circle one):      Yes      No

OR

Immunization record transcribed/reviewed by school health authority:

School health authority signature or stamp: \_\_\_\_\_ Date: \_\_\_\_\_

(Optional) I authorize my/my student's school to share my/my student's immunization records with state/local public health agencies and the Colorado Immunization Information System, the state's secure, confidential immunization registry.

Parent/Guardian/Student (emancipated or over 18 yrs old) signature: \_\_\_\_\_ Date: \_\_\_\_\_

Last Reviewed: May 2021

CO State Immunization Certificate Example

# Report Layout

Data Element	Description	Location
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Data Element	Description	Location
<b>Student Name</b>	The student's full name. <i>Alphanumeric</i>	Census > Person > Demographics > First Name, Last Name, Suffix  identity.firstName identity.lastName identity.suffix
<b>Date of Birth</b>	The student's birthdate. <i>Date fields, MM/DD/YYYY</i>	Census > People > Demographics > Birth Date  identity.birthDate
<b>Parent/Guardian</b>	The parent/guardian's full name. <i>Alphanumeric</i>	Census > People > Relationships > Name
<b>Required Vaccines</b> <i>Reports the Immunization Dates (MM/DD/YYYY) from the student's Immunizations tool (Student Information &gt; Health &gt; Immunizations) for each of the following vaccines.</i>		
<b>Hep B</b>	Hepatitis B	
<b>DTaP</b>	Diphtheria, Tetanus, Pertussis (pediatric)	
<b>DT</b>	Diphtheria, Tetanus (pediatric)	
<b>Tdap</b>	Tetanus, Diphtheria, Pertussis	
<b>Td</b>	Tetanus, Diphtheria	
<b>Hib</b>	Haemophilus Influenzae Type B	
<b>IPV/OPV</b>	Polio	
<b>PCV</b>	Pneumococcal Conjugate	
<b>MMR</b>	Measles, Mumps, Rubella	
<b>Measles</b>	N/A	
<b>Mumps</b>	N/A	
<b>Rubella</b>	N/A	
<b>Varicella</b>	Chickenpox	
<b>Varicella date of disease</b>	The Waiver Date when the student has an exemption of "H"-Hx/Dis.	
<b>Varicella positive screen date</b>	The Waiver Date when the student has an exemption of "L"-Lab Verified Titers.	

Data Element	Description	Location
<b>Recommended Vaccines</b> <i>Reports the Immunization Dates (MM/DD/YYYY) from the student's Immunizations tool (Student Information &gt; Health &gt; Immunizations) for each of the following vaccines.</i>		
<b>HPV</b>	Human Papillomavirus	
<b>Rota</b>	Rotavirus	
<b>MCV4/MPSV4</b>	Meningococcal	
<b>Hep A</b>	Hepatitis A	
<b>Flu</b>	Influenza	
<b>COVID-19</b>	N/A	
<b>Other</b>	Reports blank.	

## Previous Versions

[State Immunization Certificate \(Colorado\) \[.2243 and previous\]](#)