School Medical Immunization

Cycle: 3

County: LONOKE

CABOT FRESHMAN ACADEMY

LEA: 4304017

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K											0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	810	798	797	797	795	794	786	772	NA	779	2	10	12	24

Had Disease	2 Doses*
0	4

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	7	803	0	1

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT FRESHMAN ACADEMY

LEA: 4304017

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions			
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
10	5	5	5	5	5	5	5	1	NA	5	0	1	0	1

Had Disease	2 Doses*
0	2

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	0	6	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT FRESHMAN ACADEMY

LEA: 4304017

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions			
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
11	4	4	4	4	4	4	4	0	NA	4	0	0	0	0
								2 Doses*					-	

Had Disease	2 Doses*
0	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
11	0	4	0	0

School Medical Immunization

Cycle: 3

CABOT HIGH SCHOOL 2024 - 2025 County: LONOKE

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	is		Section II - Exemptions			
Α	В	С										М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	8	8	8	8	8	8	8	6	NA	8	0	0	0	0
	·		<i>p</i>	<u> </u>	•	Had Disease		2 Doses*				1	<u> </u>	

Had 2 Doses*
0 0

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	0	8	0	1

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

Cycle: 3

CABOT HIGH SCHOOL 2024 - 2025 County: LONOKE

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Section II - Exemptions			
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
10	770	759	760	758	755	754	753	583	NA	748	1	11	10	22
	•			·		Had Disease		2 Doses*						

Had
Disease2 Doses*0130

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	3	770	1	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

Cycle: 3

CABOT HIGH SCHOOL 2024 - 2025 County: LONOKE

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
11	699	692	695	694	696	689	690	16	NA	681	5	9	11	25
			*	•		Had		2 Doses*						

Had Disease 2 Doses*

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
11	4	706	0	1

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

Cycle: 3

CABOT HIGH SCHOOL 2024 - 2025 County: LONOKE

			Section I - Number of Students Meeting Requirements										Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	Κ	L	M	N	0		
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt		
12	667	658	657	656	655	653	655	14	NA	650	2	9	11	22		
	•			<u> </u>		Had		2 Doses*			-					

Had Disease 2 Doses*

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
12	3	672	0	4

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

Cycle: 3

CABOT JUNIOR HIGH NORTH 2024 - 2025 County: LONOKE

			Section I - Number of Students Meeting Requirements										- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	466	458	459	459	459	458	449	449	NA	445	1	6	11	18

Had Disease

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	3	463	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT JUNIOR HIGH NORTH

LEA: 4304011

			Section I - Number of Students Meeting Requirements										Section II - Exemptions		
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
08	440	430	430	430	428	429	421	419	NA	419	1	6	15	22	
						Had		2 Dagas*		·					

Had Disease	2 Doses*
0	1

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
08	0	441	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT JUNIOR HIGH SOUTH

LEA: 4304004

2024 - 2025

			Section I - Number of Students Meeting Requirements										Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	359	356	356	356	353	352	348	346	NA	342	0	8	6	14

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	3	356	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT JUNIOR HIGH SOUTH

LEA: 4304004

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
08	340	338	338	338	337	333	334	333	NA	332	0	2	4	6
							The state of the s							

Had Disease	2 Doses*
0	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
08	2	338	0	0

School Medical Immunization

Cycle: 3

CABOT LEARNING ACADEMY 2024 - 2025 County: LONOKE

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Gra	Total de Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	3	3	3	3	3	3	NA	NA	3	3	0	0	0	0

Had Disease

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	0	3	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT LEARNING ACADEMY

LEA: 4304018

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	4	4	4	4	4	4	NA	NA	4	4	0	0	0	0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	4	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT LEARNING ACADEMY

LEA: 4304018

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	5	5	5	5	5	5	0	NA	NA	5	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	5	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT LEARNING ACADEMY

LEA: 4304018

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	5	5	5	5	5	5	0	NA	NA	5	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	5	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT LEARNING ACADEMY

LEA: 4304018

2024 - 2025

			Section I - Number of Students Meeting Requirements										Section II - Exemptions				
Α	В	С	C D E F G H I J K										N	0			
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt			
04	9	9	9	9	9	9	0	NA	NA	9	0	0	0	0			

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	9	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT MIDDLE SCHOOL NORTH

LEA: 4304012

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	425	416	416 416 419 416 415 64 NA NA 410										6	12

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	3	422	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT MIDDLE SCHOOL NORTH

LEA: 4304012

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	401	395	395 395 396 394 393 366 NA NA 369										6	14

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	18	383	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT MIDDLE SCHOOL SOUTH

LEA: 4304010

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	374	366	366 368 370 369 369 64 NA NA 362 0										3	6

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	6	368	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT MIDDLE SCHOOL SOUTH

LEA: 4304010

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	381	378	378 380 380 380 380 363 NA NA 361										3	12

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	8	373	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

2024 - 2025

				Sectio		Section II - Exemption								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	4	4	4 4 4 4 1 NA NA 4										0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	0	4	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	3	3	3 3 3 3 3 NA NA 3 0										0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	0	3	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

2024 - 2025

			Section I - Number of Students Meeting Requirements										- Exemp	tions
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	26	25	25	26	25	25	23	23	NA	23	0	1	1	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	1	25	0	0

School Medical Immunization

Cycle: 3

CABOT PANTHER ACADEMY 2024 - 2025 County: LONOKE

				Section	S		Section II - Exemptions							
Α	В	С	C D E F G H I J K									M	N	0
Grade	Total Enrolled	1	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
08	27	27	27	27	27	27	26	26	NA	26	0	0	0	0
				•		Had Disease		2 Doses*						

Had Disease 0 0

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
08	1	26	0	0

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K								L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	49	48	48	48	47	47	46	43	NA	45	0	1	0	1
	· · · · · · · · · · · · · · · · · · ·					Had		2 Doses*				-		

Had Disease	2 Doses*
0	2

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	3	46	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
10	48	47	47	47	47	47	47	32	NA	47	0	1	0	1
	•		φ			Had		2 Doses*						

Had Disease	2 Doses*
0	14

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	0	48	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CABOT PANTHER ACADEMY

LEA: 4304703

			Section I - Number of Students Meeting Requirements										Section II - Exemptions			
Α	В	С	C D E F G H I J K									М	N	0		
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt		
11	66	65	65	65	65	65	65	1	NA	65	0	0	1	1		
	,							2 Dana*		<u> </u>						

Had Disease	2 Doses*
0	62

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
11	0	66	1	2

School Medical Immunization

Cycle: 3

CABOT PANTHER ACADEMY 2024 - 2025 County: LONOKE

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
12	112	110	111	111	111	111	111	3	NA	110	0	0	3	3
	•			•		Had		2 Doses*						

Had Disease	2 Doses*
0	105

^{*}MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

¹ dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
12	1	113	0	0

School Medical Immunization

Cycle: 3

County: LONOKE

CENTRAL ELEMENTARY SCHOOL

LEA: 4304002

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	51	50	50	50	51	50	NA	NA	51	50	0	0	0	0

	Partial Records	Compliant	Non-Compliant	Recommended			
	Р	Q	R	s			
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only			
K	1	50	0	NA			

School Medical Immunization

Cycle: 3

County: LONOKE

CENTRAL ELEMENTARY SCHOOL

LEA: 4304002

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	68	67	67	67	67	67	NA	NA	66	66	0	0	1	1

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	1	67	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CENTRAL ELEMENTARY SCHOOL

LEA: 4304002

2024 - 2025

				Section		Section II - Exemptions								
Α	В	С	C D E F G H I J K									М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	56	54	54	54	54	54	0	NA	NA	54	0	1	1	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	56	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CENTRAL ELEMENTARY SCHOOL

LEA: 4304002

2024 - 2025

				Section		Section II - Exemptions								
Α	В	C D E F G H I J K									L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	74	70	71	71	70	70	0	NA	NA	70	0	2	2	4

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	74	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

CENTRAL ELEMENTARY SCHOOL

LEA: 4304002

2024 - 2025

			Section I - Number of Students Meeting Requirements									Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
04	82	79	79	79	78	78	1	NA	NA	78	1	2	1	4	

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended		
	Р	Q	R	s		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only		
04	0	82	0	NA		

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

			Section I - Number of Students Meeting Requirements									Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0	
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt	
K	97	94	94	94	92	92	NA	NA	95	92	0	2	0	2	

	Partial Records	Compliant	Non-Compliant	Recommended		
	Р	Q	R	s		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only		
K	3	94	0	NA		

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

			Section I - Number of Students Meeting Requirements									Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0	
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt	
01	120	117	117	117	117	117	NA	NA	117	117	0	1	2	3	

	Partial Records	Compliant	Non-Compliant	Recommended		
	P	Q	R	s		
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only		
01	0	120	0	NA		

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

			Section I - Number of Students Meeting Requirements									ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	101	99	99	99	99	99	0	NA	NA	98	0	1	1	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended			
	Р	Q	R	s			
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only			
02	1	100	0	NA			

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K						κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	106	105	105	105	104	104	0	NA	NA	104	1	0	1	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	106	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	125	123	123	123	123	121	0	NA	NA	121	2	1	1	4

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	125	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

EASTSIDE ELEMENTARY SCHOOL

LEA: 4304001

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	1	1	1	1	1	1	0	NA	NA	1	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	0	1	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MAGNESS CREEK ELEMENTARY

LEA: 4304013

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	60	58	59	59	56	56	NA	NA	59	56	0	4	0	4

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	0	60	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MAGNESS CREEK ELEMENTARY

LEA: 4304013

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	71	68	68	68	68	68	NA	NA	68	68	0	3	0	3

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	71	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MAGNESS CREEK ELEMENTARY

LEA: 4304013

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	65	60	63	63	60	60	0	NA	NA	60	0	5	0	5

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	65	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MAGNESS CREEK ELEMENTARY

LEA: 4304013

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	64	64	64	64	64	62	0	NA	NA	62	0	3	0	3

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	65	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MAGNESS CREEK ELEMENTARY

LEA: 4304013

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K						κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	63	63	63	63	63	63	0	NA	NA	63	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	63	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MOUNTAIN SPRINGS ELEM SCHOOL

LEA: 4304015

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	is		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	81	73	74	73	73	73	NA	NA	75	72	1	2	3	6

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	2	78	1	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MOUNTAIN SPRINGS ELEM SCHOOL

LEA: 4304015

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	94	91	91	91	91	91	NA	NA	92	91	0	1	1	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	1	93	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MOUNTAIN SPRINGS ELEM SCHOOL

LEA: 4304015

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	99	98	98	98	97	97	0	NA	NA	97	0	0	2	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	99	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MOUNTAIN SPRINGS ELEM SCHOOL

LEA: 4304015

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	84	82	82	82	81	81	0	NA	NA	81	0	2	1	3

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	84	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

MOUNTAIN SPRINGS ELEM SCHOOL

LEA: 4304015

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K						L	М	N	0		
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	97	95	95	95	95	95	0	NA	NA	95	0	2	0	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	97	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

NORTHSIDE ELEMENTARY SCHOOL

LEA: 4304008

2024 - 2025

			Section I - Number of Students Meeting Requirements									ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	60	59	60	60	59	59	NA	NA	60	58	0	0	1	1

	Partial Records	Compliant	Non-Compliant	Recommended
	P	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	1	59	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

NORTHSIDE ELEMENTARY SCHOOL

LEA: 4304008

2024 - 2025

			Section I - Number of Students Meeting Requirements									ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	54	51	51	51	51	51	NA	NA	51	51	0	1	1	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	1	53	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

NORTHSIDE ELEMENTARY SCHOOL

LEA: 4304008

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K						L	М	N	0		
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	72	70	70	70	68	68	0	NA	NA	68	0	1	3	4

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	72	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

NORTHSIDE ELEMENTARY SCHOOL

LEA: 4304008

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	71	69	69	69	69	69	0	NA	NA	69	0	2	0	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	71	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

NORTHSIDE ELEMENTARY SCHOOL

LEA: 4304008

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K						L	М	N	0		
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	59	58	58	58	59	59	0	NA	NA	58	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	1	58	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

SOUTHSIDE ELEMENTARY SCHOOL

LEA: 4304007

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	M	N	0
Grade	Total Enrolled									Code M	Code R	Code P	Total Exempt	
K	118	114	114	116	113	113	NA	NA	116	112	0	0	0	0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	5	112	1	NA

School Medical Immunization

Cycle: 3

County: LONOKE

SOUTHSIDE ELEMENTARY SCHOOL

LEA: 4304007

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled										Code M	Code R	Code P	Total Exempt
01	94	91	91	91	90	90	NA	NA	91	90	0	1	0	1

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	1	91	2	NA

School Medical Immunization

Cycle: 3

County: LONOKE

SOUTHSIDE ELEMENTARY SCHOOL

LEA: 4304007

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	116	111	112	112	112	112	0	NA	NA	111	0	0	1	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	2	112	2	NA

School Medical Immunization

Cycle: 3

County: LONOKE

SOUTHSIDE ELEMENTARY SCHOOL

LEA: 4304007

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	125	124	124	124	124	124	0	NA	NA	124	0	0	0	0

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	1	124	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

SOUTHSIDE ELEMENTARY SCHOOL

LEA: 4304007

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	- Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	98	96	96	96	96	96	1	NA	NA	96	0	0	2	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	98	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

STAGECOACH ELEMENTARY SCHOOL

LEA: 4304014

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	S		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled										Code M	Code R	Code P	Total Exempt
K	96	93	93	93	91	91	NA	NA	92	91	0	4	1	4

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	1	95	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

STAGECOACH ELEMENTARY SCHOOL

LEA: 4304014

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	73	71	71	71	71	71	NA	NA	71	71	0	0	1	1

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	72	1	NA

School Medical Immunization

Cycle: 3

County: LONOKE

STAGECOACH ELEMENTARY SCHOOL

LEA: 4304014

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K								L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	100	100	100	100	99	99	0	NA	NA	99	0	0	1	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	0	100	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

STAGECOACH ELEMENTARY SCHOOL

LEA: 4304014

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K								L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	99	98	98	98	97	97	0	NA	NA	97	0	2	1	3

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	100	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

STAGECOACH ELEMENTARY SCHOOL

LEA: 4304014

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requiremen	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	113	109	110	110	110	110	0	NA	NA	109	0	2	1	3

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	1	112	0	NA

School Medical Immunization

Cycle: 3

WARD CENTRAL ELEMENTARY 2024 - 2025 County: LONOKE

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	90	87	87	87	85	85	NA	NA	87	85	0	0	3	3

Had Disease

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	1	88	1	NA

LEA: 4304009

School Medical Immunization

Cycle: 3

County: LONOKE

WARD CENTRAL ELEMENTARY

LEA: 4304009

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	95	92	93	93	92	92	NA	NA	92	91	0	3	1	4

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	95	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WARD CENTRAL ELEMENTARY

LEA: 4304009

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	97	95	96	96	95	95	0	NA	NA	94	0	1	1	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	1	96	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WARD CENTRAL ELEMENTARY

LEA: 4304009

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K							κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	96	94	95	95	95	95	0	NA	NA	94	0	0	1	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	1	95	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WARD CENTRAL ELEMENTARY

LEA: 4304009

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	D E F G H I J K							κ	L	M	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	80	79	79	79	78	78	0	NA	NA	77	0	2	0	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	1	79	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WESTSIDE ELEMENTARY SCHOOL

LEA: 4304006

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled									Code M	Code R	Code P	Total Exempt	
K	78	74	74	74	72	72	NA	NA	73	72	0	1	1	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
K	1	74	3	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WESTSIDE ELEMENTARY SCHOOL

LEA: 4304006

2024 - 2025

				Section	n I - Numb	er of Studen	ts Meeting	Requirement	s		Se	ection II -	- Exemp	tions
Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
Grade	Total Enrolled									Code M	Code R	Code P	Total Exempt	
01	83	82	82	82	82	82	NA	NA	82	82	0	2	0	2

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	84	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WESTSIDE ELEMENTARY SCHOOL

LEA: 4304006

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	ts		Se	ection II -	Exemp	tions
Α	В	С	C D E F G H I J K							Κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	72	69	69	69	69	69	0	NA	NA	69	0	1	2	3

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	1	72	0	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WESTSIDE ELEMENTARY SCHOOL

LEA: 4304006

2024 - 2025

		Section I - Number of Students Meeting Requirements									Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	68	66	66	66	66	66	0	NA	NA	66	0	1	0	1

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	0	67	1	NA

School Medical Immunization

Cycle: 3

County: LONOKE

WESTSIDE ELEMENTARY SCHOOL

LEA: 4304006

2024 - 2025

		Section I - Number of Students Meeting Requirements									Section II - Exemptions			
Α	В	С	D	E	F	G	Н	I	J	Κ	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	62	60	60	60	60	60	0	NA	NA	60	0	2	0	2

^{*1} Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	s
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	62	0	NA