

Unknown or Uncertain Immunization Status/Inadequate Immunization Records

In every instance, an attempt should be made to obtain the client's immunization records from the previous health care provider. Written documentation of immunization is preferred. In some instances, telephoned information from the health care provider with the exact dates of vaccination may be accepted. Verbal reports of prior immunization correlate poorly with actual immunity and should not be accepted as evidence of immunization.

Routine serologic testing of children and adults without records to determine immunity is not practical and serological correlates of protection and commercially available tests are not available for many vaccine preventable diseases. Instead, the following approach is recommended:

- Start all children and adults lacking written documentation of immunization on a primary immunization schedule as appropriate for their age.
- If indicated, routine immunizations can be given without concern of prior receipt of these vaccines. However, people who develop a serious adverse injection site reaction after administration of vaccines, particularly tetanus, diphtheria and pertussis-containing vaccines, should be individually assessed before they receive additional doses of these vaccines. The benefit of continuing the vaccine series needs to be weighed against the risk of further adverse reactions.
- There is no increase in adverse events following immunization of an individual who has previously had natural infection.

For specific vaccine schedule information, refer to [Part 1 - Immunization Schedules](#) and [Part 4 - Biological Products](#).