

Missouri Vaccine Exemption Laws

Missouri Revised Statutes Chapter 167 Pupils and Special Services

Immunization of pupils against certain diseases compulsory --exceptions--records--to be at public expense, when--fluoride treatments administered, when--rulemaking authority, procedure.

Section 167.181

1. The department of health and senior services, after consultation with the department of elementary and secondary education, shall promulgate rules and regulations governing the immunization against poliomyelitis, rubella, rubeola, mumps, tetanus, pertussis, diphtheria, and hepatitis B, to be required of children attending public, private, parochial or parish schools. Such rules and regulations may modify the immunizations that are required of children in this subsection. The immunizations required and the manner and frequency of their administration shall conform to recognized standards of medical practice. The department of health and senior services shall supervise and secure the enforcement of the required immunization program.

2. It is unlawful for any student to attend school unless he has been immunized as required under the rules and regulations of the department of health and senior services, and can provide satisfactory evidence of such immunization; except that if he produces satisfactory evidence of having begun the process of immunization, he may continue to attend school as long as the immunization process is being accomplished in the prescribed manner. **It is unlawful for any parent or guardian to refuse or neglect to have his child immunized as required by this section, unless the child is properly exempted.**

3. **This section shall not apply to any child if one parent or guardian objects in writing to his school administrator against the immunization of the child, because of religious beliefs or medical contraindications.** In cases where any such objection is for reasons of medical contraindications, a statement from a duly licensed physician must also be provided to the school administrator.

4. Each school superintendent, whether of a public, private, parochial or parish school, shall cause to be prepared a record showing the immunization status of every child enrolled in or attending a school under his jurisdiction. The name of any parent or guardian who neglects or refuses to permit a nonexempted child to be immunized against diseases as required by the rules and regulations promulgated pursuant to the provisions of this section shall be reported by the school superintendent to the department of health and senior services.

5. The immunization required may be done by any duly licensed physician or by someone under his direction. If the parent or guardian is unable to pay, the child shall be immunized at public expense by a physician or nurse at or from the county, district, city public health center or a school nurse or by a nurse or physician in the private office or clinic of the child's personal physician with the costs of immunization paid through the state Medicaid program, private insurance or in a manner to be determined by the department of health and senior services subject to state and federal appropriations, and after consultation with the school superintendent

and the advisory committee established in section 192.630, RSMo. When a child receives his or her immunization, the treating physician may also administer the appropriate fluoride treatment to the child's teeth.

6. Funds for the administration of this section and for the purchase of vaccines for children of families unable to afford them shall be appropriated to the department of health and senior services from general revenue or from federal funds if available.

7. No rule or portion of a rule promulgated under the authority of this section shall become effective unless it has been promulgated pursuant to the provisions of chapter 536, RSMo. Any rule or portion of a rule, as that term is defined in section 536.010, RSMo, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536, RSMo, and, if applicable, section 536.028, RSMo. This section and chapter 536, RSMo, are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536, RSMo, to review, to delay the effective date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2001, shall be invalid and void.

Missouri Revised Statutes
Chapter 167
Pupils and Special Services

Immunization records, disclosure, to whom--disclosure for unauthorized purpose, liability.

Section 167.183

1. Information and records pertaining to the immunization status of persons against childhood diseases as required by section 167.181 and section 210.003, RSMo, may be disclosed and exchanged without a parent's or guardian's written release authorizing such disclosure, to the following, who need to know such information to assure compliance with state statutes or to achieve age-appropriate immunization status for children:

- (1) Employees of public agencies, departments and political subdivisions;
- (2) Health records staff of school districts and child care facilities;
- (3) Persons other than public employees who are entrusted with the regular care of those under the care and custody of a state agency including, but not limited to, operators of day care facilities, group homes, residential care facilities and adoptive or foster parents;
- (4) Health care professionals.

2. If any person, authorized in subsection 1 of this section, discloses such information for any other purpose, it is an unauthorized release of confidential information and the person shall be liable for civil damages.

**Missouri Revised Statutes
Chapter 174
State Colleges and Universities**

Meningococcal disease, all on-campus students provided information on--election to receive vaccination--records to be maintained.

Section 174.335

1. Beginning with the 2004-2005 school year and for each school year thereafter, every public institution of higher education in this state shall require all students who reside in on-campus housing to sign a written waiver stating that the institution of higher education has provided the student, or if the student is a minor, the student's parents or guardian, with detailed written information on the risks associated with meningococcal disease and the availability and effectiveness of the meningococcal vaccine.
2. Any student who elects to receive the meningococcal vaccine shall not be required to sign a waiver referenced in subsection 1 of this section and shall present a record of said vaccination to the institution of higher education.
3. Each public university or college in this state shall maintain records on the meningococcal vaccination status of every student residing in on-campus housing at the university or college, including any written waivers executed pursuant to subsection 1 of this section.
4. Nothing in this section shall be construed as requiring any institution of higher education to provide or pay for vaccinations against meningococcal disease.

**Missouri Revised Statutes
Chapter 190
Emergency Services**

Vaccination program for first responders offered--definitions --participation voluntary--contingent effective date.

Section 190.091

1. As used in this section, the following terms mean:
 - (1) "Bioterrorism", the intentional use of any microorganism, virus, infectious substance, or biological product that may be engineered as a result of biotechnology or any naturally occurring or bioengineered component of any microorganism, virus, infectious substance, or biological product to cause death, disease, or other biological malfunction in a human, an animal, a plant, or any other living organism to influence the conduct of government or to intimidate or coerce a civilian population;
 - (2) "Department", the Missouri department of health and senior services;
 - (3) "Director", the director of the department of health and senior services;
 - (4) "Disaster locations", any geographical location where a bioterrorism attack, terrorist attack, catastrophic or natural disaster, or emergency occurs;

(5) "First responders", state and local law enforcement personnel, fire department personnel, and emergency medical personnel who will be deployed to bioterrorism attacks, terrorist attacks, catastrophic or natural disasters, and emergencies.

2. The department shall offer a vaccination program for first responders who may be exposed to infectious diseases when deployed to disaster locations as a result of a bioterrorism event or a suspected bioterrorism event. The vaccinations shall include, but are not limited to, smallpox, anthrax, and other vaccinations when recommended by the federal Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices.

3. Participation in the vaccination program shall be voluntary by the first responders, except for first responders who, as determined by their employer, cannot safely perform emergency responsibilities when responding to a bioterrorism event or suspected bioterrorism event without being vaccinated. The recommendations of the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices shall be followed when providing appropriate screening for contraindications to vaccination for first responders. A first responder shall be exempt from vaccinations when a written statement from a licensed physician is presented to their employer indicating that a vaccine is medically contraindicated for such person.

4. If a shortage of the vaccines referred to in subsection 2 of this section exists following a bioterrorism event or suspected bioterrorism event, the director, in consultation with the governor and the federal Centers for Disease Control and Prevention, shall give priority for such vaccinations to persons exposed to the disease and to first responders who are deployed to the disaster location.

5. The department shall notify first responders concerning the availability of the vaccination program described in subsection 2 of this section and shall provide education to such first responders and their employers concerning the vaccinations offered and the associated diseases.

6. The department may contract for the administration of the vaccination program described in subsection 2 of this section with health care providers, including but not limited to local public health agencies, hospitals, federally qualified health centers, and physicians.

*7. The provisions of this section shall become effective upon receipt of federal funding or federal grants which designate that the funding is required to implement vaccinations for first responders in accordance with the recommendations of the federal Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices. Upon receipt of such funding, the department shall make available the vaccines to first responders as provided in this section.

Missouri Revised Statutes
Chapter 210
Child Protection and Reformation

Immunizations of children required, when, exceptions--duties of administrator, report.

Section 210.003

1. No child shall be permitted to enroll in or attend any public, private or parochial day care center, preschool or nursery school caring for ten or more children unless such child has been adequately immunized against vaccine-preventable childhood illnesses specified by the department of health and senior services in accordance with recommendations of the

Immunization Practices Advisory Committee (ACIP). The parent or guardian of such child shall provide satisfactory evidence of the required immunizations.

2. A child who has not completed all immunizations appropriate for his age may enroll, if:

(1) Satisfactory evidence is produced that such child has begun the process of immunization. The child may continue to attend as long as the immunization process is being accomplished according to the ACIP/Missouri department of health and senior services recommended schedule; or

(2) The parent or guardian has signed and placed on file with the day care administrator a statement of exemption which may be either of the following:

(a) A medical exemption, by which a child shall be exempted from the requirements of this section upon certification by a licensed physician that such immunization would seriously endanger the child's health or life; or

(b) A parent or guardian exemption, by which a child shall be exempted from the requirements of this section if one parent or guardian files a written objection to immunization with the day care administrator. Exemptions shall be accepted by the day care administrator when the necessary information as determined by the department of health and senior services is filed with the day care administrator by the parent or guardian. Exemption forms shall be provided by the department of health and senior services.

3. In the event of an outbreak or suspected outbreak of a vaccine-preventable disease within a particular facility, the administrator of the facility shall follow the control measures instituted by the local health authority or the department of health and senior services or both the local health authority and the department of health and senior services, as established in Rule 19 CSR 20-20.040, "Measures for the Control of Communicable Diseases".

4. The administrator of each public, private or parochial day care center, preschool or nursery school shall cause to be prepared a record of immunization of every child enrolled in or attending a facility under his jurisdiction. An annual summary report shall be made by January fifteenth showing the immunization status of each child enrolled, using forms provided for this purpose by the department of health and senior services. The immunization records shall be available for review by department of health and senior services personnel upon request.

5. For purposes of this section, satisfactory evidence of immunization means a statement, certificate or record from a physician or other recognized health facility or personnel, stating that the required immunizations have been given to the child and verifying the type of vaccine and the month, day and year of administration.

6. Nothing in this section shall preclude any political subdivision from adopting more stringent rules regarding the immunization of preschool children.

Missouri Revised Statutes
Chapter 431
General Provisions as to Contracts

Consent to immunization of child, who may give, when--definitions --reliance by health care provider--limitations on liability, when.

Section 431.058

1. As used in this section, the following terms mean:

(1) "Child", a child less than eighteen years of age;

(2) "Health care provider", a person licensed to practice medicine and surgery by the state board of registration for the healing arts, a person who holds a temporary permit to practice medicine and surgery issued by the state board of registration for the healing arts, a person engaged in a postgraduate training program in medicine and surgery approved by the state board of registration for the healing arts, a medical care facility licensed by the department of health and senior services, a health maintenance organization issued a certificate of authority by the director of the department of insurance, financial institutions and professional registration, a licensed professional nurse, a licensed practical nurse and a registered physician's assistant. The term "health care provider" shall also include the following entities: a professional corporation organized pursuant to the professional corporation law of Missouri by persons who are health care providers, a Missouri limited liability company organized for the purpose of rendering professional services by its members who are health care providers, a partnership of persons who are health care providers or a Missouri not-for-profit corporation organized for the purpose of rendering professional services by persons who are health care providers;

(3) "Parent":

(a) A child's parent by birth or adoption;

(b) A child's legal guardian; or

(c) Any person who under court order is authorized to give consent for a child.

2. A parent may delegate in writing the parent's authority to consent to the immunization of a child to another adult.

3. Subject to the provisions of subsections 3 to 6 of this section, any adult may consent to the immunization of a child if a parent is not reasonably available and the authority to consent is not denied under subsection 4 of this section.

4. A person may not consent to the immunization of a child under subsection 3 of this section if:

(1) The person has actual knowledge that the parent has expressly refused to give consent to the immunization; or

(2) The parent has told the person that the person may not consent to the immunization of the child or, in the case of a written authorization, has withdrawn the authorization in writing.

5. For purposes of this section, a parent is not reasonably available if the location of the parent or legal guardian is unknown and could not be ascertained, despite diligent searching.

6. A person authorized to consent to the immunization of a child under the provisions of subsections 3 to 6 of this section shall confirm in writing that the parent is not reasonably available, and the written confirmation shall be included in the child's medical record.

7. A grandparent, brother or sister, aunt or uncle or stepparent of a child who is the primary caregiver of a child and who may consent to the immunization of the child pursuant to the provisions of subsection 2 of this section may delegate in writing the authority to consent to immunization of the child to another adult.

8. A health care provider may rely on a document from another state, territory or country that contains substantially the same information as is required in any immunization consent rules and regulations of the department of health and senior services if the document is presented for consent by a person as authorized pursuant to the provisions of this section.

9. A person who consents to immunization of a child under this section shall provide the health care provider with sufficient and accurate health information about the child for whom the consent is given and, if necessary, sufficient and accurate health information about the child's family to enable the person providing the consent and the health care provider to determine adequately the risks and benefits inherent in the proposed immunization and determine whether the immunization is advisable.

10. The responsibility of a health care provider to provide information to a person consenting to the immunization of a child as provided by this section is the same as the health care provider's responsibility to a parent.

11. Except for acts of willful misconduct or gross negligence, a person who consents to the immunization of a child as provided by this section shall not be liable for damages arising from any such immunization administered by a person authorized by law to administer immunizations in this state.

Missouri Revised Statutes

Chapter 431

General Provisions as to Contracts

Consent to surgical or medical treatment, who may give, when.

Section 431.061.

1. In addition to such other persons as may be so authorized and empowered, any one of the following persons if otherwise competent to contract, is authorized and empowered to consent, either orally or otherwise, to any surgical, medical, or other treatment or procedures not prohibited by law:

(1) Any adult eighteen years of age or older for himself;

- (2) Any parent for his minor child in his legal custody;
- (3) Any minor who has been lawfully married and any minor parent or legal custodian of a child for himself, his child and any child in his legal custody;
- (4) Any minor for himself in case of:
 - (a) Pregnancy, but excluding abortions;
 - (b) Venereal disease;
 - (c) Drug or substance abuse including those referred to in chapter 195, RSMo;
- (5) Any adult standing in loco parentis, whether serving formally or not, for his minor charge in case of emergency as defined in section 431.063;
- (6) Any guardian of the person for his ward;
- (7) During the absence of a parent so authorized and empowered, any adult for his minor brother or sister;
- (8) During the absence of a parent so authorized and empowered, any grandparent for his minor grandchild;
- (9) "Absence" as used in (7) and (8) above shall mean absent at a time when further delay occasioned by an attempt to obtain a consent may jeopardize the life, health or limb of the person affected, or may result in disfigurement or impairment of faculties.

2. For purposes of consent to hospitalization or medical, surgical or other treatment or procedures, a "minor" shall be defined as any person under eighteen years of age and an "adult" shall be defined as any person eighteen years of age or older.

3. The provisions of sections 431.061 and 431.063 shall be liberally construed, and all relationships set forth in subsection 1 of this section shall include the adoptive and step-relationship as well as the natural relationship and the relationship by the half blood as well as by the whole blood.

4. A consent by one person so authorized and empowered shall be sufficient notwithstanding that there are other persons so authorized and empowered or that such other persons shall refuse or decline to consent or shall protest against the proposed surgical, medical or other treatment or procedures.

5. Any person acting in good faith and not having been put on notice to the contrary shall be justified in relying on the representations of any person purporting to give such consent, including, but not limited to, his identity, his age, his marital status, and his relationship to any other person for whom the consent is purportedly given.

Source: Missouri General Assembly. (2009, January, 1). [wwwdocument] URL.
<http://www.moga.mo.gov/statutesearch/>