



Letter Criteria

Table of Contents

Health > Letters > Run Letter > Letter Criteria

This tab allows you to set criteria for printing Health letters for immunizations due, referrals, screenings, or head lice notification. Letters are generated for students with record status 1, 2, or 3.

LETTER CRITERIA
PRINT LETTERS

Immunizations

<input checked="" type="checkbox"/> DTP	<input checked="" type="checkbox"/> Polio
<input checked="" type="checkbox"/> Diptheria	<input checked="" type="checkbox"/> Hib
<input checked="" type="checkbox"/> Tetanus	<input checked="" type="checkbox"/> Hepatitis A
<input checked="" type="checkbox"/> Pertussis	<input checked="" type="checkbox"/> Hepatitis B
<input checked="" type="checkbox"/> MMR	<input checked="" type="checkbox"/> Varicella
<input checked="" type="checkbox"/> Measles	<input checked="" type="checkbox"/> PCV
<input checked="" type="checkbox"/> Mumps	<input checked="" type="checkbox"/> MCV4
<input checked="" type="checkbox"/> Rubella	

Label Criteria

<input type="checkbox"/> Grade Level	<input checked="" type="checkbox"/> To the Parent/Guardian of
<input checked="" type="checkbox"/> Campus Name	<input type="checkbox"/> Student ID

Referrals

Hearing

Spinal

Acanthosis

Vision

Screenings

Spinal

Acanthosis

Other

Lice

Run Criteria

Letter Template: IMMUNIZATION REQUIREMENT

Address To Print: Contact

Letter Sort Order: Contact Zip Code

As of Date (MM-DD-YYYY): 03-24-2022

Campus: 001 - 001 School

Status: 1 - Active

Grade:

Student ID: ALL

Use Next Year Grade Level:

Update data:

Select the letters to print:


Immunizations	Select the immunizations for which to print letters. To select all immunizations, select the check box for the Immunizations group. NOTE: Immunization doses can be administered four or fewer days before the minimum interval or age.
----------------------	---

2026/06/16 09:26

1

Letter Criteria

Referrals	<p>Select the type of referrals for which to print letters. Referral letters are printed for students who failed a screening and have no referral date in their record for the current year. The students' referral date (if blank) is updated with the date on which the letter was printed when you click Update Referrals from the Print Letters tab. An existing referral date is not replaced; a letter is only generated if the referral date is blank. Hearing or vision referrals are generated when Pass/Fail is <i>Fail</i> or <i>Inconclusive</i>. Spinal referrals are generated when Signs/Symptoms is <i>Kyphosis</i>, <i>Scoliosis</i>, or <i>Other</i>. Acanthosis referrals are generated when AN Marker is other than <i>0 - negative</i>. Spinal and acanthosis screening letters are not printed for students who have a religious exemption.</p>
Screenings	<p>Select the type of screening for which to print letters. Letters do not print for students with a religious exemption if the affidavit date is prior to the date on which letters are generated.</p>
Other	<p>Lice Select to print one of the head lice notification letters. The Letter Template field under Run Criteria displays the two lice notification letters available. If it is determined that a student has head lice, the school nurse of a public elementary school must provide written or electronic notice to:</p> <ol style="list-style-type: none"> 1) The parent of the child - as soon as practicable but not more than 48 hours after it is determined that the child has lice. Select <i>Individual Head Lice Notification</i>. 2) The parent of each child assigned to the same classroom as the child with lice - not later than the fifth school day after it is determined that a child has lice. Select <i>Classroom Head Lice Notification</i>. <p>These letters are automatically provided on Letters > Create Letter. Only these letters can be used for lice notification, and these letters are shared among all campuses in the district. When you select Lice: The Campus, Status, Grade, and Use Next Year Grade Level fields are disabled. The Student ID field is required and allows multiple selections. Note that the directory does not currently allow you to select multiple students; you must enter the IDs separated by a comma and space (e.g., 082019, 032902).</p>

Run Criteria	Letter Template	The letter types for the selected letter category (immunizations, referrals, or screening, as set up on Letters > Create Letter) are listed. Select the letter type.
	Address to Print	Indicate if the student's or contact's address should be printed on the letters. <i>Contact</i> address is from Registration > Maintenance > Student Enrollment > Contact (top priority contact, which is the contact with the lowest priority number (e.g., 1)). <i>Student</i> mailing address is from Registration > Maintenance > Student Enrollment > Demo1 .
	Letter Sort Order	Select the order in which to print letters. <i>Contact Zip Code</i> - Contact's zip code, zip + 4, student's last name, student's first name, student's middle initial, grade level, and student ID <i>Student Zip Code</i> - Student's mailing zip code, mailing zip +4, student's last name, student's first name, student's middle initial, grade level, and student ID <i>Student Name</i> - Student's last name, first name, middle initial, grade level, and student ID
	As of Date	Type the date in the MMDDYYYY format. Or, click  to select the date from the calendar. The date is used to determine what is due for the student.
	Campus	Select the campus. Leave blank to select all campuses.
	Status	Select active or withdrawn students. Leave blank to print letters for all students.
	Grade	Select a grade level. Leave blank to print letters for all grade levels.
	Student ID	Type a student ID to print the report for one student. Leave blank to select all students. If you do not know the ID, click Student ID to access the directory .
	Use Next Year Grade Level	Select to generate immunization letters using the next school year grade level and immunization criteria. If a student is in PK and will still be four years old on September 1 of the next school year, the grade level will not be incremented to KG; therefore, KG rules will not apply to the student (DTP, polio, MMR, varicella, and Hep A).
	Label Criteria	Grade Level
Campus Name		Select to print the campus name and ID on the label.
"To Parent/Guardian of"		Select to print "To the Parent/Guardian of" on the label.
Student ID		Select to print the student ID on the label.
The labels are designed using the Avery 5162 template, which prints 14 labels per page, 1 1/3" x 4" each.		

Click **Run** to process the letters.

The [Print Letters](#) tab opens.

To return to this tab, click **Return**.



Back Cover