Cycle: 3

LEA: 6505020 School Medical Immunization

BRUNO-PYATT ELEMENTARY 2024 - 2025 County: SEARCY

				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
K	5	5	5	5	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
K	1	4	0	NA

Cycle: 3

LEA: 6505020 School Medical Immunization

BRUNO-PYATT ELEMENTARY 2024 - 2025 County: SEARCY

				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
01	5	5	5	5	5	5	NA	NA	5	5	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	5	0	NA

Cycle: 3

LEA: 6505020 School Medical Immunization

BRUNO-PYATT ELEMENTARY 2024 - 2025 County: SEARCY

				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 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	3	3	3	3	3	3	0	NA	NA	3	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	3	0	NA

School Medical Immunization

Cycle: 3

County: SEARCY

BRUNO-PYATT ELEMENTARY

LEA: 6505020

2024 - 2025

				Sectio	n I - Numb	er of Studen	ts Meeting	Requirement	is		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
03	7	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	2	NA

Cycle: 3

LEA: 6505020 School Medical Immunization

BRUNO-PYATT ELEMENTARY 2024 - 2025 County: SEARCY

				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
04	2	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
04	0	1	1	NA

School Medical Immunization

Cycle: 3

County: SEARCY

BRUNO-PYATT ELEMENTARY

LEA: 6505020

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 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	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: SEARCY

BRUNO-PYATT ELEMENTARY

LEA: 6505020

2024 - 2025

			Section I - Number of Students Meeting Requirements									Section II - Exempt			
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	
06	3	3	3	3	3	3	2	NA	NA	2	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			HPV 7-12th Only
06	1	2	0	NA

Cycle: 3

School Medical Immunization

OZARK MOUNTAIN HIGH SCHOOL 2024 - 2025 County: SEARCY

			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		
07	33	32	32	32	32	32	31	31	NA	31	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 3 Doses
07	1	31	1	0

Cycle: 3

County: SEARCY

School Medical Immunization

OZARK MOUNTAIN HIGH SCHOOL

LEA: 6505021

			Section I - Number of Students Meeting Requirements										Section II - Exemptions			
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 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt		
08	45	44	44	44	44	44	42	42	NA	42	0	0	0	0		
			2	·		Had Disease		2 Doses*				n.				

^{*}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			HPV 3 Doses
08	2	42	1	0

School Medical Immunization

Cycle: 3

County: SEARCY

OZARK MOUNTAIN HIGH SCHOOL

LEA: 6505021

			Section I - Number of Students Meeting Requirements									Section II - Exemptions			
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 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
09	41	39	39	39	39	39	37	34	NA	37	0	1	1	2	
						11-1		0 D*		-					

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			HPV 3 Doses
09	1	39	1	0

School Medical Immunization

Cycle: 3

County: SEARCY

OZARK MOUNTAIN HIGH SCHOOL

LEA: 6505021

				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						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
10	36	36	36	36	36	36	34	25	NA	34	0	0	0	0
			ę.			Had		2 Doses*						

Had Disease	2 Doses*
0	6

^{*}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	2	34	0	0

Cycle: 3

County: SEARCY

School Medical Immunization

OZARK MOUNTAIN HIGH SCHOOL

LEA: 6505021

				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		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	42	42	42	42	42	42	41	0	NA	41	0	1	0	1
	,	•		<u> </u>		Had Disease		2 Doses*						

Had Disease	2 Doses*
0	20

^{*}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	42	0	0

Cycle: 3

County: SEARCY

School Medical Immunization

OZARK MOUNTAIN HIGH SCHOOL

LEA: 6505021

				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		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	31	31	31	31	31	31	30	0	NA	30	0	0	0	0
		•	2	•		Had Disease		2 Doses*		•				

^{*}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	30	0	0

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				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 N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	11	11	11	11	10	10	NA	NA	11	10	0	1	0	1

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	11	0	NA

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Section		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 N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	11	10	10	10	10	10	NA	NA	10	10	0	0	1	1

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
01	0	11	0	NA

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Section		Section II - Exemptions								
Α	В	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	13	11	11	11	11	11	0	NA	NA	11	0	1	1	2

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
02	0	13	0	NA

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

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Sectio		Section II - Exemptions								
Α	В	C D E F G H I J K										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
03	8	8	8	8	8	8	0	NA	NA	8	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
03	0	8	0	NA

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

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Sectio		Section II - Exen								
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	8	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
04	1	8	0	NA

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

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Section		Se	ection II	- Exemp	tions					
Α	В	С	D	E	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
05	21	19	19	19	17	0	1	2	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
05	1	20	0	NA

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

School Medical Immunization

Cycle: 3

ST. JOE ELEMENTARY 2024 - 2025 County: SEARCY

				Sectio		Section II - Exer								
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
06	10	10	10	10	0	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
06	10	0	0	NA

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

Cycle: 3

LEA: 6505018 School Medical Immunization

WESTERN GROVE ELEMENTARY 2024 - 2025 County: SEARCY

				Section		Section II - Exemptions								
Α	В	С	D	E	L	М	N	0						
Grade	Total Enrolled	DTaP 4 Doses	DTaP IPV/OPV HepB MMR Varicella TDAP MCV4 HepA All Doses 3 Doses 2 Doses 2 Doses N/A N/A 1 Dose Requirements								Code M	Code R	Code P	Total Exempt
K	18	17	17	17	17	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	17	0	NA

Cycle: 3

LEA: 6505018 School Medical Immunization

WESTERN GROVE ELEMENTARY 2024 - 2025 County: SEARCY

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K											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	17	17	17	17	15	15	NA	NA	17	15	0	0	2	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	17	0	NA

School Medical Immunization

Cycle: 3

County: SEARCY

WESTERN GROVE ELEMENTARY

LEA: 6505018

2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	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	23	21	21	21	21	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	23	0	NA		

School Medical Immunization

Cycle: 3

County: SEARCY

WESTERN GROVE ELEMENTARY

LEA: 6505018

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
03	24	21	22	22	21	21	0	NA	NA	21	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
03	1	23	0	NA

Cycle: 3

County: SEARCY

School Medical Immunization

WESTERN GROVE ELEMENTARY

LEA: 6505018

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	24	24	24	24	24	24	0	NA	NA	24	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	24	0	NA

Cycle: 3

School Medical Immunization

WESTERN GROVE ELEMENTARY 2024 - 2025 County: SEARCY

			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	
05	25	25	25	25	25	25	3	NA	NA	22	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
05	3	22	0	NA

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

Cycle: 3

LEA: 6505018 School Medical Immunization

WESTERN GROVE ELEMENTARY 2024 - 2025 County: SEARCY

			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		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	21	21	21	21	21	21	15	NA	NA	15	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		
06	6	15	0	NA		