Lakeview Pediatrics

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Lakeview Pediatrics Vaccine Policy

- We strive to keep all our patients safely protected from infectious disease to the best of our ability.
- We firmly believe in the effectiveness of vaccines to prevent infectious disease and to save lives. Vaccinating children and young adults may be the single most important health-promoting intervention we perform as health care providers and that you can perform as parents/caregivers.
- We firmly believe in the safety of our vaccines. We firmly believe, based on all available evidence, that vaccines do not cause autism or other developmental disabilities.
- We firmly believe that all eligible children and young adults should receive all of the recommended vaccines according to the schedule endorsed by the American Academy of Pediatrics (AAP).
- We do not endorse or accommodate alternative vaccine schedules. Alternative vaccine schedules place children at unnecessary risk for illness by delaying valuable disease protection. In addition, these schedules waste healthcare resources, reduce appointment availability, and result in increased healthcare costs.

We are happy to answer any questions you may have and endeavor to make the process of getting vaccinated as painless as possible for your child.

*For more information about vaccines, please see the following trusted websites:
http://www.chop.edu/centers-programs/vaccine-education-center

Immunize.org

In order to provide the best possible care for ALL of our patients, we ask patient families to acknowledge and abide by the following office policies/ procedures:

1. **Vaccine Refusal Policy:** I understand that if my child is medically eligible for immunizations, my provider will discuss and offer all available recommended vaccines to be given to my child with my consent. If I decline a vaccine that my provider recommends, I agree to sign a Refusal of Recommended Immunizations Form acknowledging that my provider recommended immunization as standard of care, but I declined this care. My signature on this form acknowledges my understanding that my choice to not vaccinate leaves my child at risk for potentially preventable infections that may be acquired both domestically or through travel and could result in severe disability and/or death.

2. **Vaccine Schedule Policy:** I understand that my provider will recommend vaccination per the standard AAP immunization schedule. My provider will not accommodate an alternative vaccine schedule unless there is a medical contraindication to the standard schedule. I understand that if I wish to vaccinate my child on an alternative schedule for any reason other than a medical contraindication, I will be directed to the local Board of Health for any additional vaccination appointments I desire, or I can seek care from a different practice.

3. **Infection Reduction Policy:** I understand that not vaccinating my child increases the risk that my child may become infected with a vaccine-preventable illness and may spread this illness throughout my community. I agree to tell all health care professionals in all settings which immunization(s) my child has not received, as my child may need to be isolated to prevent illness transmission or may require medical evaluation and/or testing that might not be necessary if my child had been immunized. To reduce illness transmission, Lakeview Pediatrics asks that you wear a mask in our office if you are underimmunized or otherwise at a high risk of spreading or acquiring an infection. I agree that my family members who are developmentally able to wear a mask, will do so in the office when directed by the Lakeview Pediatrics team.

4. **MMR Vaccine Policy:** I understand that measles is an extremely contagious, airborne illness with a high risk of complications and an approximate risk of death of 1 in 500 cases. MMR vaccine is extremely effective at preventing measles infection, but infants who are too young to be vaccinated and immunocompromised persons depend on protection from high rates of vaccination coverage in those around them. This herd immunity becomes increasingly important if numbers of measles cases increase domestically or globally. In order to maintain the safest possible environment in our office for these vulnerable individuals, Lakeview Pediatrics will only be able to provide care to patients who are vaccinated according to the AAP recommended schedule for MMR vaccine as follows:

- Patients will receive 1 dose of MMR vaccine between 12 and 15 months of age, unless medically contraindicated per a Lakeview Pediatrics provider.
- Patients without medical contraindication will receive a second dose of MMR vaccine given no sooner than 28 days after the toddler dose, but before the 7th birthday.

Families who do not wish to receive the measles (MMR) immunization for their child will be dismissed from the practice.

We reserve the right to amend our office policies and procedures as needed to keep our office as safe as possible for patient care.

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I have reviewed and understood the above policies and have had an opportunity to ask questions.

_____ _____

Parent/Guardian Signature Date

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Parent/Guardian Name (please print)