

STAMFORD HEALTH MEDICAL GROUP PEDIATRIC CENTER

VACCINE POLICY STATEMENT

WE FIRMLY BELIEVE in the effectiveness of vaccines to prevent serious illness and to save lives.

WE FIRMLY BELIEVE in the safety of our vaccines.

WE FIRMLY BELIEVE that all children and young adults should receive all of the recommended vaccines according to the schedule published by the Centers for Disease Control and Prevention and the American Academy of Pediatrics.

WE FIRMLY BELIEVE, based on all available literature, evidence, and current studies, that vaccines do not cause autism or other developmental disabilities.

WE FIRMLY BELIEVE that 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.

The recommended vaccines and the vaccine schedule are the results of years and years of scientific study and data gathering on millions of children by thousands of our brightest scientists and physicians.

These things being said, we recognize that there has always been and will likely always be controversy surrounding vaccination. The vaccine campaign is truly a victim of its own success. It is precisely because vaccines are so effective at preventing illness that we are even discussing whether or not they should be given. Because of vaccines, many of you have never seen a child with polio, tetanus, whooping cough, meningitis or even chicken pox. Such success can make us complacent about vaccinating. This attitude, if widespread, can only lead to tragic results.

Over the past several years, some people have chosen not to vaccinate their children or vaccinate on alternative vaccine schedules. Unfortunately, some of these decisions were made based on one flawed study that was later formally retracted, in which it was suggested that the MMR vaccine caused autism. As a result, there have been outbreaks of all of these preventable illnesses, leading to deaths and disabilities from complications of these diseases which should never have occurred.

Counting on others being vaccinated to protect those that are unvaccinated is **unacceptable**. Vaccines work best when each person in a community commits to preventing spread of communicable diseases.

We have carefully thought through our office policy and are confident that in choosing our practice you agree with our medical reasoning and recommendations. We recognize the choice may be an emotional one for some parents. We absolutely believe that vaccinating according to the schedule is the right thing to do. However, should you have doubts, please discuss these with your physician in advance of your visit.

We require that you commit to actively vaccinate your children and commit to a schedule that is completed by age 2 years at the latest.

Please be advised that “spreading out the vaccines” to give one or two at a time goes against expert recommendations and can put your child at risk for serious illness and death and goes against our medical advice. If you and your provider have discussed and agreed to adopt an alternative vaccine schedule, it is **your responsibility to inform the office of your child’s under-vaccinated status during any sick visits or phone calls, especially if your child has fever.** Finally, if you absolutely refuse to vaccinate your child, we will ask you to find another practice that shares your philosophy.

As physicians, we feel strongly that vaccinating children on schedule, with currently available vaccines, is absolutely the right thing to do for all children and young adults. A copy of our current recommended schedule of vaccines and visits is available at the office.

If immunization schedules are complete, it is not necessary to have a tetanus booster every time there is an injury. Wounds at greatest risk are punctures, large burns, and scrapes. Most children receive a DPT ("T" for tetanus) at age 5 years before entry into kindergarten. Even for a high-risk wound, children do not need tetanus boosters if they received a dose of DPT or DT within five years of the wound and received at least three total doses since birth (most have received five). Tetanus should be boosted every 10 years, even for parents!

Adolescents and adults need immunizations too. Diphtheria, tetanus, pertussis, along with meningococcal vaccine are required at age 11 and entering 7th grade. Other vaccines that will be discussed include human papillomavirus, hepatitis A, TB screening, and whether all the childhood vaccines are up to date.

There are a number of vaccines that are not routinely required but are suggested in certain circumstances such as exposure to certain contagious diseases and foreign travel. If you plan to travel to areas of the world that require special vaccinations, please contact us well (at least one month) in advance. We will be happy to give you information on foreign travel risks or you can call the CDC International Travel Hotline (404.332.4559) or visit their website at cdc.gov.

The influenza vaccine is given yearly as soon as it becomes available. As of 2009, the influenza vaccine is strongly recommended for all of our patients 6 months and older (with the exception of the few people with contraindications) It has always been our policy to discuss risks and benefits of all vaccines given to our patients before they are administered. We also will provide you with information sheets for many vaccines. We trust that this process will make you comfortable with a vital part of your child's preventative health care.