GOSHEN PEDIATRICS VACCINATION POLICY

As a NYS licensed physician, Dr. Wapshare is required to follow NYS guidelines and requirements to meet compliance with NYS laws regarding immunizations/vaccinations as he practices in NY.

Policy Applies To: All pediatric patients and their parents, legal guardians, or authorized representatives.

PURPOSE

Our practice is committed to protecting the health and safety of every child through evidence-based preventive healthcare and immunization.

Vaccination is an essential component of pediatric healthcare. Our practice follows applicable New York State laws and regulations, the recommendations of the Centers for Disease Control and Prevention (CDC), and the American Academy of Pediatrics (AAP) childhood and adolescent immunization schedules.

This policy establishes the expectations and responsibilities of parents and guardians regarding childhood immunizations.

1. VACCINATION EXPECTATIONS

Our practice strongly recommends that all pediatric patients receive vaccinations according to the current CDC and AAP recommended immunization schedules.

Parents and guardians are expected to:

- Maintain their child's immunizations according to the recommended childhood and adolescent vaccination schedule.
- Bring available immunization records to all appointments for anything received outside our office.
- Discuss any questions or concerns about vaccines with the child's healthcare provider.
- Notify the practice of any previous serious vaccine reactions or known contraindications and provide necessary documentation from medical facility that saw the child at the time of said reaction. Any medical contraindications, we require your child to see a specialist to specify what exemptions are needed or adjustments to schedule.
- Follow up on recommended vaccinations and subsequent doses in a timely manner (schedule is set according to practice scheduling abilities and state requirements).

Our practice will review each child's immunization status during appropriate healthcare encounters and identify vaccines that are due or overdue.

2. NEW YORK STATE SCHOOL AND CHILDCARE REQUIREMENTS

New York State Public Health Law §2164 establishes immunization requirements for children attending covered schools, childcare programs, prekindergarten, and other applicable educational settings. Failure to follow the state required schedule or any delay to the standard schedule may mean your child may not be able to attend or be enrolled in these educational/childcare settings until they meet state requirements.

Required immunizations include, as applicable:

- Diphtheria, tetanus, and pertussis.
- Hepatitis B.
- Measles, mumps, and rubella.
- Poliomyelitis.
- Varicella.
- Haemophilus influenzae type b (Hib).
- Pneumococcal conjugate vaccine.
- Meningococcal conjugate vaccine.
- Additional age- and grade-specific vaccine requirements.

Requirements depend on the child's age, grade, and educational or childcare setting.

Parents and guardians are responsible for obtaining and submitting appropriate immunization documentation to their child's school or childcare facility.

The practice can provide available immunization records and appropriate medical documentation upon request.

3. MEDICAL EXEMPTIONS

New York State permits medical exemptions when a child has a qualifying medical contraindication or precaution under applicable law and regulations.

A medical exemption must:

- Be based on an actual medical condition or contraindication.
- Identify the specific vaccine or vaccines affected.
- Be supported by appropriate clinical documentation.
- Meet applicable New York State Department of Health requirements.
- Be reviewed and renewed when required by applicable regulations.

Medical exemptions are not automatically granted upon parental request.

The physician must independently evaluate the child's medical history and determine whether a medically supported exemption is appropriate. Our office requires your child to be seen by a specialist pertaining to the medical condition that would exempt said child to ensure we receive proper guidance as to what is/is not to be given and to follow child for maintenance of the medical condition.

The practice will not issue medical exemptions solely because of parental preference, philosophical objections, or generalized concerns about vaccination.

4. RELIGIOUS AND PHILOSOPHICAL OBJECTIONS

New York State does not recognize religious or philosophical exemptions from the immunization requirements for school and childcare attendance under Public Health Law §2164.

Parents who decline vaccination for religious, philosophical, or personal reasons should understand that their child may not satisfy the immunization requirements for school or childcare attendance.

The practice will document the parent's decision and provide counseling regarding the potential health risks associated with remaining unvaccinated.

5. VACCINE REFUSAL AND DELAYED VACCINATION

If a parent or guardian declines or postpones a recommended vaccination:

- The healthcare provider will discuss the benefits and risks of vaccination.
- The provider will explain the potential risks of vaccine-preventable diseases.
- The provider will discuss the potential risks associated with remaining unvaccinated.
- The refusal or postponement will be documented in the child's medical record.
- The parent or guardian may be asked to sign a vaccine refusal or informed declination form per NYS requirements.
- The child's immunization status will be reassessed at subsequent visits.

The practice will continue to encourage vaccination and offer appropriate opportunities for the family to reconsider its decision.

At 3 years of age if your child has no vaccines, a vaccine schedule will begin and following appointments with be created so the child has a reasonable catch-up schedule and does not overwhelm the child with multiple vaccines and may start school on time.

New patients transferring from another provider, that are over 4 years of age are required to catch up with their current providers prior to switching to our practice.

6. VACCINE SAFETY AND INFORMED CONSENT

Before vaccine administration, the healthcare provider or authorized clinical staff will:

- Review the child's immunization history.
- Screen for relevant contraindications and precautions.
- Discuss appropriate vaccine benefits and risks.
- Provide the applicable Vaccine Information Statement (VIS) before administration.
- Obtain and document legally appropriate parental, guardian, or patient consent.
- Document vaccine administration in the medical record.

Parents and guardians are encouraged to ask questions before their child receives any vaccination.

7. IMMUNIZATION RECORDS AND REPORTING

The practice will maintain appropriate immunization records and comply with applicable New York State and New York City immunization reporting requirements.

Vaccines administered to children younger than 19 years of age will be reported through the applicable immunization information system, as required by law.

The practice will document:

- Vaccine name and manufacturer.
- Lot number.
- Administration date.
- Dosage and route.
- Administration site.
- Name and credentials of the administering healthcare professional.
- Applicable VIS information and date provided.
- Consent and relevant screening documentation.

Parents and guardians may request copies of their child's immunization records in accordance with applicable law. They are also available on patient portals for download.

8. VACCINATION DURING OUTBREAKS AND EXPOSURES

Parents and guardians should understand that unvaccinated children may be at increased risk of contracting and transmitting vaccine-preventable diseases.

During a confirmed or suspected communicable disease outbreak, the practice will follow applicable guidance and directives from the New York State Department of Health and/or the local health department.

Unvaccinated or incompletely vaccinated children may be subject to public health exclusion or other protective measures when required by applicable law or public health authorities.

9. CONTINUITY OF CARE

Our practice is committed to providing appropriate pediatric healthcare regardless of a parent's questions or concerns about vaccination.

The practice will address vaccination concerns professionally, document informed decisions, and follow applicable professional standards and legal requirements.

Any decision regarding limitation or termination of the physician-patient relationship will be handled individually, with appropriate notice, continuity-of-care arrangements, and compliance with applicable professional obligations and law.

10. PARENT/GUARDIAN ACKNOWLEDGMENT

I acknowledge that I have received and reviewed the Goshen Pediatrics Vaccination Policy.

I understand that:

- I understand annual physicals are required for vaccines to be received and that my insurance may charge a copay for vaccine only appointments needed outside of the well visits.
- Vaccinations are recommended as part of routine preventive pediatric healthcare.
- New York State has specific immunization requirements for school and childcare attendance. If I choose to have my child in the NYS school system or child-care, I understand this schedule must be followed otherwise it may result in dismissal from the practice or appointments will be made as GOSHEN PEDIATRICS schedule allows which may result in my child not being able to attend school until compliance is met.
- New York State does not permit religious or philosophical exemptions from school immunization requirements.
- Medical exemptions must meet applicable legal and medical criteria. Should I wish to further delay (past 3 years of age) or decide to not vaccinate my child, an outside specialist must be seen to determine medical exemption.
- I may discuss vaccine-related questions and concerns with my child's healthcare provider.
- Declining or delaying recommended vaccinations may increase my child's risk of preventable illness and may affect school or childcare eligibility.

I understand that signing this acknowledgment does not constitute consent to administer a vaccine. Separate consent will be obtained and documented as appropriate. I understand that for my child to be a patient of GOSHEN PEDIATRICS, PC certain vaccine requirements are to be met per NYS regulations and in accordance with the office Vaccine Policy. I understand that if a delayed schedule be requested (for children under 3 yrs of age), one will be created; for children 3 years of age a delayed schedule will be provided with the requirements.

Child's Name: _____Date of Birth:_____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date:_____

Physician Signature: _____ Date:_____

Practice Policy Review: This document should be reviewed at least annually and whenever applicable New York State or federal immunization laws, regulations, or clinical recommendations change.

New York State – Parent/Guardian Immunization Policy