



FPA Patient Vaccine Policy

One of the most important services we can provide our patients is vaccination against life-threatening diseases. Our providers firmly believe in the safety and effectiveness of vaccines to prevent serious illness, as recommended by the American Academy of Pediatrics (AAP) and the Centers for Disease Control and Prevention (CDC).

Our Policy

1. Adherence to Immunization Guidelines:
 - a. We adhere to the AAP and CDC immunization guidelines available at: <https://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf> (also available on our website).
2. Mandatory Vaccinations for School Entry:
 - a. Children must receive all vaccines that are mandated for school entry by the state of Virginia.
3. Documentation and Compliance:
 - a. A plan must be documented to ensure that every existing patient is up to date with all vaccines by two, five, twelve, and seventeen years of age. Every new patient over the age of two must have a documented plan to be caught up on all vaccines through nursing visits by their next scheduled well check appointment.
4. Non-Compliance Consequences:
 - a. Vaccine refusal will be documented with parental signature on the AAP Vaccine Refusal Form to be scanned in the patient's medical records.
 - b. Parents refusing to adhere to the AAP recommended vaccine schedule for any reason, except for a documented medical reason, may be discharged from our practice and/or asked to find another healthcare provider who shares their views.

Rationale

We created this vaccine policy to protect children, their families, and our community from deadly, preventable diseases by administering safe and effective vaccines. This policy ensures that our patients are provided with the best protection against serious illnesses. Fairfax Pediatric Associates is dedicated to the health and well-being of all our patients.

Fairfax Pediatric Associates

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Documenting Parental Refusal to Have Their Children Vaccinated

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All parents and patients should be informed about the risks and benefits of preventive and therapeutic procedures, including vaccination. In the case of vaccination, the American Academy of Pediatrics (AAP) strongly recommends and federal law mandates that this discussion include the provision of the Vaccine Information Statements (VISs). Despite our best efforts to educate parents about the effectiveness of vaccines and the realistic chances of vaccine-associated adverse events, some will decline to have their children vaccinated. This often results from families misinterpreting or misunderstanding information presented by the media and on unmonitored and biased Web sites, causing substantial and often unrealistic fears.

Within a 12-month period, 74% of pediatricians report encountering a parent who refused or delayed one or more vaccines. A 2011 survey of children six months to six years of age reported that 13% of parents followed an alternative vaccination schedule. Of these, 53% refused certain vaccines and 55% delayed some vaccines until the child was older. Seventeen percent reported refusing all vaccines. In a 2009 survey, 11.5% of parents of children 17 years and younger reported refusing at least one vaccine. The use of this or a similar form in concert with direct and non-condescending discussion can demonstrate the importance you place on appropriate immunizations, focuses parents' attention on the unnecessary risk for which they are accepting responsibility, and may in some instances induce a wavering parent to accept your recommendations.

Providing parents (or guardians) with an opportunity to ask questions about their concerns regarding recommended childhood immunizations, attempting to understand parents' reasons for refusing one or more vaccines, and maintaining a supportive relationship with the family are all part of a good risk management strategy. The AAP encourages documentation of the health care provider's discussion with parents about the serious risks of what could happen to an unimmunized or under-immunized child. Provide parents with the appropriate VIS for each vaccine at each immunization visit and answer their questions. For parents who refuse one or more recommended immunizations, document your conversation and the provision of the VIS(s), have a parent sign the Refusal to Vaccinate form, and keep the form in the patient's medical record. The AAP also recommends that you revisit the immunization discussion at each subsequent appointment and carefully document the discussion, including the benefits to each immunization and the risk of not being age-appropriately immunized. For unimmunized or partially immunized children, some physicians may want to flag the chart to be reminded to revisit the immunization discussion, as well as to alert the provider about missed immunizations when considering the evaluation of future illness, especially young children with fevers of unknown origin.

This form may be used as a template to document that the health care provider had a discussion with the parent signing the form about the risks of failing to immunize the child. It is not intended as a substitute for legal advice from a qualified attorney as differing state laws and factual circumstances will impact the outcome. While it may be modified to reflect the particular circumstances of a patient, family, or medical practice, practices may want to consider obtaining advice from a qualified attorney. If a parent refuses to sign the refusal form such refusal along with the name of a witness to the refusal should be documented in the medical record.

The AAP Section on Infectious Diseases and other contributing sections and committees hope this form will be helpful to you as you deal with parents who refuse immunizations. It is available on the AAP Web site on the Section on Infectious Diseases Web site (<http://www2.aap.org/sections/infectdis/resources.cfm>), and the Web site for the AAP Childhood Immunization Support Program (<http://www2.aap.org/immunization/pediatricians/refusaltovaccinate.html>).

Sincerely,

/s/

Tina Tan, MD, FAAP

Chairperson

AAP Section on Infectious Diseases

/s/

Ed Rothstein, MD, FAAP

AAP Section on Infectious Diseases

Refusal to Vaccinate

Child's Name _____ Child's ID# _____

Parent's/Guardian's Name _____

My child's doctor/nurse, _____, has advised me that my child (named above) should receive the following vaccines:

Recommended	Declined
<input type="checkbox"/> Hepatitis B vaccine	<input type="checkbox"/>
<input type="checkbox"/> Diphtheria, tetanus, acellular pertussis (DTaP or Tdap) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Diphtheria tetanus (DT or Td) vaccine	<input type="checkbox"/>
<input type="checkbox"/> <i>Haemophilus influenzae</i> type b (Hib) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Pneumococcal conjugate or polysaccharide vaccine	<input type="checkbox"/>
<input type="checkbox"/> Inactivated poliovirus (IPV) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Measles-mumps-rubella (MMR) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Varicella (chickenpox) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Influenza (flu) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Meningococcal conjugate or polysaccharide vaccine	<input type="checkbox"/>
<input type="checkbox"/> Hepatitis A vaccine	<input type="checkbox"/>
<input type="checkbox"/> Rotavirus vaccine	<input type="checkbox"/>
<input type="checkbox"/> Human papillomavirus (HPV) vaccine	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>

I have been provided with and given the opportunity to read each Vaccine Information Statement from the Centers for Disease Control and Prevention explaining the vaccine(s) and the disease(s) it prevents for each of the vaccine(s) checked as recommended and which I have declined, as indicated above. I have had the opportunity to discuss the recommendation and my refusal with my child's doctor or nurse, who has answered all of my questions about the recommended vaccine(s). A list of reasons for vaccinating, possible health consequences of non-vaccination, and possible side effects of each vaccine is available at www.cdc.gov/vaccines/pubs/vis/default.htm. I understand the following:

- The purpose of and the need for the recommended vaccine(s).
- The risks and benefits of the recommended vaccine(s).

- That some vaccine-preventable diseases are common in other countries and that my unvaccinated child could easily get one of these diseases while traveling or from a traveler.
- If my child does not receive the vaccine(s) according to the medically accepted schedule, the consequences may include
 - Contracting the illness the vaccine is designed to prevent (the outcomes of these illnesses may include one or more of the following: certain types of cancer, pneumonia, illness requiring hospitalization, death, brain damage, paralysis, meningitis, seizures, and deafness; other severe and permanent effects from these vaccine-preventable diseases are possible as well).
 - Transmitting the disease to others (including those too young to be vaccinated or those with immune problems), possibly requiring my child to stay out of child care or school and requiring someone to miss work to stay home with my child during disease outbreaks.
- My child's doctor and the American Academy of Pediatrics, the American Academy of Family Physicians, and the Centers for Disease Control and Prevention all strongly recommend that the vaccine(s) be given according to recommendations.

Nevertheless, I have decided at this time to decline or defer the vaccine(s) recommended for my child, as indicated above, by checking the appropriate box under the column titled "Declined." I know that failure to follow the recommendations about vaccination may endanger the health or life of my child and others with whom my child might come into contact. I therefore agree to tell all health care professionals in all settings what vaccines my child has not received because he or she may need to be isolated or may require immediate medical evaluation and tests that might not be necessary if my child had been vaccinated.

I know that I may readdress this issue with my child's doctor or nurse at any time and that I may change my mind and accept vaccination for my child any time in the future.

I acknowledge that I have read this document in its entirety and fully understand it.

Parent/Guardian Signature: _____ Date: _____

Witness: _____ Date: _____

I have had the opportunity to rediscuss my decision not to vaccinate my child and still decline the recommended immunizations.

Parent's Initials: _____ Date: _____ Parent's Initials: _____ Date: _____



Parental Refusal to Accept Vaccination: Resources for Pediatricians

The following are some of the resources available to help pediatricians develop a productive dialogue with vaccine-hesitant parents and answer questions about vaccine risks and benefits:

Web Sites

1. **AAP Childhood Immunization Support Program (CISP)**
Information for providers and parents.
www.aap.org/immunization
www2.aap.org/immunization/pediatricians/refusaltovaccinate.html
2. **Immunization Action Coalition (IAC)**
The IAC works to increase immunization rates by creating and distributing educational materials for health professionals and the public that enhance the delivery of safe and effective immunization services. The IAC “Unprotected People Reports” are case reports, personal testimonies, and newspaper and journal articles about people who have suffered or died from vaccine-preventable diseases.
www.immunize.org/reports
3. **Centers for Disease Control and Prevention (CDC) National Immunization Program**
Information about vaccine safety.
www.cdc.gov/vaccines/hcp.htm
4. **National Network for Immunization Information (NNii)**
Includes information to help answer patients’ questions and provide the facts about immunizations.
<http://www.immunizationinfo.org/professionals>
5. **Vaccine Education Center at Children’s Hospital of Philadelphia**
Information for parents includes “Vaccine Safety FAQs” and “A Look at Each Vaccine.”
www.vaccine.chop.edu
6. **Institute for Vaccine Safety, Johns Hopkins Bloomberg School of Public Health**
Provides an independent assessment of vaccines and vaccine safety to help guide decision-makers and educate physicians, the public, and the media about key issues surrounding the safety of vaccines.
www.vaccinesafety.edu
7. **Immunize Canada**
Immunize Canada aims to meet the goal of eliminating vaccine-preventable disease through education, promotion, advocacy, and media relations. It includes resources for parents and providers.
www.immunize.cpha.ca/en/default.aspx
8. **Sample office policy/letter to parents about refusal to vaccinate**

Journal Articles

1. Offit PA, Jew RK. Addressing parents’ concerns: do vaccines contain harmful preservatives, adjuvants, additives, or residuals? *Pediatrics*. 2003;112(6 Pt 1):1394–1397
2. Offit PA, Quarles J, Gerber MA, et al. Addressing parents’ concerns: do multiple vaccines overwhelm or weaken the infant’s immune system? *Pediatrics*. 2002;109(1):124–129
3. Diekema DS, American Academy of Pediatrics Committee on Bioethics. Responding to parental refusals of immunization of children. *Pediatrics*. 2005;115(5):1428–1431

Books

1. American Academy of Pediatrics. *Red Book: 2012 Report of the Committee on Infectious Diseases*. Pickering LK, Baker CJ, Long SS, Kimberlin DW, eds. 29th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2012
2. Marshall GS. *The Vaccine Handbook: A Practical Guide for Clinicians*. 5th ed. West Islip, NY: Professional Communications, Inc; 2015

Handout

1. Immunization Action Coalition. Reliable sources of immunization information: where to go to find answers! <http://www.immunize.org/catg.d/p4012.pdf>. Accessed October 17, 2012

Reliable Immunization Resources for Parents

Web Sites

1. **Centers for Disease Control and Prevention (CDC) Vaccine Information Statements**
Provide possible health consequences of non-vaccination and possible side effects of each vaccine.
www.cdc.gov/vaccines/pubs/vis/default.htm
2. **AAP Childhood Immunization Support Program (CISP)**
Information for providers and parents.
www.aap.org/immunization
3. **Why Immunize?**
A description of the individual diseases and the benefits expected from vaccination.
www2.aap.org/immunization/families/faq/whyimmunize.pdf
4. **Pennsylvania Immunization Education Program of Pennsylvania Chapter, AAP**
Includes answers to common vaccine questions and topics, such as addressing vaccine safety concerns; evaluating anti-vaccine claims; sources of accurate immunization information on the Web; and talking with parents about vaccine safety.
www.paiep.org
5. **CDC For Parents: Vaccines for Your Children**
Information about vaccine safety.
www.cdc.gov/vaccines/parents/index.html
6. **National Network for Immunization Information (NNii)**
Includes information to help answer patients’ questions and provide the facts about immunizations.
www.immunizationinfo.org/parents
7. **Vaccine Education Center at Children’s Hospital of Philadelphia**
Information for parents includes “Vaccine Safety FAQs” and “A Look at Each Vaccine.”
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8. **Institute for Vaccine Safety, Johns Hopkins Bloomberg School of Public Health**
Provides an independent assessment of vaccines and vaccine safety to help guide decision-makers and educate physicians, the public, and the media about key issues surrounding the safety of vaccines.
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<http://immunize.cpha.ca/en/default.aspx>
10. **Vaccinate Your Baby**
This Every Child By Two site serves as a central resource of vaccine information for parents. The site links to the latest research and studies about vaccines, an interactive timeline on the benefits of vaccines, information about vaccine safety and ingredients, and the importance of adhering to the recommended schedule.
www.vaccinateyourbaby.org

Books

1. American Academy of Pediatrics. *Immunizations and Infectious Diseases: An Informed Parent’s Guide*. Fisher MC, ed. Elk Grove Village, IL: American Academy of Pediatrics; 2006
2. Myers MG, Pineda D. *Do Vaccines Cause That?! A Guide for Evaluating Vaccine Safety Concerns*. Galveston, TX: Immunizations for Public Health; 2008
3. Offit PA. *Autism’s False Prophets: Bad Science, Risky Medicine, and the Search for a Cure*. New York, NY: Columbia University Press; 2008
4. Offit PA. *Deadly Choices: How the Anti-Vaccine Movement Threatens Us All*. New York, NY: Basic Books; 2011
5. Mnookin S. *The Panic Virus: A True Story of Medicine, Science, and Fear*. New York, NY: Simon and Schuster; 2011
6. Offit PA, Moser CA. *Vaccines and Your Child: Separating Fact from Fiction*. New York, NY: Columbia University Press; 2011