



IMMUNIZATION POLICY

Childhood immunization was one of the greatest advances in public health in the 20th century. It has saved millions of children and adults throughout the world from developing meningitis, encephalitis, brain damage, severe respiratory problems, poliomyelitis, paralysis, and other severe illnesses, which can require hospitalization or cause death. And to this day, childhood immunization remains a cornerstone of pediatric care and public health.

- We firmly believe in the effectiveness of vaccines to prevent serious illnesses and save lives.
- We firmly believe in the safety of our vaccines.
- We firmly believe that all children and young adults should receive the recommended vaccines according to the schedule published by the Centers for Disease Control 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 thimerosal, a preservative that has been in vaccines for decades, does not cause autism or other developmental disabilities.
- We firmly believe that vaccinating children and young adults is the single most important intervention we perform as health care providers.

At Premier Pediatrics of Houston, 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. We are committed to quality healthcare and we believe strongly in the safety, effectiveness, and the importance of these vaccines. **Therefore, our policy requires that every patient in our practice receive the vaccinations listed below (or any alternate vaccine schedule as recommended by the CDC and/or AAP):**

Immunization Schedule

2 month visit Pediarix (DTAP/Hep B/Polio), Prevnar, HiB, Rotavirus (oral)
4 month visit Pendarix, Prevnar, HiB, Rotavirus (oral)
6 month visit Pediarix, Prevnar, Rotavirus (oral)
12 month visit Prevnar, MMR, Varicella, Hepatitis A
15 month visit DTAP, HiB
18 month visit Hepatitis A
4 year visit Proquad (MMR/Varicella), Kinrix (DTAP/Polio)
11 year visit TDAP, Meningococcal, HPV
16 year visit Meningococcal
Influenza vaccine to begin yearly at 6 months of age

By signing, I agree to follow Premier Pediatrics of Houston policy to fully immunize my child according to the schedule set forth above.

Patient Name: _____

Parent Signature: _____ Date: _____