

## Shults Pediatrics-Routine Vaccine Schedule Policy

As Pediatricians we feel it is very important for your child to be vaccinated against harmful diseases. Ingredients in vaccines go through strenuous testing and must be approved by the CDC prior to administration. Vaccinations produce immunity without causing infection. Not only does vaccinating in a timely manner protect your child but also protects those in our community who may be more susceptible to contracting harmful diseases.

We follow the American Academy of Pediatrics vaccination guidelines which are listed below. Although this schedule is proven to be most beneficial we also understand that some families wish to separate or delay vaccine administration. Since we understand that every child is different we will honor delayed vaccines schedules, but only if the early childhood series is completed by the 24 month check-up. Should your child receive vaccines at another location we expect proof to be provided for your child's medical record.

Our goal at Shults Pediatrics is to work together with our families to provide the best care possible and follow the most up to date standard of pediatric care to our patients.

By signing below you agree to the course of care for your child regarding vaccine administration and scheduled wellness exams. Should you decide that you do not wish to vaccinate your child or want to delay vaccines past the second birthday you may risk being discharged from the practice due to non-compliance.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16 yrs	17-18 yrs
Hepatitis B <sup>1</sup> (HepB)	1 <sup>st</sup> dose	← 2 <sup>nd</sup> dose →			← 3 <sup>rd</sup> dose →												
Rotavirus <sup>3</sup> (RV) RV1 (2-dose series); RV5 (3-dose series)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	See footnote 2												
Diphtheria, tetanus, & acellular pertussis <sup>2</sup> (DTaP: <7 yrs)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose				← 4 <sup>th</sup> dose →			5 <sup>th</sup> dose					
Haemophilus influenzae type b <sup>4</sup> (Hib)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	See footnote 4		← 3 <sup>rd</sup> or 4 <sup>th</sup> dose → See footnote 4										
Pneumococcal conjugate <sup>5</sup> (PCV13)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose		← 4 <sup>th</sup> dose →										
Inactivated poliovirus <sup>6</sup> (IPV: <18 yrs)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	← 3 <sup>rd</sup> dose →							4 <sup>th</sup> dose					
Influenza <sup>7</sup> (IV)	We do not require that your child have the Influenza vaccine but highly recommend															1 <sup>st</sup> dose only	
Measles, mumps, rubella <sup>8</sup> (MMR)					See footnote 8		← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose					
Varicella <sup>9</sup> (VAR)							← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose					
Hepatitis A <sup>10</sup> (HepA)							← 2-dose series, See footnote 10 →										
Meningococcal <sup>11</sup> (MenACWY-D ≥9 mos; MenACWY-CRM ≥2 mos)															1 <sup>st</sup> dose	2 <sup>nd</sup> dose	
Tetanus, diphtheria, & acellular pertussis <sup>12</sup> (Tdap: ≥7 yrs)															Tdap		
Human papillomavirus <sup>14</sup> (HPV)															See footnote 14		
Meningococcal B <sup>12</sup>																	See footnote 12
Pneumococcal polysaccharide <sup>5</sup> (PPSV23)																	See footnote 5

Range of recommended ages for all children

Range of recommended ages for catch-up immunization

Range of recommended ages for certain high-risk groups

Range of recommended ages for non-high-risk groups that may receive vaccine, subject to individual clinical decision making

No recommendation

Signature

Date

Print Name/Relationship

Date