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## **Pediaplace Pediatrics Vaccination Policy**

Pediaplace Pediatrics will not be able to care for families that choose not to vaccinate their children. As of March 1, 2017, we have revised our vaccine policy to strictly follow the recommendations of the AAP vaccination guidelines. We stopped accepting families that do not vaccinate their children for routine vaccine preventable illnesses without a valid medical exemption.

For many years our physicians have done their best to support families who are concerned about vaccinating their children. Our philosophy has been to provide reasoned information that can help alleviate those concerns and ultimately encourage all parents to comply with the recommendations of the medical community. Unfortunately, there are a fair number of families that choose not to vaccinate their children and the amount is growing.

The physicians at PediaPlace Pediatrics have struggled with this decision but due to the increased potential for our infants and children with chronic medical problems being exposed to vaccine preventable diseases within our facility, we decided to change our vaccine policy. We regret any inconvenience this may cause you and your family. We strive to support you to provide the best medical care for your child/children and vaccines are an important part of that care.

Below are a few links to important information about vaccines. We would be happy to provide copies of these and other peer reviewed articles about vaccine risks, benefits and safety. If you choose to look for medical care elsewhere, we wish you and your family a healthy future.

- Clear Answers and Smart Advice About Your Baby's Shots
  - <http://www.immunize.org/catg.d/p2068.pdf>
- What if You Don't Vaccinate Your Child?
  - <http://www.immunize.org/catg.d/p4017.pdf>
- Vaccine Safety : The Facts
  - <https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Vaccine-Safety-The-Facts.aspx>

**Please sign below to acknowledge that you have read and are aware of our Vaccination Policy:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_