



Welcome Package

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Mission Statement

In 1992, Dr. Juan Tapia-Mendoza founded the Pediatrics 2000 group, bringing together a dedicated team of pediatricians and medical professionals committed to serving marginalized urban communities. In January 1993, Pediatrics 2000 opened its doors at the corner of 150th Street and Broadway in West Harlem, New York, an area federally designated as a medically underserved community with high rates of asthma, teen pregnancy, obesity, and behavioral issues. The clinic introduced the concept of a private pediatric office in the neighborhood and became the first open-access clinic for Medicaid-eligible populations in the area.

Since its inception, Pediatrics 2000 has established key partnerships with important community organizations, such as the National Health Service Corps and the Columbia Presbyterian Medical Center. These collaborations have helped strengthen primary care in underserved neighborhoods, promote health literacy through educational programs, and foster medical research and pro-bono work.

The work of Pediatrics 2000 has gained recognition in major media outlets, including The New York Times, NBC, CBS, Telemundo, Univision, ABC Channel 7, Fox 5, El Diario La Prensa, Amsterdam News, and NY-1 Neoyorquino de la semana, among others. Currently, the clinic operates in two locations and serves over 30,000 patients each year.

In response to the COVID-19 pandemic, Pediatrics 2000 quickly adapted by adopting telehealth consultations to ensure continuous care in times of uncertainty. The clinic also expanded its support by distributing food to the local community and collaborating with SOMOS Community Care to conduct COVID-19 testing in underserved areas. In December 2020, the staff volunteered to help manage vaccination centers in New York City. Once the CDC approved the COVID-19 vaccine, Pediatrics 2000 began administering it to its patients, solidifying its leadership in pediatric care for marginalized communities.

Thanks to its innovative practices, Pediatrics 2000 has received the prestigious recognition of Patient-Centered Medical Home (PCMH) Level 3, the highest standard of patient-centered care awarded by the National Committee for Quality Assurance (NCQA). This designation reaffirms the clinic's commitment to comprehensive, coordinated, and high-quality care, and highlights its ongoing dedication to improving patient outcomes.

Patient Responsibilities and Policies

Welcome to Pediatrics 2000

We are committed to providing quality care in a respectful and supportive environment. To help us serve you better, please review the following guidelines:

1. Appointment Scheduling

Patients must call in advance to schedule either a same-day or future appointment. Same day, appointments will be assigned to the next available provider, which may not be your preferred doctor. Please note that patients arriving more than 15 minutes late will forfeit their appointment and be treated as walk-ins.

2. Medical History Disclosure

Patients are responsible for providing accurate and complete information regarding their medical history, including past hospitalizations, current conditions, previous visits, and medications.

3. Co-Payments

Co-payments are due at the time of check-in for each office visit.

4. Contact Information

It is the patient's responsibility to notify our office of any changes in contact information to ensure effective communication.

5. Behavioral Expectations

All patients are expected to treat our staff with courtesy and respect. Any form of threatening behavior, verbal abuse, or misconduct may result in dismissal from the practice.

6. Primary Care Provider (PCP) Verification

Patients must ensure that one of our providers is listed as their PCP on their insurance plan (when applicable) prior to the appointment. Last-minute changes made at check-in may not be processed in time and could require rescheduling.

7. Vaccination Policy

Our practice follows a standardized vaccination protocol. Patients who choose not to follow this policy are required to seek care elsewhere within 30 days. We regret that new patients who are opposed to vaccinations cannot be accommodated.

8. Phone Communication with Providers

Providers will return patient calls by the end of the day, after concluding scheduled appointments. In some cases, calls may be returned sooner when possible.

9. Recording Policy

Photography and video recording are strictly prohibited in clinical areas including triage, laboratory, examination rooms, and shared spaces to protect the privacy of others. Staff may ask you to cease recording if necessary.

10. Proof of Address

Requests for proof of address are subject to a \$10 processing fee.

11. Paperwork Processing

Documents dropped off for completion will be processed within 48 to 73 hours. For same-day completion, patients must register for a same-day appointment and wait as they would during an office visit.

12. Personal Belongings

The clinic is not responsible for lost or misplaced personal items.

13. Pet Policy

For safety and hygiene, pets are not permitted on clinic premises.

Patient Bill of Rights

As a patient at a clinic in New York State, you have the legal right to:

1. **Non-Discriminatory Access to Services**
Receive services without regard to age, race, color, sexual orientation, religion, marital status, sex, national origin, or sponsor.
2. **Respectful and Dignified Treatment**
Be treated with consideration, respect, and dignity, including the right to privacy during treatment.
3. **Service Awareness**
Be informed of the services available at the clinic.
4. **Emergency Coverage Information**
Be informed of provisions for emergency coverage during non-operational hours.
5. **Financial Transparency**
Be informed of service charges, eligibility for third-party reimbursement and, when applicable, the availability of free or reduced-cost care.
6. **Account Statement Access**
Receive an itemized copy of your account statement upon request.
7. **Medical Information and Communication**
Obtain complete and current information from your healthcare practitioner (or their delegate) regarding your diagnosis, treatment, and prognosis, conveyed in terms you can reasonably be expected to understand.
8. **Informed Consent**
Receive necessary information from your physician to provide informed consent prior to any non-emergency procedure or treatment. This includes details of the procedure or treatment, foreseeable risks, and available alternatives, as a reasonable medical practitioner would disclose under similar circumstances.
9. **Right to Refuse Treatment**
Refuse treatment to the extent permitted by law and be fully informed of the medical consequences of such refusal.
10. **Protection from Research Participation**
Decline participation in experimental research.
11. **Grievance and Feedback Rights**
Voice grievances and recommend changes in policies and services to clinic staff, the operator, and the New York State Department of Health without fear of reprisal.

12. Privacy and Confidentiality

Expect privacy and confidentiality of all information and records related to your treatment.

13. Control Over Medical Record Disclosure

Approve or refuse the release of your medical records to any healthcare practitioner or facility, except as required by law or third-party payment contracts.

14. Access to Medical Records

Access your medical records in accordance with Section 18 of the Public Health Law and Subpart 50-3.

15. Visitor Authorization

Authorize family members and other adults who will be given priority to visit, consistent with your ability to receive visitors.

Notice of Privacy Practices

This notice describes how medical information about your child may be used and disclosed and how you can access this information. Please review it carefully.

Our Commitment to Privacy

At Pediatrics 2000, we understand that health information about your child is personal. We are committed to protecting your child's medical records and complying with all applicable federal and state privacy laws.

How We May Use and Disclose Health Information

We may use or disclose your child's Protected Health Information (PHI) for:

- **Treatment:** To provide, coordinate, or manage your child's healthcare with other professionals.
- **Payment:** To obtain payment for services rendered.
- **Healthcare Operations:** For administrative, quality assessment, training, and accreditation purposes.

Other uses include:

- **Public health reporting (e.g., immunizations, communicable diseases)**
- **Health oversight agencies**
- **Child protective services when legally required**
- **Judicial and administrative proceedings**
- **Law enforcement if required by law**
- **Emergencies and disaster relief efforts**
- **Appointment reminders and health-related information**

Any other use requires your **written authorization**, which you may revoke in writing at any time.

Special Considerations

- We may share information with parents or legal guardians unless prohibited by law (e.g., certain reproductive health, mental health, or substance use services protected for minors).

- New York law may grant minors confidentiality for specific treatments depending on age and services.

Your Rights

You have the right to:

- **Request limitations** on disclosures
- **Access and inspect** your child's medical records
- **Request corrections** to incomplete or inaccurate information
- **Receive an accounting** of certain disclosures
- **Obtain a paper copy** of this notice
- **File a complaint** with us or the U.S. Department of Health and Human Services if you believe your privacy rights have been violated

Pediatrics 2000 Vaccine Policy Statement

Over the years, our doctors and nurse practitioners have made it a priority to support families who have concerns about vaccinating their children. We recognize that making healthcare decisions for your child can be overwhelming, especially when conflicting and often misleading information is just a click away. Our approach has always been grounded in empathy: we listen, we educate, and we aim to empower families to make informed choices that safeguard not just their own children, but the wider community.

That mission hasn't changed, but the public health landscape has. We've seen a growing wave of vaccine hesitancy, largely driven by misinformation, and unfortunately, we've begun to see the consequences. Diseases like measles and whooping cough, once rare, are resurging across the country, putting vulnerable children at grave risk. These include our youngest patients and those who are immuno-compromised, like children undergoing chemotherapy, who rely on those around them to be protected.

Considering these developments, and after deep reflection, we've made the difficult decision to update our immunization policy. This is not a decision we've taken lightly, and it is not one based on judgment. It is grounded in our unwavering commitment to evidence-based medicine and our moral obligation to provide a safe environment for all the families we serve.

Effective March 1, 2017:

- **We will no longer accept new families who decline childhood vaccinations.**
- **Existing patients who are behind on required vaccines will have up to 6 months to bring their child into compliance.** We will provide personalized support to help families catch up on immunizations during this grace period.

We understand this change may be difficult for some, and we remain here to answer questions and provide support. But we want to be transparent about our expectations so that families can make the decisions that are right for them. Our belief in vaccines is grounded in science and compassion:

- Vaccines save lives.
- Vaccines are safe.
- Vaccines do not cause autism or other developmental disabilities.
- The standard immunization schedule, as recommended by the CDC and AAP, is the safest and most effective way to protect children.

Our Immunization Policy Highlights:

1. **All children must receive all required vaccines** (including Hib and Prevnar) as mandated by New York State and recommended by the AAP.

2. **Children must begin immunizations at 2 months of age** and be fully vaccinated (including MMR and Varicella) by age 2.
3. **We follow the immunization schedule set by the CDC and AAP** without any deviation.
4. **If a family chooses to limit vaccines to two at a time**, they must return every 2–4 weeks to remain within the appropriate window.
5. **If limited to one vaccine at a time**, weekly visits will be required to stay on schedule.
6. Exceptions to the schedule include:
 - **Hepatitis B:** strongly recommended and must be completed by school entry.
 - **Hepatitis A:** strongly recommended but may be deferred until required by the state.
 - **Influenza:** recommended yearly for all children over 6 months, though not yet mandatory.
 - **HPV (Gardasil):** recommended for preteens/teens (ages 11–13), though not mandatory.
7. **Families who do not align with this policy will be given a 30-day grace period** to transfer to another practice. During that time, our staff will assist in finding a provider that aligns with your preferences.

We recognize that vaccine decisions are personal, and policy changes can feel challenging. Our commitment to your child's health remains unwavering. Guided by the best available science, including CDC recommendations, we're here to support your family with respect and care.

We value your partnership in protecting both your child and our community. If you have questions about our policy or CDC guidelines, our team is here to help.

Thank you for being part of the Pediatrics 2000 family. It is a privilege to care for your children and to grow together in pursuit of life-long health and wellness.

Warm regards,

The Pediatrics 2000 Team

Pediatrics 2000 Eating & Drinking Policy

Eating & Drinking Policy for Our Visitors

Adherent with Public Health Recommendations from the New York State Department of Health

At Pediatrics 2000, we're dedicated to providing a safe, clean, and welcoming environment for every child and family. To help maintain high standards of health and hygiene, and to protect children with food allergies and sensitivities, we kindly ask that visitors follow our guidelines below, in accordance with public health recommendations from the **New York State Department of Health**.

Please Refrain from Eating or Drinking in the Clinic

To promote the well-being of all our patients, we ask that:

- **No food, snacks, or beverages** be consumed in the waiting room, hallways, or examination rooms.
- **Exceptions include:**
 - Breastfeeding infants or bottle-feeding.
 - Drinking water from sealed containers.

Tips for Parents & Guardians

- You're welcome to feed your child **before or after your visit**.
- If your child needs a feeding or drink during the visit, please speak to our staff. We're happy to assist you in finding a designated, appropriate space.
- Breastfeeding parents are fully supported and may use private areas of the clinic as available.

Why This Policy Matters

- **Reduces risk of illness** by minimizing foodborne germs in shared spaces.
- **Protects children with allergies** from accidental exposure.
- **Supports a clean and comfortable environment** for all families.

Thank You

We truly appreciate your cooperation and understanding as we work together to keep our clinic safe, welcoming, and family-friendly. If you have questions or need accommodations, don't hesitate to ask one of our staff members, we're here to help!

Pediatrics 2000 Visitors Dress Code Policy

Dress Code Policy for our Visitors

Adherent with Public Health Recommendations from the New York State Department of Health

At Pediatrics 2000, our goal is to create a respectful, safe, and professional setting where children and families feel comfortable and cared for. As part of maintaining this environment, we kindly ask that all visitors, including parents and guardians, arrive dressed in appropriate attire.

Dress Code Expectations

We respectfully request the following of all patients, parents, and guardians:

- **All visitors must wear shirts, pants or skirts, and footwear** while inside the clinic.
- **Swimwear, bikinis, or shirtless attire** are not permitted in any indoor clinic area.
- **Clothing should be modest, clean, and respectful**, avoiding offensive language or imagery.
- **Children's clothing should allow ease of access** for medical examinations (e.g. short sleeves, layers).
- **Hats and sunglasses** may be requested to be removed for check-in and identification purposes.

Health, Safety & Courtesy Considerations

- Wearing appropriate clothing helps promote a safe and hygienic environment for all families.
- It minimizes the risk of exposure to germs and maintains professional standards of care.
- It supports an atmosphere of mutual respect and comfort for staff and all visitors.

Special Circumstances

If a visitor arrives in attire not aligned with these guidelines, a staff member will kindly offer options:

- Access to a private area to change if needed.
- Rescheduling the appointment if necessary for comfort and privacy.

Thank You

Thank you for helping us keep our clinic a welcoming, respectful space for everyone. If you have questions about this policy or need assistance, our team is happy to help with understanding and care.

Well Child Visit and Vaccine Schedule

1st Office Visit	<i>24-48 hours after hospital discharge</i>	At this visit, we will carefully screen for normal development and weight gain. If not given at the hospital, your baby will receive an important vaccine that protects him/her from a virus that damages the liver - <u>Hepatitis B #1 (if not given in hospital) and RSV.</u>
2 Week Visit	<i>Schedule this visit by 2 weeks of age</i>	Screen for normal development and weight gain. TB risk assessment
1 Month Visit	<i>Schedule this visit <u>before</u> the 1 Month Birthday</i>	Screening for normal development and weight gain
2 Month Visit	<i>Schedule this visit after the 2 Month Birthday</i>	Screening for normal growth and development. Your baby will receive 4 life-saving vaccines: <u>Hepatitis B #2, Pentacel #1, Prevnar #1, Rotateq#1.</u> These vaccines will protect your child from multiple bacteria and viruses that can cause severe infections of throat, lungs, intestines, and skin. The vaccines given at this visit also protect against viruses and bacteria which can cause brain damage, paralysis, or even death.
4 Month Visit	<i>Schedule this visit right after the 4 Month Birthday</i>	Screening for normal growth and development. Your baby is scheduled to receive 3 important booster vaccines: <u>Pentacel#2, Prevnar #2, Rotateq #2</u>
6 Month Visit	<i>Schedule this visit right after the 6 Month Birthday</i>	Screening for normal growth and development. Your baby will receive 4 booster vaccines: <u>Hepatitis B #3, Pentacel #3, Prevnar #3, Rotateq #3.</u> During Flu season, your baby will also receive <u>Flu Vaccine #1</u>
9 Month Visit	<i>Schedule this visit right after the 9 Month Birthday</i>	Screening for normal growth and completing a special developmental screen using a paper questionnaire: PEDS Screen. Follow-up on any overdue vaccines or lab test.
1 Year Visit	<i>Schedule this visit <u>AFTER</u> the 1 Year Birthday</i>	Screening for normal growth and development. Your baby will receive a finger prick blood test: Hemoglobin (anemia) test and will be tested for Lead poisoning. Your baby will receive 3 vaccines which protect against 5 very dangerous viruses including Measles and Chickenpox: <u>MMR #1, Varivax #1, Hepatitis A #1</u>
15 Month Visit	<i>Schedule this visit <u>BEFORE</u> the 15 Month Birthday</i>	Screening for normal growth and development. Your baby is scheduled to receive 3 booster vaccines: <u>DTaP #4, Prevnar #4, Hib #4.</u> Booster vaccines are very important to ensure protection from these diseases.

18 Month Visit	<i>Schedule this visit right after the 18 Month Birthday</i>	Screening for normal growth and development. Your baby will receive a finger prick blood test to check for anemia and Lead poisoning: Hemoglobin (anemia) and Lead level
2 Year Visit	<i>Schedule this visit <u>BEFORE</u> the 2 Year Birthday</i>	Screening for normal growth and development and risk assessment (TB, anemia, lead, cholesterol). Follow-up on any overdue vaccines or lab tests (Hemoglobin and Lead).
2 ½ Year Visit (30 months)	<i>Schedule this visit <u>BEFORE</u> the 30 months</i>	Screening for normal growth and development.
3 Year Visit	<i>Schedule this visit right after the 3Year Birthday</i>	Screening for normal growth and development. Your child will have a vision test. Risk Assessments for TB, anemia, and Lead are given.
4 Year Visit	<i>Schedule this visit right after the 4 Year Birthday</i>	Screening for normal growth and development. Vision and Hearing and risk assessments for TB, anemia, Lead, and cholesterol are performed. Vaccines: <u>DTAP#5, IPV#4, MMR#2, VAR#2</u>
5-10 Year Visit	<i>Schedule this visit within the calendar year or right <u>AFTER</u> each Birthday</i>	Screening for normal growth and development. Vision and hearing are performed (Excluded at the 7 & 9 years visits). Risk assessments for TB, Anemia, Lead, and Cholesterol are given. Vaccines: <u>HPV4#1 (optional)</u> at 9 years.
11 Year Visit	<i>Schedule this visit right <u>AFTER</u> the 11 Year Birthday</i>	Screening for normal growth and development. Risk assessments for TB, Anemia, Lead, and Cholesterol are performed. Vaccines: <u>HPV4#1 (optional), Menactra#1, Menveo#1.</u>
12-15 Visit	<i>Schedule this visit within the calendar year or right <u>AFTER</u> each Birthday</i>	Screening for normal growth and development. Vision for patients ages 12 and 15. Risk assessments for TB, Anemia, Lead, and Cholesterol are given.
16 Year Visit	<i>Schedule this visit right <u>AFTER</u> the 16 Year Birthday</i>	Screening for normal growth and development. Risk assessments for TB, Anemia, Lead, and Cholesterol are performed. Vaccines: <u>Menactra#2, Menveo#2.</u>
17-21 Year Visit	<i>Schedule this visit within the calendar year or right <u>AFTER</u> each Birthday</i>	Screening for normal growth and development. Vision performed at 18 years. Labs for Cholesterol are performed. Risk assessments for TB and Anemia are given.

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