

## Vaccination Policy

As advocates for optimal health for all children, we require all patients to be up to date on vaccinations per CDC guidelines. As pediatric dentists, we treat many medically compromised children. Unvaccinated children put these and all of our patients at much greater risk for dangerous medical conditions. Any child not able to be vaccinated due to medical conditions (not religious or personal preference) or on a delayed immunization schedule will require a letter from his or her primary care physician.

By signing below, I acknowledge and accept the terms of this policy.

\_\_\_\_\_ My child is up to date with his/her vaccinations.

\_\_\_\_\_ My child is vaccinated but not up to date.

\_\_\_\_\_ My child does not vaccinate.

\_\_\_\_\_  
Patient Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian