



## **DELAWARE MODERN PEDIATRICS, P.A.**

**David M. Epstein, M.D.**

Springside Plaza, 300 Biddle Avenue  
Connor Building, Suite 206  
Newark, Delaware 19702  
Phone: (302) 392-2077  
Fax: (302) 392-0020

[www.dmpKids.com](http://www.dmpKids.com)

### **Welcome to Delaware Modern Pediatrics!**

I love pediatrics, and I have enjoyed the past 30 years of providing care to children. I am delighted to have you join us.

You will find our office to be colorful, warm, and child-friendly. We use modern equipment and computerized records, in a welcoming, intimate setting. The small size of our practice permits personal, efficient care. You can expect high standards for warm and appropriate care, accurate diagnoses, and empathic, compassionate relationships.

Delaware Modern Pediatrics is located on the second floor of the Connor Building in Springside Plaza, on US-40 just west of People's Plaza Shopping Center. Laboratory and X-Ray services are available within the building.

Our office is open during a wide range of convenient hours; we also offer some evening appointments for well checkups. For sick care, we welcome your questions and calls, or you may make a same-day appointment, whenever the office is open.

Night and weekend emergency coverage is always available; you can reach me or a nurse practitioner for phone advice if you have an emergency that can't wait for the office to open. (Many urgent questions can be answered on our website.) I am on staff at DuPont and Christiana Hospitals.

I urge you to spend some time browsing through our website, [www.dmpKids.com](http://www.dmpKids.com). You can get a good feel for the practice by reading our policies and recommendations. I have written dozens of handouts for patients, which describe our usual advice for many conditions and situations.

If you have any questions about the practice, or about your family, we would love to talk with you. Please give us a call. I look forward to seeing you!

Sincerely,

David Marc Epstein, MD



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### **Driving Directions**

Delaware Modern Pediatrics is located in  
**Springside Plaza**, on U.S. 40 just west of DE Route 896.  
(Springside Plaza is between Peoples' Plaza and Kohl's.)

#### **From I-95:**

1. Take I-95 to Exit 1A. Follow DE 896 South 5 minutes, then turn right onto US 40 West.
  2. Go 0.7 miles, to the 3<sup>rd</sup> traffic light.
  3. Make a left turn from the turning lane, across US 40 into Springside Plaza.
  4. The Connor Building is the second red brick building on the right. You may park in front or back.
  5. Delaware Modern Pediatrics is located on the second floor; turn left off the elevator. Welcome!
- **From Newark:** Follow DE 896 South, past I-95, then turn right onto US 40 West. Follow the directions above.
  - **From Middletown:** Follow DE 896 north, and turn left onto US 40 West. Follow the directions above.
  - **From New Jersey, and from Bear:** Follow US 40 West towards Elkton. Cross DE 896. Go another 0.7 miles, and follow the directions above.
  - **From Elkton:** follow US 40 East about 2 miles past the Delaware border, and turn right into Springside Plaza, just past the Wawa and Kohl's.)

*If you have an old GPS unit: You can use the address of the John Deere store in front of our office complex: **2688 Pulaski Highway, Newark, DE 19702-3915***

(Our office building is new; electronic maps don't have our address programmed in yet. For a Google map, see our website.)



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### **Notification of Responsible Party**

I acknowledge that I am the patient's Responsible Party. I authorize payment of medical benefits to Delaware Modern Pediatrics (DMP) for services rendered. I understand and have received a copy of the following Delaware Modern Pediatrics, PA Business Office Policy:

1. If the patient's insurance carrier requires that a primary care physician (PCP) be selected, a Delaware Modern Pediatrics' physician must be listed as the patient's PCP.
2. Insurance Cards must be presented at every visit.
3. All professional services rendered are the responsibility of the patient's Responsible Party regardless of insurance coverage or custody status.
4. All payments are due at the time of service including co-pays. If the patient's account cannot be paid in full, we encourage the Responsible Party to contact the Business Office to set up a payment plan. If a payment contract is signed, and adhered to, we can avoid collection action on the account.
5. If the patient accumulates a balance that exceeds 90 days past due, there may be a collection fee of up to 30% of the over-due balance applied to the patient's account.
6. If the patient's account has an over-due balance that is not reconciled within 120 days, the family may be discharged from the practice.
7. If a patient has a change of insurance or demographic status, address, telephone number, or custody, the Responsible Party needs to inform the office within 1 month of the change.
8. It is up to the Responsible Party to ensure that patients arrive on or before their scheduled appointment time.
9. There is a fee of \$ 30.00 charged to the patient's account if the patient misses a scheduled appointment.
10. If 3 appointments for any family members are missed, your family may be discharged from the practice.
11. If a patient needs a referral, the Responsible Party must contact the referral line at least 3 business days before their appointment.
12. It is up to the Responsible Party to understand the patient's insurance plan and benefit coverage. This includes but is not limited to: capitation sites for labs, x-rays, and referrals, patient's allowable health maintenance visits and coverage, out of network benefits, vaccination coverage including flu vaccines, co-insurance and deductible fees. Delaware Modern Pediatrics is not able to monitor each patient's benefit coverage, since the coverage is selected by the policy holder or the policy holder's employer.

If you have any questions please contact the Business Office at (302) 392-2077.

# FAMILY REGISTRATION FORM

Please Print

Today's Date	
--------------	--

## PATIENT INFORMATION

Patient Name (First)	(Middle)	(Last)	D.O.B
Patient Name (First)	(Middle)	(Last)	D.O.B
Patient Name (First)	(Middle)	(Last)	D.O.B
Patient Name (First)	(Middle)	(Last)	D.O.B
Patient Name (First)	(Middle)	(Last)	D.O.B
Patient Name (First)	(Middle)	(Last)	D.O.B

## SUBSCRIBER OF INSURANCE INFORMATION

Full Legal Name (First)	(Middle)	(Last)	<i>(name of responsible party)</i>	Relationship to Patient(s)	
Address (Number)		(Street)		(Apt. No.)	
City		State	Zip	Social Security No.	Home Phone
Date of Birth		Age	Sex	Marital Status	Occupation
Employer Name		Employer Street Address		City	State    Zip
Business Phone (Including Extension)			Cell Number	Email Address	
Who does that patient(s) reside with? If it is not with the Responsible Party list the address and phone number:					
How Did You Hear About Us?					

## SPOUSE'S INFORMATION

Full Legal Name (First)	(Middle)	(Last)	Occupation		
Address (If Different From Above)			City	State	Zip    Home Phone
Employer Name	Street Address		City	State	Zip    Business Phone (Ext)

## INSURANCE INFORMATION

Primary Insurance Company Name	Group No.	ID/Certificate No.
Subscriber Name	Where to Send Claim	
Secondary Insurance Company Name	Group No.	ID/Certificate No.
Subscriber Name		
Other Insurance Information		

## EMERGENCY INFORMATION

Person to Notify in Case of Emergency	Relationship
Address (Number)                      (Street)    (Apt. No.)	
City	State    Zip    Home Phone



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**Family History**

Child's name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_

We are interested in the **medical histories** of:

- your child's brothers and sisters
- you and your spouse (or child's biologic parent)
- your brothers, sisters and parents (and those of your spouse)

(The family histories of **your** cousins, aunts/uncles, and grandparents are less relevant.)

<b>Neurologic</b>	
Seizures	
Mental retardation	
Learning disability/dyslexia	
ADHD	
Hearing problems	
Migraines	
<b>Endocrine</b>	
Thyroid disease	
Diabetes - child or adult onset	
Obesity	
<b>Allergic</b>	
Asthma (even if as a child)	
Hay fever/Allergies	
Food Allergies	
<b>Cardiovascular</b>	
Heart disease before age 60	
High cholesterol	
High blood pressure	
<b>Psychiatric</b>	
Depression/Suicide	
Anxiety	
Panic attacks	
Drug/Alcohol abuse	
Eating disorder	
<b>Other:</b>	



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### **Consent for Purposes of Treatment, Payment and HealthCare Operations**

I consent to the use or disclosure of my protected health information by Delaware Modern Pediatrics for the purpose of diagnosing or providing treatment to me, obtaining payment for my health care bills or to conduct health care operations of Delaware Modern Pediatrics.

I understand that diagnosis or treatment of me by Delaware Modern Pediatrics may be conditioned upon my consent as evidenced by my signature on this document.

I understand that I have the right to request a restriction as to how my protected health information is used or disclosed to carry out treatment, payment or health care operations of the practice. Delaware Modern Pediatrics is not required to agree to the restrictions that I may request. However, if Delaware Modern Pediatrics agrees to a restriction that I request, the restriction is binding on Delaware Modern Pediatrics.

I have the right to revoke this consent, in writing, at any time, except to the extent Delaware Modern Pediatrics has taken action in reliance on this consent.

My "Protected Health Information" means health information, including my demographic information, collected from me and created or received by my physician, another health care provider, a health plan, my employer or a health care clearinghouse. This protected health information relates to my past, present or future physical or mental health or condition and identifies me, or there is a reasonable basis to believe the information may identify me.

I understand I have a right to review Delaware Modern Pediatrics' Notice of Privacy Practices prior to signing this document.

I may obtain a revised Notice of Privacy Practices by calling the office and requesting a copy be sent in the mail or asking for one at the time of my next appointment.

I understand and have received, a copy the Notification of Responsible Party Form.

\_\_\_\_\_  
Signature of Parent or Personal Representative

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

\_\_\_\_\_  
Date



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**Medical Record Transfer Request**

I, \_\_\_\_\_, am the responsible party for the below listed minor(s). I am requesting and authorizing \_\_\_\_\_, to transfer all protected health information in your possession (entire medical record) for the below listed minor(s) be transferred in electronic or paper format to:

**DELAWARE MODERN PEDIATRICS**

300 Biddle Avenue, Suite 206  
Springside Plaza, Connor Building  
Newark, Delaware 19702

**Information of Doctor you are transferring records from:**

Doctor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Your Children's Information:**

\_\_\_\_\_  
Full Name Date of Birth

I understand that this authorization is valid for 180 days. I clearly understand the content of this form.

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

\_\_\_\_\_  
Date

Relationship to Minor(s): \_\_\_\_\_



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### **PATIENT PRIVACY NOTICE**

We are committed to preserving the privacy of your personal health information. In fact, we are required by law to protect the privacy of your medical information and to provide you with this Notice describing:

#### **HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION.**

We may require your written consent before we use or disclose to others your medical information for purposes of providing or arranging for your health care, the payment for or reimbursement of the care that we provide to you, and the related administrative activities supporting your treatment.

We may be required or permitted by certain laws to use and disclose your medical information for other purposes without your consent or authorization.

As our patient, you have important rights relating to inspecting and copying your medical information that we maintain, amending or correcting that information, obtaining an accounting of our disclosures of your medical information, requesting that we communicate with you confidentially, requesting that we restrict certain uses and disclosures of your health information, and complaining if you think your rights have been violated.

We have available a detailed Notice of Privacy Practices which fully explains your rights and our obligations under the law. We may revise our Notice from time to time. The effective date at the top right hand side of this page indicates the date of the most current Notice in effect.

**You have the right to receive a copy of our most current Notice in effect. If you have not yet reviewed a copy of our current Notice, please ask at the front desk and we will provide you with a copy.**

If you have any questions, concerns or complaints about the Notice of Privacy Practices or your medical information, please contact our practice administrator at 302-392-2077.



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## **FINANCIAL POLICY**

Delaware Modern Pediatrics, P.A. is doing everything possible to hold down the cost of your medical care. You can help by reducing the number of bills we send to you. The following is a summary of our payment policy.

### **PAYMENT IS EXPECTED AT THE TIME OF SERVICE.**

Payment is required at the time services are rendered, unless other arrangements have been made in advance. This includes applicable deductibles, coinsurance, and copayments for participating insurance companies. Delaware Modern Pediatrics, P.A. accepts cash, personal checks (in-state only), VISA, MasterCard, and Discover. **There is a service charge of \$35 for returned checks.**

The adult accompanying a minor patient and the parents (or guardians) of the minor are responsible for payment at the time of service. For minors who are unaccompanied, nonemergency treatment may be denied unless payment arrangements have been made.

Patients with an outstanding balance (60 days or more overdue) must make arrangements for payment prior to scheduling appointments. We realize that many families experience financial difficulties. If your family is struggling with medical bills, please contact us; we can help you find ways to make paying the bills less painful. Otherwise, in such circumstances, we may turn your account over to a collection agency in order for ongoing payments to be made and followed.

### **INSURANCE:**

We bill participating insurance companies as a courtesy to you. You are expected to pay your deductible and copayments at the time of service. If we have not received payment from your insurance company within 45 days of the date of service, you will be expected to pay the balance in full. You are responsible to ensure that all charges are paid, whether by you or by your insurance carrier.

It is the patient's responsibility to provide us with current insurance information and to present the insurance card and identification at each visit. We will submit claims to secondary insurances if we have the proper insurance information.

Our Business Office staff is happy to assist our patients with any insurance questions related to filed claims, and to provide any additional information the carrier may need to process the claim. Specific coverage issues can only be addressed by the patient and the insurance company.

**INSURANCE COMPANIES Delaware Modern Pediatrics, P.A. PARTICIPATES WITH:**

Aetna  
Amerihealth  
Independence Blue Cross  
Highmark/Blue Cross/Blue Shield  
Cigna  
Health Care Preferred

Keystone Health Plan East  
Tri-care / Humana  
United Health Care  
Medicaid  
- Amerihealth Caritas  
- Highmark Health Options

(Note that if your insurance plan is not on this list, most likely we can still provide medical care for your children.)

**FORMS FEES:**

We charge \$20 for all Camp, School, Day Care, Sports or College forms that need be completed, unless you bring them on the day of your appointment.

**POLICIES:**

Our Financial Policy is posted on our website. You may ask our staff for a copy.

Our practice firmly believes that a good physician/patient relationship is based upon clear understanding and good communications. If you have any questions regarding our financial arrangements please feel free to contact our Business Office at 302-392-2077.

Thank you for choosing Delaware Modern Pediatrics, P.A. for your child's healthcare needs!

*I have read and understand the Delaware Modern Pediatrics, P.A. Financial Policy. I agree to assign insurance benefits to the Delaware Modern Pediatrics, P.A. whenever necessary. I also agree that if it becomes necessary to forward my account to a collection agency, in addition to the amount owed, I also will be responsible for the fee charged by the collection agency for costs of collections.*

**Signature of insured  
(or authorized representative):** \_\_\_\_\_

**Date:** \_\_\_\_\_



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[www.DMPkids.com](http://www.DMPkids.com)

### Patient Demographics

*(A separate form must be completed for each child in the family.)*

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

Date of Birth: \_\_\_\_\_

**Sex \***

Male  Female

**Race \***

American Indian or Alaska Native     Asian     Black or African American     Native Hawaiian or Other Pacific Island  
 White     Undefined     Refused to report/unreported

**Ethnicity \***

Hispanic or Latino  
 Not Hispanic or Latino  
 Undefined  
 Refused to report/unreport

**Language: \***

**Birth Place \***

**Marital Status \***

Single  Married

**Tobacco Use (or former user) \***

Yes  No

**If yes, check all that apply \***

Cigarette  Chewing Tobacco  Electronic Devices



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### **No Show/Cancellation Policy for Appointments**

Our goal is to provide quality medical care in a timely manner. In order to do so, we have had to implement a no show/cancellation policy. This policy enables us to better utilize available appointments for our patients in need of medical care.

We understand that there are times when you must reschedule an appointment due to emergencies or obligations for work or family. However, when you do not call to cancel or reschedule an appointment, you may be preventing another patient from getting much needed treatment. Conversely, the situation may arise where another patient fails to cancel and we are unable to schedule you for a visit, due to a seemingly "full" appointment book. Appointments are in high demand, and your timely cancellation will give another patient the possibility to have access to timely medical care.

**A "no show" is a missed appointment, without canceling it within a 24 hour working day in advance. No-shows inconvenience those individuals who need access to medical care in a timely manner.**

#### **How to Cancel Your Appointment**

If it is necessary to cancel your scheduled appointment, we require that you call **one working day in advance**.

Please call our office at (302) 392-2077 by 4:30p.m. **on the working day prior** to your scheduled appointment to notify us of any changes or cancellations. To cancel a Monday appointment, please call our office by 4:30 p.m. on Friday.

#### **The following are fees for services in the office:**

**No Show Fee: \$ 40.00**  
**Same Day Appointment Cancellation: \$ 30.00**

*I have read and understand the Delaware Modern Pediatrics No-Show/Cancellation Policy.*

\_\_\_\_\_  
Patient name

\_\_\_\_\_  
Patient Signature (Patient's Parent/Guardian if under 18)

\_\_\_\_\_  
Date



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### **AFTER-HOURS EMERGENCIES**

We try our best to provide 24 hour a day availability for our patients who have emergencies. We feel that this is an important part of our practice. However, if you call us after hours, please keep in mind that you are calling our personal telephone number, not an answering service. We depend on the judgment of our patients as to what constitutes an emergency. We reserve the hours after the office closes for emergencies only.

If your child has become ill, and you feel that it cannot wait until the following morning, we need to hear from you right away and we will be happy to assist you. (Please have available the phone number and hour of closing of your pharmacy. Please also take the child's temperature with a thermometer.)

If you call from your cell phone, please be sure you are in a location with good reception. It will be frustrating in an emergency if we cannot hear each other properly.

If you need to reach a physician after hours, please be SURE that you are calling our main telephone number: 392 - 2077. Double-check your cell phone; if you have \*any\* other phone number recorded, you will reach an internal number that will sound legitimate but will not record a message. (This may occur if we call you from our office on any of our 8 phone lines, and you saved the number.) This is a feature of our phone system that we cannot disable.

Please DO NOT seek emergency care from an "urgent care" or medical aid unit. In general, they are not staffed by pediatricians; all too often, our patients are given a wrong diagnosis or wrong treatment by urgent care facilities. If you need emergency care after you talk with us, you will get better care from a hospital emergency room.

Examples of true emergencies include:

- Any infant under two months with a temperature over 100.5°F (38.1°C) rectally
- Severe abdominal pain for more than two hours
- Difficulty breathing (not just a stuffy nose)
- Convulsion
- Severe allergic reactions involving severe swelling or difficulty breathing or swallowing
- Vomiting for more than 8 hours, unable to keep sips of fluids down
- Possible fractures or lacerations possibly requiring stitches
- Severe earache

Examples of non-emergencies include:

- Older infants and children with fever, if the child is alert and responsive
- Difficulty breathing because of nasal stuffiness, cough and congestion
- Any illness which has lasted for several days
- A child who has been on antibiotics for several days and does not appear to be getting better
- Cough medicine refills, or refills for long-term medications

All of the above conditions are of concern, and certainly warrant a phone call. However, for most non-emergencies, we will be much better able to help you during regular business hours, when the nurses can assist us and we have your records available.

Please try to assist us in providing the most efficient care for your child. We are always ready to serve you.



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### **Immunizations are Safe and Effective**

Vaccines have protected children against serious childhood illnesses with remarkable effectiveness and safety for many decades. Unfortunately, many parents have been confused and worried by recent news reports claiming to warn about dangers inherent in routine childhood vaccinations. News reports in print and on television are frequently misleading or inaccurate. This handout describes the facts.

#### **Why give vaccines?**

Vaccines against common childhood illnesses have proven to be one of the most important health advances of the twentieth century (along with antibiotics, public sewage systems, and general anesthesia). Effective universal vaccination has already eliminated one deadly childhood illness, smallpox. Immunizations have also dramatically reduced death and disability from bacterial meningitis, tetanus, diphtheria, polio, and other scourges. Normally, fewer than 100 American children get measles each year, although worldwide over a million unvaccinated children still die of measles.

Well-meaning people who suggest that vaccines are no longer necessary, or can be delayed, are unaware of the serious health problems that would certainly reoccur without routine immunizations.

Before vaccination for whooping cough (pertussis) became routine, one in fourteen children contracted whooping cough and one in one hundred infants who caught the disease as infants died from it. Each time vaccine rates drop, children again become sickened. Several decades ago in Sweden, so much concern about vaccine side effects was raised that the pertussis vaccine was delayed until the age of two. But within two years, many Swedish children died from whooping cough. In Japan, as immunization rates fell to 20% by 1979, a whooping cough epidemic resulted in more than 13,000 cases and 41 deaths. In 2003, several Muslim governments in North Africa worried that the United Nations program to eradicate polio was actually a secret plot to cause sterilization of Muslim women, and the programs were halted in those countries; but within two months, cases of polio disease emerged, which spread rapidly to Muslim countries around the globe. In each country, the mistaken decision to delay vaccination was reversed. Now, routine immunizations, with schedules almost

identical to the American schedule, are in force in every country around the world with a functioning public health system.

### **How much is known about the side effects of vaccines?**

Childhood immunizations are possibly the best-researched treatment we have. There is more reliable research to support the safety and effectiveness of vaccines than for any other intervention that we recommend, except perhaps for the use of seat belts. For example, we have more data on the safety and effectiveness of vaccines than we do about antibiotics, cough medicines, or even breast feeding or other feeding advice.

This research shows that each of the recommended vaccines is safe and effective. News reports of serious, permanent damage to children receiving immunizations are, in general, greatly exaggerated or wrong. Of course, any medical intervention can have potential side effects, and parents should be educated about these. However, there is no data whatsoever to support contentions that the vaccines, or the administration schedule we use, commonly cause brain damage, SIDS, autism, learning disabilities, immune disorders, or any of the other diseases claimed by some. We recommend that you study the vaccine information sheets distributed by the Centers for Disease Control (CDC), and available in our office (and on the internet).

In my 30-year career, the children I have known have received perhaps two million vaccines. I am unaware of a single case of permanent side effects in any of those patients. It probably happens, just as with any other medical treatment; but it must be quite rare.

### **What is the research showing permanent damage to children from vaccines?**

There simply is no reliable research proving permanent side effects to large numbers of children resulting from any of the currently administered vaccines -- **none!**

You may have encountered reports of supposedly serious danger from vaccines. There have been reports of permanent brain damage, SIDS, autism, etc. In each case, early published reports questioning an association between current vaccines and permanent side effects have been completely disproved with more extensive research, often by the same researchers who published the original reports.

Unfortunately, there are many people who claim to know about reports or studies proving permanent side effects from vaccines. In my experience, these studies either are unreadable because they have been published in a foreign language; or they do not show what the reporter claims they show; or else the data simply does not exist. I have tried to track many of these claims and have been unable to verify any report in the medical literature showing patterns of permanent side effects from vaccines. (I

would be happy to review any research papers you may come across suggesting that such permanent side effects may actually exist.)

Of course, it is entirely possible that a rare, previously undescribed side effect of one of the vaccines might be discovered. This is unpredictable, of course. In fact, the same is true of every single treatment that health care providers (or alternative practitioners) might suggest. However, when faced with the speculation of a possible side effect to be discovered in the future, compared with the clear and undeniable benefit from routine vaccine administration, there is no question where our recommendations lie.

### **There are so many shots; do multiple antigens "overload" the immune system?**

Some people have claimed that administration of multiple antigens simultaneously is dangerous. This makes no sense to me, especially in view of the excellent safety record described above. Studies have shown that reducing dosages, or separating antigens, does not reduce the incidents of minor side effects, but only increases the number of injections.

There is no logic to the concern that the administration of a handful of antigens simultaneously would be dangerous to a child, especially since children are exposed to dozens of new antigens simultaneously each time they go to a day care or play group.

### **Can't I just skip or delay the vaccines?**

The recommended vaccine schedule has been constructed to maximize the effectiveness and safety of each immunization, and minimize the pain of multiple needles. Delaying these immunizations with "alternative" vaccine schedules simply exposes your infant to the risk of serious infection at the age of infancy, when they are most susceptible. In particular, the smallest infants are those most at risk for whooping cough, HIB meningitis, and measles.

"Spreading out" the vaccine schedule entails more visits to the doctor, more inconvenience to the child, and more time off from work for wage-earning parents. For many, the financial cost is an unacceptable burden.

Much of the protection afforded by vaccines results from an effect called "Herd Immunity." Immunized children protect those around them, because they are less likely to pass on the infectious disease. The more children who are vaccinated in a community, the less wild infection there will be in that community.

Vaccine administration rates are now higher in the United States than they have ever been, making "Herd Immunity" an important protective effect. I am quite concerned that parents who elect to delay vaccine administration for their own children are, in

effect, counting on other parents to vaccinate their children, and create this "Herd Immunity" effect.

I have ethical concerns when a parent decides that other children should suffer the discomfort and risks of vaccines, whatever they might think them to be, so that their own children do not have to receive them. It reminds me of a driver who "runs red lights," counting on other drivers not to!

There is an additional risk. If each child is immunized according to an individual schedule constructed by the family, an office staff's task of keeping track of all the vaccines needed is greatly complicated. With many children receiving so many vaccines on so many schedules, while we try to provide complete well-child care and address parents' other concerns, it is likely that eventually mistakes will be made in administering all the required vaccines.

### **If it's so clear that vaccines are safe and effective, why is there a controversy?**

Questions about the safety and effectiveness of vaccines have circulated ever since routine immunization was begun in the middle of the last century. In fact, one might reasonably ask why every child should routinely be given medicine even if they are not sick. The answer is that vaccines unquestionably improve children's health overall. One cannot prevent these serious illnesses in any way, other than through vaccines. Without them, we would be thrust back into the era when large numbers of children were sickened or killed by common contagious illnesses.

Unfortunately, recent news reports have given much publicity to groups of people who unscientifically question the safety and effectiveness of vaccines. One such group belongs to practitioners and adherents of certain "alternative" medical therapies. In particular, many chiropractors, herbalists, homeopaths, and Christian Science practitioners believe that routine treatment with their brand of alternative medical care for each child would eliminate the need for vaccines. One might wish that this were true. Many of these practitioners claim to have data to prove their point. However, the data does not exist, it will not be released by these practitioners, or does not prove what these practitioners claim it proves.

A second group of vaccine foes consists of people for whom routine immunization appears to be a political, civil rights cause. Formerly, this group was called DPT (Dissatisfied Parents Together). However, this group found that their civil-rights style tactics of marches, signs and megaphones did not sway the public to agree with them. More recently, this group has adopted an official-sounding title, The National Vaccine Information Center. They now give interviews to news reporters, wearing white coats and using scientific jargon, attempting to raise questions in listeners' minds about the safety and value of vaccines. They claim to have data showing all sorts of dangers from vaccines. However, when their claims are investigated, the reports are

unfounded, unverifiable or nonexistent. (Unfortunately, this has not prevented them from receiving a sympathetic audience with news media.)

Lastly, there are support organizations for the benefit of parents whose children have certain chronic medical illnesses. These families suffer greatly because of their children's illnesses; one must be sympathetic to their desperate desire to find cures or explanations for their children's disabilities. Unfortunately, a few of these parents seek their answers in unproven medical theories, believing that food allergies, mega-vitamins, or other unproven theories hold the keys to their children's illnesses. Some of these parents have seized on vaccines as the explanation for their children's debilitating illnesses. However, as described above, although these parents are understandably anxious to find an explanation, there is no evidence to support the heartfelt contention that vaccines might have caused their child's disease.

### **So, should I have my infant vaccinated?**

**Absolutely, yes** – on the recommended, standard schedule. Some parents have become so concerned about what they hear that they are more willing to trust the speculations of unscientific people they will never meet, instead of the scientific assurances of the doctors with whom they have an established relationship and ongoing trust. But the vaccine schedule, and the vaccines themselves, have been developed with an enormous amount of thoughtful research and scientific experience. That is why the schedule exists as recommended.

Research is continuing, of course, just as with every other aspect of medicine. We will continue to update our vaccine schedule as recommended, based not on political pressure but on the latest reliable studies. But I can assure my patients that I have more confidence in the vaccines we administer, given on the recommended schedule, than in almost anything else I discuss with parents. This is why vaccination rates are at historically high levels in America. Most parents trust vaccines and are eager to have their children protected by them. Almost all of the parents of my patients confidently agree to follow the recommended vaccine schedule.

Please protect your child with all the recommended routine childhood immunizations. I am happy to discuss with you any questions that this handout leaves unanswered.

## Vaccine Information: Resources for parents

*Autism's False Prophets: Bad Science, Risky Medicine, and the Search for a Cure*, by Paul A. Offit. Published in 2008, this expert evaluates the alarmist claims most commonly heard, and carefully explains why they are false.

*Parents' Guide to Childhood Immunizations*, by the Centers for Disease Control and Prevention:  
<https://www.cdc.gov/vaccines/parents/tools/parents-guide/index.html>

National Immunization Program, Centers for Disease Control and Prevention:  
<http://www.cdc.gov/vaccines/>

*Lots of great vaccine information for concerned parents, and a link to MMWR.*

*-- Of particular interest: "What would happen if we stopped vaccinations?"*

<http://www.cdc.gov/vaccines/vac-gen/whatifstop.htm>

Pub Med/Grateful Med

<http://www.ncbi.nlm.nih.gov/sites/entrez>

*The National Library of Medicine's on-line database of the most authoritative basic medical research journals. Try typing something like "measles vaccine effectiveness" and read dozens of abstracts!*

National Immunization Coalition:

<http://www.immunize.org/reports/general.asp>

*Stories of families who have suffered from vaccine-preventable diseases*



## **DELAWARE MODERN PEDIATRICS, P.A.**

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## **Visit Schedule**

*(As of January 2019)*

<b><u>Time</u></b>	<b><u>Visit</u></b>	<b><u>Immunizations</u></b>
In the hospital	Daily visit	Hepatitis B #1
2-4 days after discharge	Feeding and jaundice check	
Age 2 weeks	Feeding check	
1 month	Checkup	(No immunization this visit)
2 months	Checkup	DTaP, Hep-B, Polio combination ("Pediarix®") #1 Pneumococcal (Prevnar®) #1 HiB (Hiberix®) #1 Rotavirus (RotaTeq®) #1 <i>(oral)</i>
4 months	Checkup	DTaP, Hep-B, Polio combination ("Pediarix®") #2 Pneumococcal (Prevnar®) #2 HiB (Hiberix®) #2 Rotavirus (RotaTeq®) #2 <i>(oral)</i>
6 months	Checkup	DTaP, Hep-B, Polio combination ("Pediarix®") #3 Pneumococcal (Prevnar®) #3 HiB (Hiberix®) #3 Rotavirus (RotaTeq®) #1 <i>(oral)</i> Flu vaccine #1
9 months	Checkup	(Flu vaccine, or other catch-up shots if needed)
12 months	Checkup	Pneumococcal #4 HiB (Hiberix®) #4 Hep-A #1 Blood count, blood lead level TB risk assessment
15 months	Checkup	MMR, chickenpox #1
18 months	Checkup	DTaP #4 Hep-A #2

2 years and 3 years	Checkup	(catch-up shots only if needed)
4 years	Checkup	MMR, chickenpox #2
5 years	Checkup	DTaP #5, Polio #4 combination ("Kinrix®") Hearing test TB risk assessment
6 – 10 years	Annual Checkup	(Flu vaccine if in season)
11 years	Checkup	Meningitis Vaccine (Menactra®) Tdap Human Papilloma Virus (HPV) #1 (Gardasil®) (2 <sup>nd</sup> vaccine at 6 mo; 3 <sup>rd</sup> if over 15)
12 – 15 years	Annual Checkup	
16 - 17 years	Annual Checkup	Meningitis boosters (Menactra® and Bexsero®)
12 – 18 years	Annual Checkup	
Every year, starting with 6 month visit:		Influenza vaccine

Age 1 year, 5 years, and every change of school: TB risk assessment