



Patient Vaccination Compliance
13825 W. 85th Drive, Suite 200
Arvada, CO 80005

- ❖ Mann Method PT™ & Fitness, PLLC/ Mann Therapies, LLC are committed to the safety and well-being of all the patients we serve. We recognize that many of our patients have medically fragile conditions including being too young for full immunization (infancy), suppressed immune systems, and other conditions that put their immune system at a disadvantage. In order to protect the health of all of our patients, we require that patients be up to date with the American Academy of Pediatrics (AAP) and the Center for Disease Control's (CDC) recommended vaccination schedules. Because we are committed to protecting the health of your child(ren) and all of our patients through vaccinations, we require all of our patients to be vaccinated.
- ❖ For all children 18 years and under, Mann Method PT™ & Fitness, PLLC/ Mann Therapies, LLC require that all patients be up to date and adhere to the vaccination schedules of the AAP and CDC. These schedules are enclosed with this document.
- ❖ Mann Method PT™ & Fitness, PLLC/ Mann Therapies, LLC is unable to provide care to any patient who is unvaccinated. By signing this document you (as the patient or legal representative/guardian of the patient) confirm that the patient's vaccinations are up to date and in accordance with the AAP and CDC vaccine schedule.
- ❖ Mann Method PT™ & Fitness, PLLC/ Mann Therapies, LLC reserve the right to request and access all immunization records to ensure the safety of our patients and providers.

PATIENT NAME: _____

PATIENT DATE OF BIRTH: _____

CLINIC/ DOCTOR OFFICE WHERE IMMUNIZATION RECORD IS HELD:

I (as the patient or legal representative/guardian of the patient),
, _____ (PRINT NAME) certify that all vaccinations are up to
date and in accordance with the AAP and CDC recommended vaccination schedules.

Signature: _____

Date: _____