

# AMERICAN ACADEMY OF PEDIATRICS

## Policy on the Development of Immunization Tracking Systems

Committee on Practice and Ambulatory Medicine

The American Academy of Pediatrics in its role as advocate for children supports public and private cooperation in the development of immunization tracking systems (ITSs) insofar as they benefit children. All ITSs as they are developed:

- Should prospectively articulate their goals and desired outcomes, including documenting immunization status and the mechanics of immunization, increasing rates of immunization, decreasing cost of immunization, and facilitating immunization opportunities;
- Must accurately document each child's current immunization status;
- Must preserve children's and their health care provider's right to confidentiality;
- Should ensure that data will be available to health care providers 24 hours a day, 7 days a week, so that health care providers can take advantage of all opportunities to immunize;
- Should ensure that data will not be used for sanctions against health care providers;
- Must ensure that data input and access mechanisms enable providers to supply and access data easily, without having to purchase specialized hardware or expensive software; input and access software mechanisms need to enable all providers to supply data to and retrieve data from the ITS;
- Should entitle health care providers to be reimbursed for the cost of providing data to the ITS;
- Must ensure that data reflecting evidence of in-

complete immunizations will not be used to deny a child access to care or eligibility for benefits by any insurance plan;

- Must be studied and/or evaluated to determine their effectiveness at increasing immunization rates and decreasing costs; if such systems do not fulfill these goals, they should be eliminated; and
- Should be a collaboration between public and private initiatives with the ability to link to larger data systems, eg, community health information networks, or other similar systems.

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The recommendations in this statement do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

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