Public Health Law: Article 28, Section 2805-h. Hospitals: Immunizations

§ 2805-h. Immunizations.

1. Immunizations against poliomyelitis, mumps, measles, diphtheria and rubella.
   (a) It shall be the duty if the administrative officer or the other person in charge of each hospital to inquire of each person in its care under the age of eighteen, or of a person in parental relation to such person, whether all necessary immunizations have been received for poliomyelitis, mumps, measles, diphtheria and rubella and, if not, to make available such immunizations and a certificate or certificates of such immunizations.
   (b) This subdivision shall not apply to children whose parent, parents or guardian are bona fide members of a recognized religious organization whose teachings are contrary to the practices herein required.
   (c) If any physician licensed to practiced medicine in this state certifies that such immunization may be detrimental to a child’s health, the requirements of this section shall be inapplicable until such immunization is found no longer to be detrimental to the child’s health.

2. Immunizations against influenza and pneumococcal for certain persons sixty-five or older.
   (a) Annually between September first and April first, it shall be the duty of the administrative office or person in charge of each general hospital to offer each admitted person age sixty-five or older vaccination against influenza virus. Such officer or person need not offer the vaccination to persons who have already received such vaccine or for whom it is otherwise inappropriate.
   (b) It shall be the duty of the administrative officer or other person in charge of each general hospital to offer vaccination against pneumococcal disease to each admitted person sixty-five or older in the hospital’s care. Such officer or person need not offer the vaccination to people who have already received it, are not in need of a booster, or for whom it is otherwise inappropriate.
   (c) Each general hospital shall adopt an influenza and the pneumococcal immunization policy which shall include, but not limited to, the following: procedures for identifying persons age sixty-five or older and at the discretion of the facility other individuals at risk; procedures for the offering of immunization against influenza virus between September first and April first, and pneumococcal disease upon admission or discharge to persons age sixty-five or older; procedures for ensuring that individual offered immunization or their guardian receive information regarding the risks and benefits of vaccination; a standing order policy approved by the medical director or other appropriate physician which shall include, but not limited to, an assessment for contra-indications; and a system for documenting vaccine administration, medical contra-indications, patient refusals and any post-vaccination adverse events.
   (d) The Commissioner may waive the requirements of this subdivision due to shortage of influenza and/or pneumococcal vaccine.

3. Immunizations against influenza and Bordetella pertussis; neonatal intensive care units.
   (a) It shall be the duty of each general hospital
(i) with a neonatal intensive care unit to offer, annually between September first and April first, to every parent or person in parental relation who is reasonably anticipated to be a caregiver in the household of a newborn being treated in the neonatal intensive care unit vaccination against influenza virus; and

(ii) having a newborn nursery or providing obstetric services to offer to every parent, person in parental relation or other person who is reasonably anticipated to be a caregiver of a newborn being treated in such hospital vaccination against Bordetella pertussis (whooping cough).

If the parent or person in parental relation wished to be vaccinated, the hospital shall provide the person with the vaccination. If the parent or person in parental relation declines the hospital offer or wishes to defer vaccination, the hospital shall provide information on where such person may be vaccinated. Such general hospital need not offer the vaccination to parents and persons in parental relation who have already received such vaccine or whom it is medically inappropriate.

(b) Each general hospital shall adopt a policy for implementing this subdivision, documenting the offer of vaccine administration.

(c) The Commissioner may waive the requirements of this subdivision due to shortage of influenza vaccine.