

## HERITAGE SCHOOLS, INC.

A Residential Treatment Center for Adolescents  
5600 N. Heritage School Drive  
Provo, UT 84604-7701

# g DATA SHEET g

### **FACILITY DETAILS:**

Heritage is a non-profit, free-standing, 172-bed, long-term residential treatment facility for adolescents ages 12 to 18 (not older than 17 ½ at time of admission).

### **PHILOSOPHY OF TREATMENT AND CARE:**

Heritage approaches the treatment and care of the adolescent from the point of view that the most crucial issue is that of safety, relationships, and the development of emotional attachments. At-risk adolescents often do not trust and tend to pull away from the care of adults; consequently, the development of a strong therapeutic relationship is our primary focus. "Our approach is to build on the positive aspects of supportive relationships and to provide nurture and security together with clinical assistance and structured care. Our successful 24-year history has shown that this philosophy of treatment gives troubled teens the skills and attitudes they need to regain control of their lives." -- Jerry Spanos, Founder

### **LENGTH OF STAY:**

Average length of stay is 14 months. Minimum length of stay is six months.

### **HOUSING:**

On our 19-acre campus, the adolescents live in roomy, home-like apartments. There are 10 to 16 adolescents in each living unit, and adolescents share a bedroom with two to four other adolescents. A treatment team consisting of a psychiatrist, primary therapist, nurse, teacher, recreation therapist, and mental health workers are assigned to each housing unit and meet weekly to discuss each client's progress.

### **CLIENTELE:**

Heritage typically works with clients who are experiencing one or more of the following: Attention Deficit/Hyperactivity Disorder, Substance Related and Use Disorders, Mood Disorders (Major Depression, Bipolar Disorder, Dysthymia), Anxiety Disorders (Panic, Obsessive Compulsive, Posttraumatic Stress Disorder), Impulse Control Disorder, Schizophrenia and other Psychotic Disorders, Conduct Disorder, Oppositional Defiant Disorder, Aspergers, Learning Disorders, Identity Disorder, Cognitive Disorder (functional), Attachment Disorder, Relational Disorders, and Conduct Disorder. We do accept moderately aggressive clients if they meet the other admissions criteria (see Admissions Criteria for details).

### **CHEMICAL DEPENDENCY:**

Heritage also provides services for adolescents who have emotional, behavioral, and academic problems in combination with a substance abuse problem. Heritage prepares the adolescent to engage in the recovery process while being actively involved in psychiatric treatment. Heritage integrates psychiatric and residential treatment with chemical dependency concepts and treatment modalities. Youth who receive these services will be involved in a variety of specialized treatment activities such as psycho-educational groups, process groups, and twelve-step groups (A.A., N.A., A.C.A., Ala-teen).

### **THERAPY:**

Heritage offers individual psychotherapy, group psychotherapy, family therapy, milieu therapy, and therapeutic recreation. Specialty groups are offered which include communication, trauma, anger management, DBT (dialectical behavior therapy) adoption, and social skills. Three months prior to discharge Heritage provides groups to prepare adolescents to transition home or to live independently. Other specialty groups may be started on an "as-needed basis."

### **THERAPEUTIC RECREATION:**

Our on-campus facilities include an equestrian program, an indoor swimming pool, indoor and outdoor volleyball and basketball courts, a racquetball court, a game room, weight room, athletic fields, a low-level ropes course, and a climbing wall. Therapeutic recreation groups, leisure education, community resource awareness, and a wide variety of recreational activities such as snow skiing, water sports, camping, hiking, fishing, crafts, community excursions, etc., are all part of the Therapeutic Recreation program. Self-esteem groups are also a part of every client's treatment.

**PERFORMING ARTS CENTER:**

A new Performing Arts Center facilitates the yearly, full-scale musical produced by Heritage with all adolescents participating. Four productions are rotated so that costumes, props, and sets may be re-used: Joseph and the Amazing Technicolor Dream Coat, Fiddler on the Roof, West Side Story, and The Wiz.

**EDUCATION:**

The on-campus education program provides an educational opportunity for clients in grades 7-12. This model effectively addresses the emotional and learning needs of our adolescents. This unique approach to education is geared to assisting adolescents in the development of a sense of self-worth and preparation for a meaningful life in the community. With classroom sizes ranging from 8 to 12 students. The academic experience is adapted to each child's level of ability. All our teachers are state certified and most are endorsed in Special Education.

**PROFESSIONAL STAFFING:**

Heritage's professional staff includes psychiatrists, a general practice physician, licensed clinical/therapeutic staff (LCSW, MSW, LMFT), and a trained residential staff. Additionally, Heritage offers nursing services (RN, LPN), licensed therapeutic recreation specialists, a registered dietician, and professional licensed educators, many of whom are special education certified.

**LICENSING AND ACCREDITATION:**

Heritage is accredited by the Joint Commission of Healthcare Organizations (JCAHO) as a Child and Adolescent Psychiatric Treatment Center. It is also licensed by the State of Utah Department of Human Services to provide residential treatment as well as substance abuse treatment services. Our educational program is accredited by the Northwest Association of Schools and Colleges, and earned credits are transferable to other schools and colleges.

**CONTRACT SERVICES:**

Heritage has contractual service agreements with specialists in the community to provide a variety of medical and dental services not directly available on campus. Additionally, service agreements with local hospitals assure immediate access to the following services: pharmacy, emergency room, laboratory, radiology, medical and surgical inpatient care, acute psychiatric care, and other support services as required.

**MEMBERSHIPS:**

Heritage holds memberships in and/or affiliates with various local and national organizations.

**CONTINUUM OF CARE:**

Heritage networks with private practitioners, educational consultants, agencies, and other treatment programs to arrange for appropriate after-care and continuity of treatment.

**SPIRITUALITY:**

Heritage recognizes that it takes a true miracle of the heart, a conversion from the inside out, to turn a troubled youth around and to heal grief, pain, and violation. Fostering spiritual growth is a keystone in the Heritage system. The Spirituality Program is a voluntary program which involves the youth, our chaplain, and a mentor.

**ADMISSIONS PROCESS:**

Heritage has admissions representatives to assist in the evaluation and placement process of adolescents. Our prospective clients must first be clinically approved for appropriateness by assessing psychiatric and psychological evaluations, social histories, and discharge summaries from all previous treatment facilities.

**FEES:**

**For more information**, such as a current daily rate or to screen your adolescent, contact our Admissions Department at 800-433-9413. Medication, outpatient medical/dental expenses, and clothing are **not** covered in the otherwise all-inclusive rate. Go to our web site ([www.heritagertc.org](http://www.heritagertc.org)) to see a virtual tour, learn more about us, and access our admissions application.

**Mary Ann Smith**, Director of Admissions, 800-433-9413, x205, [maryann.smith@heritagertc.org](mailto:maryann.smith@heritagertc.org)  
**Susie Fell**, Admissions Consultant, 800-433-9413, x206, [susie.fell@heritagertc.org](mailto:susie.fell@heritagertc.org)

**Confidential Fax: 1-801-226-4641**

**HERITAGE SCHOOLS, INC.**  
Residential Treatment Center for Adolescents

**g ADMISSIONS CRITERIAg**

All applicants receive a thorough screening prior to admission. Appropriate recommendations and/or referrals shall be made for applicants requiring other methods of treatment and /or intervention. Only the Chief Executive Officer can approve placement if there are exceptions to the following criteria.

1. Age at admission is not younger than 12 and not older than 17 ½ years of age.
2. I.Q. Range is 70 or higher. Exceptions to this will be supported by other corroborative data.
3. The adolescent must have the potential for developing attachments.
4. The primary diagnosis shall indicate moderate to severe Psychiatric/ Emotional/Behavioral difficulty which is:
  - a) Of long standing duration.
    - 1) Has persisted for a period of one (1) year or longer, or
    - 2) Has not shown significant response to acute care or less intensive therapeutic intervention, such as out-patient care.
  - b) Not manageable within the adolescent's own home or in a non-residential setting (i.e., a less restrictive setting).
5. The youth shall not be physically handicapped in such a manner as to restrict the normal physical activity which is part of the program.
6. The youth does not present medical problems requiring full-time medical supervision.
7. English Language capacity
8. The essential features are a persistent pattern of functioning and conduct that seriously interferes with the youth's ability to formulate and/or maintain primary relationships, that seriously interferes with the adolescent's capacity to function in a less restrictive environment, and that seriously interferes with the basic rights and needs of others or major age-appropriate societal norms or expectations.

**TYPICAL CLINICAL CONDITIONS THAT QUALIFY FOR ADMISSION**

It is noted that acuity and severity of disorders are significantly considered in the admission decision. It is also noted that the majority of admissions to Heritage present with more than one of these conditions, and most present with several:

1. Mood Disorders: Major Depression, Bi-Polar Disorder, Dysthymia, Depressive Disorder NOS;
2. Destructive/Behavior Disorders: Conduct Disorder, Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder;
3. Personality Disorders and Features: Borderline Avoidant, Histrionic, Narcissistic, Dependent, Passive-Aggressive, Anti-Social, Schizotypal;
4. Psychoactive Substance Use Disorders: Alcohol Abuse/Dependence, Cannabis Abuse/Dependence, Cocaine Abuse/Dependence, Hallucinogen Abuse/Dependence, Polysubstance Abuse/Dependence;
5. Anxiety Disorders: Panic Disorder, Avoidant Disorder, Overanxious Disorder, Phobic Disorder, Post-traumatic Stress Disorder, Generalized Anxiety Disorder;
6. Eating Disorders: Anorexia Nervosa, Bulimia Nervosa;
7. Dissociative Features;
8. Developmental Disorders: Arithmetic Disorder, Reading Disorder, Developmental Disorder NOS, Developmental Receptive Language Disorder, Developmental Expressive Writing Disorder;
9. Other Disorders: Identity Disorder, Impulse Disorders, Delusional Disorders.

It is noted here that we are more interested in the pathogenesis of the disorder in a particular adolescent and how it has affected his or her relationships with themselves and with others than in the particular diagnostic label per say. Decisions are based on an assessment of the interplay between the youth's presenting problems and current psychodynamics and the admissions reviewer's knowledge of the treatment required at Heritage; i.e., amount of individual and group therapy, amount of psychiatric coverage, amount of nursing coverage, staff/client ratio, population/client characteristics, etc.

### **CONDITIONS CONTRA-INDICATING ADMISSION**

1. Client needs a greater level of locked door security than Heritage offers
2. Client does not need this level of care (Heritage would be too restrictive for client)
3. Client is severely mentally retarded
4. Client will be at too great a risk to themselves, other clients, or staff (too assaultive or combative)
5. Client is non-ambulatory
6. Client is blind or deaf
7. Client has been diagnosed with an active communicable infectious disease; i.e., Tuberculosis, Hepatitis
8. Client is an arsonist
9. Client requires detoxification
10. Client has an acute psychotic disorder

# FREQUENTLY ASKED QUESTIONS

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## **How soon will I be able to talk to my adolescent?**

It is the policy of Heritage Schools, Inc. that the adolescent has no outside contact for the first two weeks following admission. The therapist will then set up a regular weekly calling time for the adolescent and the parents. The therapist and adolescent will also call every other week for a family therapy session.

Because of the large number of out-of-state students enrolled at Heritage Schools, Inc., students are required to call home collect or with a calling card. Parents are allowed to call into Heritage on the 800 number during the admission process only.

## **How should I send my adolescent's clothing and personal property?**

Belongings should be sent in boxes. There is not room to store suitcases at Heritage, and they will be shipped back to the parents/legal guardians. Students are provided a duffle bag to use when making home visits.

## **Can my adolescent bring their favorite toiletries?**

Heritage Schools, Inc. provides basic toiletries for all students. A student may furnish his/her own toiletries if they meet the guidelines as defined in the Clothing and Property Guidelines. A general rule to follow is, "If it isn't safe to eat or drink, it isn't allowed."

## **Do I need to send towels and washclothes?**

Adolescents should bring at least 2 bath towels and 2 wash cloths with them.

## **Can my adolescent bring a regular razor?**

Only rotary electric razors are allowed for both boys and girls. Any regular razors will either be discarded or returned to the parents/legal guardians.

## **Can my adolescent bring a CD or tape player and CDs or tapes?**

Only radios are allowed. Any clock radio that also includes a CD or tape players will be returned to the parents/legal guardians.

## **Does my adolescent have access to cash?**

Any money brought to Heritage by your adolescent or sent for the adolescent's use is put into a parent account. Any money sent for medication co-pays is sent to Superior Pharmacy. Adolescents do not have access to the parent account. If your adolescent requests money from this account, the parents/legal guardians will be notified for approval.

## **Why do I have to put \$200 into a medication account?**

This money is for any insurance co-pays or to cover any other pharmaceutical needs of your adolescent.

## **How do I get my adolescent to Heritage?**

If you do not feel that you can safely transport your adolescent to Heritage, please contact the Admissions Office.

# HERITAGE SCHOOLS, INC.

Residential Treatment Center for Adolescents

## ◆ CLOTHING & PROPERTY GUIDELINES ◆

**Adolescents are not allowed to wear all dark clothing.** Please send the adolescent's belongings in boxes rather than suitcases (unless you bring your son/daughter and can take the suitcases back home with you). The boxes of clothing and belongings can be sent on the plane with the adolescent or shipped to the adolescent at 5600 Heritage School Drive, Provo, Utah 84604. Heritage will provide duffel bags for the adolescent to use when traveling on home visits. If adolescents arrive with luggage, the luggage will be shipped home to the parents or guardians.

- Adolescent's laundry is done by Heritage staff.
- All bedding and pillows are provided by Heritage (one special pillow and/or blanket from home is allowed).
- Adolescents should bring only washable clothing
- **Adolescents should bring at least two (2) bath towels and two (2) wash cloths.**
- Any one item brought by the adolescent should not exceed \$200 in value.
- Any cash brought by the adolescent will be credited to the adolescent's parent account.
- Any identification cards will be confiscated. Heritage provides ID for traveling.

### **SUGGESTED CLOTHING LIST (shirts and pants are the maximum allowed):**

#### **GIRLS**

15 shirts (t-shirts, tank tops with 2" straps, sweatshirts, and long-sleeve shirts) [spaghetti-strap shirts acceptable under or over another shirt]		<u>OPTIONAL</u>
10 pants (sweats, shorts—approx. 10" inseam, jeans, and pants)		1 bath robe
10 pair of underwear (no thongs)	6 bras	15 pair of socks
1-2 jacket/hooded sweatshirts	1 heavy coat	1 winter hat
1 pair of winter gloves	1 pair thermals	2 pair of pajamas (or sleeping attire)
5 pair of shoes (include boots)	1 one-piece bathing suit	1 pair nylons

#### **BOYS**

15 shirts (polo shirts with collars, t-shirts, tank tops, sweatshirts, sweaters) <b>[required to wear shirts with collars to school and off-campus activities]</b>		<u>OPTIONAL</u>
10 pants (sweats, shorts, jeans, and pants)		1 bath robe
10 pair of underwear	15 pair socks (no white knee-length socks)	1 athletic supporter
1-2 jacket/hooded sweatshirts	1 winter hat	1 set dress clothes (no suits)
1 pair of swim trunks	1 pair thermals	1 heavy coat
5 pair of shoes (should include boots)	1 pair winter gloves	2 pair pajamas (or sleeping attire)

### **ACCEPTABLE PROPERTY:**

Clock-radio (no CD or tape player included), curling iron, blow dryer, hot rollers, electric shaver, 3 to 5 stuffed animals or dolls, yarn for crocheting (hooks are provided), astringents/liquid and facial cleansers (will need to be checked by our nursing staff), musical instruments (with a signed waiver).

**UNACCEPTABLE PROPERTY** (This list is not all inclusive and is subject to change without warning. These items will be sent back to parents/legal guardians or destroyed):

drugs and medication (supplies brought at admit will be kept by Nursing), alcohol, mouthwash, electric toothbrush, nail polish remover (perfume is allowed); anything aerosol (hair spray, deodorant, mousse, etc.); baby oil, hair color or hair removal products, backpacks, luggage, and purses; black pens, non-water based markers, paint of any kind; cassette/CD players, stereos, MP3 players, game units, computers, cameras, TVs, phones/pagers, videos/DVDs; chemicals of any kind; cigarettes, coffee, caffeine, tea, seeds w/shells; glass (frames, mirrors-including compacts, ceramic mugs); gum (blow pops included); large hoop earrings; identification (credit cards, phones, drivers licenses, etc.); money; inappropriate magazines, novels, calendars (nothing pornographic or written by Stephen King, Dean Koontz, Cromwell, etc.); Satanic material of any kind; matches/lighters; pins, needles (knitting needles and metal crochet hooks), sewing kits; fingernail clippers, Q-tips, makeup sharpeners, tweezers with pointed edge; weapons or sharp objects, tools, keys, or rocks; blades/blade razors; no clothing ripped or cutoff, short shorts (can have knee length), oversized clothing; no suggestive T-shirts, tank tops (boys may wear for sports), midriff shirts, low-cut or backless shirts; bandanas, cowboy boots, army boots, steel-toed shoes, shoes with heels/soles higher than 3 inches, sports (pro/college) emblems clothing/hats, nothing gang-related (**no North-, South-, East-, or West-side designations**), no "Famous" brand or "SRH" logo clothing, no "Dickies" brand clothing, nothing with rainbow logos (including jewelry) or skulls; shoe polish (neither liquid nor solid); waterproofing material. **Please do not send or bring food or snacks with your son/daughter at admit. Treats may be sent at Christmas or Chanukah, Valentine's Day, Easter, and for birthdays. Due to safety and health restrictions, please do not send any home-made food items. Questions? Consult your Family Services Representative (801-226-4607 (girls)/4634 (boys).**

**HERITAGE SCHOOLS, INC.**  
Residential Treatment Center for Adolescents  
**g DRESS & HAIR CODE g**

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General Guidelines: While they are enrolled at Heritage, clothing or hairstyles should not draw undue attention or identify the adolescents as belonging to any subculture or affiliation with a negative lifestyle [i.e. satanic, cigarettes, beer, alcohol etc.].

Foot Wear: Cowboy boots, army boots, steel-toed boots, or shoes with more than eight eyelets are not allowed. Winter boots may be worn outside when snow is present. Open-toed shoes, such as thongs or sandals, are acceptable if the weather indicates, but may not be worn during school, physical activities, or in the cafeteria. High heels are not to be worn to school and may only be worn for special occasions such as dances, graduation, etc. Shoes must be worn any time an adolescent is outside.

Pants, Shorts, Sweats, and Skirts: All pants must be free of holes, frayed edges, markings and must be no more than two inches larger than the adolescent's pant size. Shorts are only to be worn between April 1 - October 1, weather permitting. We prefer that adolescents do not wear sweats to school, and skirt lengths cannot be higher than four inches above the knee.

Shirts, T-shirts, Tank Tops, Sweatshirts, and Bodysuits: Shirts must be modest and cover the stomach. No concert t-shirts are allowed, and flannel shirts may only be worn if done so appropriately. Tank tops (straps must be two inches wide) may not be worn to school or off-campus unless for an appropriate physical activity. Spandex clothing may not be worn as outer wear except during an activity such as aerobics. Boys are allowed to take off their shirts only in the playing areas during participation in sporting activities.

Headgear: Bandanas of any kind are not allowed. Hats are allowed but must be worn appropriately. The caps or hats that are designed for winter may only be worn during the winter months and when weather indicates the need.

Gloves: Gloves may only be worn if the weather indicates a need, and the gloves must cover the entire hand, including the fingers.

Miscellaneous: Male adolescents may not wear earrings. Adolescents may not wear more than four small items of jewelry at the same time. Sunglasses are to be worn outside only and not to school. Underwear must always be worn, including bras for female clients. Underwear, such as boxers or thermals, may not be worn as outer wear.

Exceptions: At times, Heritage staff may feel there is a need for an exception to a policy in the Dress & Hair Code. Any exception could be requested through the "Request for Special Activity/Privilege" form. Please note that exceptions are for individual adolescents and specific needs. If any staff feels that what the adolescent is wearing is inappropriate, they have the right to ask them to change.

Trading: Trading clothes is not allowed!! It is considered stealing. Students found giving away, throwing away, or destroying clothing or possessing another adolescent's clothing or belongings will have a suspension of all privileges for a 24-hour period and be reviewed as to the need for additional supervision.

Sleeping and/or Bed Dress Standards: Adolescents must wear one of the following to bed: pajamas, nightgown, nightshirt and underwear, t-shirt and boxers, thermals. Adolescent's may not sleep in regular clothing which would include sweats or the previous day's clothing.

Hair Guidelines: Male adolescents are not allowed to have their heads shaved, wear their hair in a ponytail, have their hair longer than two inches past the hairline in the back or past the middle of the ear on the sides, or have hair hanging over their eyes in the front. Hairstyles of male and female adolescents may not draw undue attention to the adolescent.

# CONTRABAND AND LOCK-UP DESIGNATIONS

Revised 9/08

This contraband list is not inclusive. Contraband is any item deemed inappropriate, suggestive, dangerous or poses any type of risk to other clients or staff at any time by the Safety Officer or Campus Supervisor.

## CONTRABAND

- all drugs/medicines/medical supplies (i.e. ace bandages, metal splints, etc.)
- blade razors
- tools or keys
- glass (except what is allowed in lock-up)
- weapons (or replicas; i.e. toy guns)/sharp objects
- personal pins/needles - any type
- personal sewing kits
- alcohol
- cigarettes
- matches/lighters
- aerosols of any type
- chemicals of any sort
- paints - all kinds
- markers - non-water based
- black ink pens
- stamps
- sunflower seeds (any seeds with shells)
- gum
- personal food
- coffee/caffeine drinks
- cassette tapes/CD's (staff can bring in with PS approval - may not be left on campus)
- personal CD players
- MP3 players
- walkmans with cassette players
- phones/pagers
- Nintendo DS Gameboy (no communication devices of any kind)
- cameras
- videos/DVD's
- money
- identification
- credit cards
- extra bedding (may have one personal blanket and pillow)
- satanic materials
- 5- or 6-pointed items (stars, crowns, etc.) except religious symbols
- mirrors - any type
- music magazines
- inappropriate magazines/books
- pornographic material
- knitting needles
- metal crochet hooks
- pro-sports emblem clothing/hats
- anything designated "north-side" or "south-side" (includes "Southpole" clothing)
- "Famous" brand clothing
- "SRH" logo

- concert t-shirts
- skulls
- steel-toed shoes
- frayed/ripped clothing
- any item that represents a sub-culture
- clothing with "spaghetti straps"
- thong underwear
- rainbow clothing/jewelry
- jelly bracelets and rings
- short shorts (4 inches above the knee)
- shoes higher than 3 inches
- make-up sharpeners (may check out from PS)
- fingernail clippers (may check out from Nursing)
- electric toothbrushes
- dark-colored nail polish
- baby oil
- shoe polish
- Sun-in or any hair coloring
- Nair or any hair removal products
- mouthwash
- large hoop earrings (must be less than two fingers in diameter)
- backpacks/luggage/purses (clear backpacks)
- amenities that aren't supplied by the school need approval of Safety Officer

## LOCK-UP

- scissors - approved type
- cleaning supplies
- glue
- water-base markers
- ink pens
- leather sealers (non-aerosol)
- twine, hemp string
- nail polish
- nail polish remover (individual use packets only - anything else is contraband)
- hair spray (non-aerosol)
- curling irons
- blow dryers
- astringents
- skin cleaner - non astringent
- all amenities from nursing
- glass cologne bottles
- electric razors

◆ **No staff--including therapists--may approve items that are contraband**

◆ **No staff can alter this list without the approval of the Residential Director and the Safety Officer**

## HERITAGE SCHOOLS, INC. MEDICATION PROCESS

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1. The Psychiatrist is the only one who prescribes medications for psychiatric diagnosis while at Heritage. On occasion our Family Nurse Practitioner may write an order, but this will occur only when there has been a conference between the Psychiatrist and the FNP
2. All new orders for medication for psychiatric diagnosis require your approval. All medications being discontinued require your permission. On occasion, medications are put on "hold" for a period of time to assess need. This means the medication has not been discontinued, but it will not be given. This will also require your approval.
3. Nurses transcribe the orders from your child's individual medical chart to their individual Medication Administration Record.
4. You will receive a telephone call informing you that an order has been written, and you will be asked to give your approval. You, of course, may deny permission or request to speak to the Therapist.
5. The nurses will give you all the information they have at the time of the call.
6. We will ask for "therapeutic range" for medication. This means that the dosage of the particular medication you are giving approval for may be increased or decreased without calling you first. This gives us the ability to achieve maximum effectiveness for your child in a timely manner. If you give approval for "therapeutic range," you will receive a letter informing you of the change. This will affect only the specific medication for which you have given this type of approval.
7. When verbal approval is given for a medication, you will receive a letter asking for your signed approval. Written information about the medication and its side effects will accompany the letter. Your child will also be given this information.
8. Once approved, the order to start, stop, or hold will be instituted by the nurses.
9. Certain referring agencies require written approval before a medication can be started. If this is the case, we ask that you fax, e-mail, or overnight approval as soon as possible.

Prior to admission we will call you or the facility your child is leaving to confirm medication. Then, upon admission, your child's prescribed medications will be continued if they are in a pharmacy-labeled container that does not have hand-written changes. We will also accept current prescriptions. We may call you and/or the facility your child is coming from with questions or concerns in order to not have an interruption in medication administration.

As part of medication management your child will be weighed with blood pressure and pulse checked monthly. The nurses will monitor for side effects, as will the doctors. Appropriate laboratory testing will be performed. The initial laboratory tests performed at the time of admission will be billed to Heritage. Following this, your insurance will be billed. We have two laboratories that we use, and we will send the samples to the appropriate lab. If there is no insurance, you will be billed. Laboratory work is an essential part of safe and effective management.

Rosemary Rivest, R.N.  
Nursing Director

**S A M P L E**

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

RE: **Medication Changes**

Having given verbal approval to \_\_\_\_\_, I  
\_\_\_\_\_ (parent/guardian/case worker)  
give written approval to Dr. \_\_\_\_\_ for the following  
medication changes for my child \_\_\_\_\_.

**Changes made:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**New Medication**

I do \_\_\_\_\_ do not \_\_\_\_\_ give approval for the dosage of the medication to be increased or decreased (therapeutic range) without further contact. I understand that if I do give approval for “therapeutic range” I will receive notice in writing of any change in dosage.

I have read the enclosed general information about the process and side effects of the medication which will be started, and I understand the information.

**Hold Orders**

If the request was to put the medication on “hold,” I understand that this means the medication will not be given (in order to assess need) although it has not been discontinued. It may or may not be restarted by the physician. I understand that I will be notified and asked to approve restarting or stopping the medication

Parent/Guardian/Case Worker Signature: \_\_\_\_\_

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

Please call **810-226-4681** with medication questions. **Please mail or fax this form within 24 hours. Thank you!**

Heritage Nursing Department  
Rosemary Rivest, Director of Nursing  
[rosemary.rivest@heritagertc.org](mailto:rosemary.rivest@heritagertc.org)  
Fax: 801-705-5362

**SAMPLE**

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

RE: **Dosage Changes**

This letter is to inform you that \_\_\_\_\_ (client's name) **medication(s) dosage(s) has/have been changed** as per physician's order. This will only involve the medications with the **therapeutic range or blanket approvals** from the parent/guardian/case worker.

**Changes made:** Increase/decrease \_\_\_\_\_ to \_\_\_\_\_

By mouth \_\_\_\_\_

Previous dosage was \_\_\_\_\_

Reason for change \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you feel you would like more information specific to your child, contact his/her therapist.

Thank you.

Heritage Nursing Department  
801-226-4625

## HERITAGE SCHOOLS, INC.

# g MEDICATIONS USED AT HERITAGE WITH THEIR SIDE EFFECTS g

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The following is information about the medications prescribed by our doctors to include the reason for their use and the side effects. The list of side effects is not all-inclusive. Side effects, such as nausea and drowsiness, should go away once the body has adjusted to the medication. All medications have side effects, but each individual responds to medication differently. The nurses and doctors will monitor your child for side effects. If you have more specific questions regarding medication than your therapist is able to explain, the doctors are available by appointment; and Nursing, x259, can facilitate a phone call, if needed.

### **\*medications most often prescribed by our doctors**

#### **I \*SEROQUEL, \*ABILIFY, \*GEODON, RISPERDAL, ZYPREXA, CLOZARIL SYMBYAX (rarely prescribed: Haldol, Thorazine, Mellaril)**

This group of medication falls under the category of anti-psychotic medications used to treat Schizophrenia and thought disorders. We most often use them to help our clients think more clearly and logically and to stabilize mood. They also help alleviate feelings of wanting to withdraw from family and friends and auditory and visual hallucinations. They are useful for stopping/decreasing self-harmful behaviors, thoughts of hurting others, explosive behaviors, irritability, and unusual suspiciousness. Seroquel has recently been approved for use in Bipolar Disorder. The use of these medications does not always indicate Schizophrenia.

#### Side Effects:

1. We will monitor weight closely as this is a concern.
2. We will monitor blood sugar as there is an association with diabetes.
3. Seroquel - eye exams twice a year to monitor for cataracts; thyroid studies twice a year
4. Risperdal and Zyprexa - Prolactin levels monitored yearly; close monitoring of weight
5. Clozaril - can lower white blood cell count; monitor weekly, then bi-weekly
6. We will monitor for involuntary muscle movement and do a painless test twice a year for a side effect called "extrapyramidal" symptoms. Neuroleptic Malignant Syndrome is also a concern, but this occurs primarily with the older medications such as Haldol and Thorazine.
7. Other effects: sensitivity to sun and heat, poor or increased appetite, rash, cough, dizziness, drowsiness, constipation, nausea, vomiting, restlessness, sedation, hypertension, tachycardia.

#### **II \*TRILEPTAL, \*TEGRETOL, TOPAMAX, NEURONTIN, DEPAKOTE**

This group of medication falls under the category of anti-convulsant medications or medications used for seizure disorders. They are often prescribed for Bipolar Disorder and are very effective in stabilizing mood. They are helpful in treating symptoms such as severe mood swings, depression, aggression, decreasing periods of extremes of emotion.

#### Side Effects:

1. We prefer to not use Depakote because of its effects on the liver and pancreas. We will monitor lab tests closely.
2. Tegretol can affect white blood cell count.
3. Neurontin can impact the kidneys and potassium levels which can affect the heart.
4. Topamax can seriously affect the body's ability to regulate temperature; it can affect sleep and cause mental dullness.
5. Other effects: headache, drowsiness, blurred vision, loss of appetite/increased appetite, dizziness, nausea, abdominal pain, confusion.

**III \*ZOLOFT, \*LEXAPRO, \*CELEXA, \*PROZAC, \*WELLBUTRIN, CYMBALTA, EFFEXOR, PAXIL, REMERON, \*TRAZADONE**

These medications are used to treat depression: feelings such as sadness, low self-worth, emptiness, hopelessness; feelings that interfere with the ability to have friendships or family relationships, to participate and do well in school, or to enjoy things that are normally enjoyable. Prozac and Paxil are also used to treat anxiety or panic disorders and Obsessive Compulsive Disorder. Trazadone and Remeron are used only to treat poor sleep.

Side Effects:

1. We will watch closely for signs of increasing depression.
2. Remeron - weight loss
3. Prozac - weight loss due to loss of appetite
4. Other effects: dry mouth, nausea, drowsiness, dizziness, heartburn, increased sweating/saliva, blurred vision, runny nose, diarrhea, constipation, vertigo, increased/decreased appetite, increased urination.  
Not so common: increased blood pressure, urinary tract infections.

**IV \*ADDERALL, \*RITALIN (CONCERTA, METHYLPHENIDATE), DEXEDRINE, STRATTERA**

These medications are used to treat Attention Deficit/Hyperactivity Disorder—symptoms such as hyperactivity, poor concentration, and impulsivity. They help to increase the ability to stop and think before acting, to complete tasks at school and at home, and to interact appropriately with others.

Side Effects:

1. Adderall and Ritalin - restlessness, irritability, headache, talkativeness, dry mouth, constipation, sleep disturbance, increased/decreased appetite, increased heart rate, nervousness, difficulty with urination, depression.
2. Strattera - headache, difficulty getting to sleep, abdominal pain, constipation, nausea, vomiting, low energy, itchiness, increased sweating, increased heart rate and blood pressure

**V \*LITHIUM CARBONATE (\*ESKALITH, LITHOBID)**

This medication is used to treat Bipolar Disorder. It helps make mood more stable, lessening rapid cycling of mood—very happy and excited vs. irritability, rapid speech, increased movement, decreased need for sleep. It is helpful in lessening extremes of behavioral-like anger outbursts, explosive/aggressive behavior, very sad and depressed feelings. It continues to lead in effective treatment of this disorder.

Side Effects:

1. drowsiness, increased thirst, dry mouth, increased urination, incontinence, diarrhea, weight gain, trembling of the hands, fainting, slurred speech, fever, bad coordination, muscle weakness, hypotension,
2. Lithium - can impact the thyroid and the kidneys

**We do realize that all medications have side effects. Our doctors are very cognizant of this and use great care and caution in prescribing medication to the youth entrusted to our care.**

# POLIO VACCINES

## Why get vaccinated?

Polio is a disease. It can paralyze (make arms and legs unable to move) or even cause death. Polio vaccine prevents polio. Before polio vaccine, thousands of our children got polio every year. Polio vaccine is helping to rid the world of polio. When that happens, no one will ever get polio again, and we will not need polio vaccine.

## There are two (2) kinds of polio vaccine.

IPV - Inactivated Polio Vaccine (a shot)  
OPV - Oral Polio Vaccine (drops by mouth)  
Both vaccines work well.

## Which vaccines should my child get and when?

Most children should get four (4) doses of polio vaccine at ages: 2 months, 4 months, 12-18 months, and 4-6 years. You can choose to get any of these three (3) acceptable schedules:

- 2 shots of IPV, then 2 doses of OPV drops
- 4 shots of IPV
- 4 doses of OPV drops (the 3<sup>rd</sup> dose can be given as early as 6 months)

The Centers for Disease Control and Prevention (CDC) recommend 2 shots of IPV, then 2 doses of OPV drops for most children because this has the advantages of both vaccines.

## What are the risks and advantages of each choice?

Almost all children who complete any of the three schedules will be protected from polio. As with any medicine, vaccines carry a small risk of serious harm, such as a severe allergic reaction (hives, difficulty breathing, shock) or even death. On rare occasions, OPV can cause polio because it contains live, but weakened, virus. IPV cannot cause polio because it does not contain live virus. Most people have no problems from either IPV or OPV.

### 2 Shots/2 Drops (2 IPV, then 2 OPV)

For most children, the choice using both shots and drops gives the benefits of both vaccines:

- Less risk of getting polio than from all OPV
- Only 2 shots
- Protects the community from polio outbreaks better than all IPV

### All shots (4 IPV)

#### Risks:

- Mild soreness of arm or leg
- Not as good as OPV for protecting the community from polio outbreaks

#### Advantages:

- Does not cause polio

### All Drops (4 OPV)

#### Risks:

- Causes about eight cases of polio each year (15 million doses given each year in U.S.). This can happen to children who get OPV or people who are in close contact with them. The risk of polio is higher with the first dose than with later doses.

#### Advantages:

- No shots
- Can best protect the community from polio outbreaks

## **Some children should get only shots, and some should get only drops.**

Do NOT use OPV drops if your child (you or anyone who takes care of your child):

- Cannot fight infections
- Is taking long-term steroids
- Has cancer
- Has AIDS or HIV infection
- Never had polio vaccine

Do NOT use IPV shots if your child is allergic to the drugs neomycin, streptomycin, or polymycin B

## **Some children should not get these vaccines or should wait.**

Tell your doctor or nurse if your child:

- Ever had a serious reaction after getting polio vaccine
- Now has a moderate or severe illness

## **What if there is a serious reaction?**

What should I look for?

- Hives
- Difficulty breathing
- Shock

What should I do?

- Call a doctor or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccine was given.
- Ask your doctor, nurse, or health department or file a Vaccine Adverse Event Report (VAERS) form, or call VAERS yourself at 1-800-822-7927

## **The National Vaccine Injury Compensation Program**

The National Vaccine Injury Compensation Program is a federal program that gives payment for serious vaccine injuries. For details call 1-800-338-2382.

## **How can I learn more?**

- Ask your doctor or nurse. He/she can give you the vaccine package insert or suggest other sources of information
- Call your local or state health department. Contact the Centers for Disease Control and Prevention.
  - English 1-800-232-7466
  - Spanish 1-800-232-0233
  - Visit the CDC web site at <http://www.cdc.gov/nip>

# MEASLES, MUMPS, AND RUBELLA VACCINE (MMR)

## Why get vaccinated?

Measles, mumps, and rubella (German measles) are serious diseases. They spread when germs pass from an infected person to the nose or throat of others.

<b>Measles causes:</b> <ul style="list-style-type: none"><li>• rash</li><li>• cough</li><li>• fever</li></ul> It can lead to: <ul style="list-style-type: none"><li>• ear infection</li><li>• pneumonia</li><li>• diarrhea</li><li>• seizures (jerking and staring spells)</li><li>• brain damage</li><li>• death</li></ul>	<b>Mumps causes:</b> <ul style="list-style-type: none"><li>• fever</li><li>• headache</li><li>• swollen glands under the jaw</li></ul> It can lead to: <ul style="list-style-type: none"><li>• hearing loss</li><li>• meningitis (infection of brain and spinal cord coverings)</li><li>• males can have painful, swollen testicles</li></ul>	<b>Rubella causes:</b> <ul style="list-style-type: none"><li>• rash</li><li>• mild fever</li><li>• swollen glands</li><li>• arthritis (mostly in women)</li></ul> <ul style="list-style-type: none"><li>• Pregnant women can lose their babies</li><li>• Babies can be born with birth defects such as:<ul style="list-style-type: none"><li>– deafness</li><li>– blindness</li><li>– heart disease</li><li>– brain damage</li><li>– other serious problems</li></ul></li></ul>
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## Benefits of the vaccines

Vaccination is the best way to protect against measles. Because most children get the MMR vaccines, there are now fewer cases of these diseases. There would be many more cases if we stopped vaccinating people.

## MMR Schedule

Most children should have a total of two MMR vaccines. They should have an MMR at:

- 12-15 months of age
- 4-6 years of age or before middle school or junior high school

Other vaccines may be given at the same time as the MMR.

## Who should get the MMR vaccine?

Most doctors recommend that almost all young children get MMR vaccine. But there are some cautions. Tell your doctor or nurse if the person getting the vaccine is less able to fight serious infections because of:

- a disease he/she was born with
- treatment with drugs such as long-term steroids
- any kind of cancer
- cancer treatment with x-rays or drugs

Also:

- People with AIDS or HIV infection usually should get MMR vaccine
- Pregnant women should wait until after pregnancy for MMR vaccine
- People with a serious allergy to eggs or the drug neomycin should tell the doctor or nurse. If you are not sure, ask the doctor or nurse.

Tell your doctor or nurse if the person getting the vaccine:

- ever had a serious allergic reaction or other problem with MMR vaccine
- now has a moderate or severe illness
- has ever had a seizure
- has a parent, brother, or sister who has had seizures
- has gotten immune globulin or other blood products (such as a transfusion) during the past several months

## What are the risks from MMR vaccine?

As with any medicine, there are very small risks that serious problems, even death, could occur after getting a vaccine. The risks from the vaccine are much smaller than the risks from the diseases if people stopped using the vaccine. Almost all people who get MMR have no problems from it.

**Mild or Moderate Problems:**

- Soon after the vaccination, there may be soreness, redness, or swelling where the shot was given
- 1-2 weeks after the first dose, there may be:
  - rash (5-15 out of every 100 doses).
  - fever of 103° or higher (5-15 out of every 100 doses). This usually lasts 1-2 days.
  - swelling of the glands in the cheeks, neck, or under the jaw
  - a seizure (jerking and staring spell) usually caused by fever (rare)
- 1-3 weeks after the first dose, there may be:
  - pain, stiffness, or swelling in one or more joints lasting up to 3 days (1 out of every 100 doses in children; up to 40 out of every 100 doses in young women). Rarely, pain or stiffness which lasts a month or longer (may come and go). This is common in young and adult women.

**Severe Problems:**

These problems happen very rarely:

- serious allergic reaction
- low number of platelets (a type of blood cell) that can lead to bleeding problems (very temporary)
- long seizures, decreased consciousness, or coma

Problems following MMR are much less common after the second dose.

**What to do if there is a serious reaction?**

- Call a doctor or get the person to a doctor right away.
- Write down what happened and the date and time it happened.
- Ask your doctor, nurse, or health department to file a Vaccine Adverse Event Report (VAERS) form or call VAERS yourself at 1-800-338-7967.

**The National Vaccine Injury Compensation Program**

The National Vaccine Injury compensation Program is a federal program that gives payment for serious vaccine injuries. For detail call 1-800-338-2382 or visit the program's web site at <http://www.hrsa.gov/bhpr/vicp>

**How can I learn more?**

- Ask your doctor or nurse. He/she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department. Contact the Centers for disease Control & Prevention:
- English 1-800-232-2522 or 1-888-443-7232
- Spanish 1-800-232-0233
- Visit the National Immunization Program's web site at <http://www.cdc.gov/nip>

# TETANUS AND DIPHTHERIA VACCINE (Td)

## Why get vaccinated?

Tetanus (lockjaw) and diphtheria are serious diseases. Tetanus is caused by a germ that enters the body through a cut or wound. Diphtheria spreads when germs pass from an infected person to the nose or throat of others.

<p>Tetanus causes serious, painful spasms of all muscles</p> <p>It can lead to:</p> <ul style="list-style-type: none"><li>• “locking” of the jaw so the patient cannot open his or her mouth or swallow</li><li>• death</li></ul>	<p>Diphtheria causes a thick coating in the nose, throat, or airway</p> <p>It can lead to:</p> <ul style="list-style-type: none"><li>• breathing problems</li><li>• heart failure</li><li>• paralysis</li><li>• death</li></ul>
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## Benefits of the vaccines?

Vaccination is the best way to protect against tetanus and diphtheria. Because of vaccination, there are many fewer cases of these diseases. Cases are rare in children because most get DTP (Diphtheria, Tetanus, and Pertussis), DtaP (Diphtheria, Tetanus, and acellular Pertussis), or DT (Diphtheria and Tetanus) vaccines. There would be many more cases if we stopped vaccinating people.

## When should you get Td vaccine?

Td is made for people seven years of age and older. People who have not gotten at least three doses of any tetanus and diphtheria vaccine (DTP, DtaP, or DT) during their lifetime should do so using Td. After a person gets the third dose, a Td dose is needed every 10 years all through life. Other vaccines may be given at the same time as Td.

Tell your doctor or nurse if the person getting the vaccine:

- ever had a serious allergic reaction or other problem with Td, or any other tetanus and diphtheria vaccine (DTP, DtaP, DT)
- now has a moderate or severe illness
- is pregnant

If you are not sure, ask your doctor or nurse.

## What are the risks from Td vaccine?

As with any medicine, there are very small risks that serious problems, even death, could occur after getting a vaccine. The risks from the vaccine are much smaller than the risks from the diseases if people stopped using the vaccine. Almost all people who get Td have no problems from it.

### Mild Problems:

If these problems occur, they usually start within hours to a day or two after vaccination. They may last 1-2 days:

- soreness, redness, or swelling where the shot was given

### Severe Problems:

These problems happen very rarely:

- serious allergic reaction
- deep aching pain and muscle wasting in upper arm(s). This starts 2 days to 4 weeks after the shot and may last many months

## What to do if there is a serious reaction?

- Call a doctor or get the person to a doctor right away.
- Write down what happened and the date and time it happened.
- Ask your doctor, nurse, or health department to file a Vaccine Adverse Event Report (VAERS) form or call VAERS yourself at 1-800-338-7967.

## The National Vaccine Injury Compensation Program

The National Vaccine Injury compensation Program is a federal program that gives payment for serious

vaccine injuries. For detail call 1-800-338-2382 or visit the program's web site at <http://www.hrsa.gov/bhpr/vicp>

### **How can I learn more?**

- Ask your doctor or nurse. He/she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department. Contact the Centers for disease Control & Prevention:
- English 1-800-232-2522 or 1-888-443-7232
- Spanish 1-800-232-0233
- Visit the National Immunization Program's web site at <http://www.cdc.gov/nip>

- The second dose must be given at least one (1) month after the first dose.
- The third dose must be given at least two (2) months after the second dose and at least four (4) months after the first.
- The third dose should **not** be given to infants younger than six (6) months of age.

Adolescents 11 to 15 years of age may need only two (2) doses of hepatitis B vaccine, separated by 4-6 months.

Ask your health care provider for details. Hepatitis B vaccine may be given at the same time as other vaccines.

### **Some people should not get hepatitis B vaccine or should wait**

People should not get hepatitis B vaccine if they have ever had a life-threatening allergic reaction to **baker's yeast** (the kind used for making bread) or to **a previous dose of hepatitis B vaccine**. People who are moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting hepatitis B vaccine. Ask your doctor or nurse for more information.

### **What are the risks from hepatitis B vaccine?**

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The risk of hepatitis B vaccine causing serious harm, or death, is extremely small. Getting hepatitis B vaccine is much safer than getting hepatitis B disease. Most people who get hepatitis B vaccine do not have any problems with it.

#### **Mild Problems:**

- soreness where the shot was given, lasting a day or two (up to one out of 11 children and adolescents, and about one out of four adults)
- mild to moderate fever (up to one out of 14 children and adolescents and one out of 100 adults)

#### **Severe Problems:**

- serious allergic reaction (very rare)

### **What if there is a moderate or severe reaction?**

#### **What should I look for?**

Any unusual condition, such as a serious allergic reaction, high fever or behavior changes. Signs of a serious allergic reaction can include difficulty breathing, hoarseness, or wheezing, hives, paleness, weakness, a fast heart beat or dizziness. If such a reaction were to occur, it would be within a few minutes to a few hours after the shot.

#### **What should I do?**

- call a doctor or get the person to a doctor right away
- tell your doctor what happened, the date and time it happened, and when the vaccine was given
- ask your doctor, nurse, or health department to file a Vaccine Adverse event Reporting System (VAERS) form, or call VAERS yourself at 1-800-822-7967.

### **The National Vaccine Injury Compensation Program**

In the rare event that you or your child has a serious reaction to a vaccine, a federal program has been created to help you pay for the care of those who have been harmed. For details about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit the program's web site at <http://www.hrsa.gov/bhpr/vicp>

### **How can I learn more?**

- Ask your doctor or nurse. He/she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department. Contact the Centers for disease Control & Prevention:
- English 1-800-232-2522 or 1-888-443-7232
- Spanish 1-800-232-0233
- Visit the National Immunization Program's web site at <http://www.cdc.gov/nip> or CDC's Hepatitis Branch web site at <http://www.cdc.gov/ncidod/diseases/hepatitis/>

# HEPATITIS B VACCINE

## Why get vaccinated?

**Hepatitis B is a serious disease.** The hepatitis B virus can cause short-term (acute) illness that leads to:

- loss of appetite
- tiredness
- diarrhea and vomiting
- jaundice (yellow skin or eyes)
- pain in muscles, joints, and stomach

It can also cause long-term (chronic) illness that leads to:

- liver damage (cirrhosis)
- liver cancer
- death

About 1.25 million people in the US have chronic hepatitis B virus infection.

Each year it is estimated that:

- 200,000 people, mostly young adults, get infected with hepatitis virus infection
- more than 11,000 people have to stay in the hospital because of hepatitis B
- 4,000 to 5,000 people die from chronic hepatitis B

**Hepatitis B vaccine can prevent hepatitis B.** It is the first anti-cancer vaccine because it can prevent a form of liver cancer.

## How is hepatitis B virus spread?

Hepatitis B virus is spread through contact with the blood and body fluids of an infected person. A person can get infected in several ways, such as:

- during birth when the virus passes from an infected mother to her baby
- by having sex with an infected person
- by injecting illegal drugs
- by being stuck with a used needle on the job
- by sharing personal items, such as a razor or toothbrush, with an infected person

People can get hepatitis B virus infection without knowing how they got it. About one third of hepatitis B cases in the United States have an unknown source.

## Who should get a hepatitis B vaccine and when?

- everyone 18 years of age and younger
- adults over 18 who are at risk

Adults at risk for hepatitis B virus infection include people who have more than one sex partner, men who have sex with other men, injection drug users, health care workers, and others who might be exposed to infected blood or body fluids. If you are not sure whether you are at risk, ask your doctor or nurse. **People should get three (3) doses of hepatitis B vaccine according to the following schedule.** *If you miss a dose or get behind schedule, get the next dose as soon as you can. There is no need to start over.*

Hepatitis B Vaccination Schedule		WHO?		
		Infant whose mother is infected with hepatitis B virus	Infant whose mother is not infected with hepatitis B virus	Older child, adolescent, or adult
WHEN?	First Dose	Within 12 hours of birth	Birth - 2 months of age	Any time
	Second Dose	1-2 months of age	1-4 months of age (at least 1 month after first dose)	1-2 months after first dose
	Third Dose	6 months of age	6-18 months of age	4-6 months after first dose