

**REQUEST FOR CONSCIENTIOUS OBJECTION FROM
VACCINE PREVENTABLE DISEASES POLICY
VARICELLA**

As a patient safety and health care personnel safety initiative, Methodist Healthcare System is requiring Varicella vaccinations. This is similar to other vaccinations that Methodist Healthcare System requires as a condition of employment. Certain vaccinations have been recommended by the Centers for Disease Control for health care personnel and have been shown to be effective in protecting patients from these illnesses and complications related to them. Increasingly, national professional, health care and infection prevention organizations are recommending that health care organizations require certain vaccinations to protect the health and safety of patients, employees, patient and employee family members, and the community as a whole from these diseases.

NAME OF INDIVIDUAL REQUESTING CONSCIENTIOUS OBJECTION:

Methodist Healthcare System will recognize exemptions to the vaccination policy for conscientious objections. The individual identified above is requesting to be exempt from **Varicella** vaccinations for conscientious objections for the following reasons listed below:

I understand I am required to wear Personal Protective Equipment (PPE) at all times during patient care.

DHP Signature _____ Date _____

DHP Name (print) _____

