



OFFICE VISITS - IMMUNIZATION SCHEDULE

<u>2 Days:</u>	Hepatitis B #1 (optional)	<u>15 Months:</u>	Varicella (chickenpox) #1
<u>2 Weeks:</u>	Hepatitis B #1		Hepatitis A #1
<u>4 Weeks:</u>	No immunizations	<u>18 Months:</u>	DTaP #4
<u>*6 Weeks:</u>	Pentacel #1 (DTaP/IPV/ HIB)		HIB #4
	Rotavirus #1 (oral)	<u>2 Years:</u>	Hepatitis A #2
<u>2 Months:</u>	PCV-15 #1 (Pneumococcal)		iScreen
<u>3 Months:</u>	Rotavirus #2 (oral)	<u>2½ Years:</u>	Seasonal flu vaccine only
	Hepatitis B #2	<u>3 Years:</u>	iScreen
		<u>*4 Years:</u>	ProQuad (MMR #2/Varicella #2) Quadracel (DTaP #5/IPV #4) iScreen
<u>4 Months:</u>	Pentacel #2		
<u>5 Months:</u>	PCV-15 #2	<u>5 Years:</u>	Vision/Hearing Screen
	Rotavirus #3 (oral)		
<u>* 6 Months:</u>	Pentacel #3	<u>6-10 Years:</u>	Annual physical exam, flu vaccine
	Hepatitis B #3		
	Flu Vaccine #1 (2 nd dose 1 month after 1 st dose)	<u>11 Years:</u>	MCV4 #1 (Meningococcal) TdaP
<u>9 Months:</u>	PCV-15 #3	<u>12-15 Years:</u>	HPV-9 #1 (1 of 2)
	Hemoglobin		
<u>*12 Months:</u> <u>(must be over 1)</u>	PCV-15 #4	<u>*16 Years:</u> <u>(must be over 16 years old)</u>	MCV4 #2 Men B #1 (Meningococcal B)
	MMR #1		
	iScreen (Digital Eye Test)	<u>17-21 Years:</u>	Men B #2 TdaP

SEASONAL FLU VACCINES ARE ALSO AVAILABLE FOR PARENTS

Updated February 2023