

Recommended Pediatric/ Adolescent Immunization Schedule Pediatric Lead and Hemoglobin Screening

	Birth	2 mo	4	6	12	15	18	2	4-6	11-
Dtap,IPV,Hib(Pentacel)		mo.	mo.	mo.	mo.	mo.	mo.	yr	yr	12 yr
(6 weeks thru 4 years of age)										
DTaP (Tripedia) ages 6 weeks thru 6 years		31 9 5					1'.		X	
IPV Booster needed even if 4 doses given were given using Pentacel as an infant									X	
Hepatitis B(must be at least 6 months old for dose # 3)	X	X	- 7	X						
Prevnar 13 (Pneumococcal conjugate) as of 4-7-2010 Booster with a 5 th dose of Prevnar 13 ages 2 thru 4 if initial series was completed with Prevnar 7		X	X	X		X		***		
Rota Teq (Rotavirus) Do not start series after 15 weeks of age Final dose must be given before 8 months of age		X	X	X						
MMR (*must be 12 months old*)					X		1,-4:-		X	in de
Varicella(*must be 12 months old*)					X				X	
Hepatitis A (*must be 12 months old*)				1	X		X			
Lead Screen			×		X			X	. 11	
Hemoglobin					X					
Tdap:one booster dose: ages 11 and older										X
Menactra (Meningococcal Conjugate) MCV4 Booster dose at age 16-18 if initial dose given at age 11-15	6									X
Gardasil (HPV) x 3doses (ages 9-26)										X
Influenza (6 mo-18 yrs)				X	X	X	X	X	X	X
Catch up immunizations per CDC recommendations										
Reviewed 4/14/14										