

Recommended Exam and Immunization Schedule

Birth (Hospital)	Exam, Newborn Screen (bloodspot and hearing), HepB
2-5 days	Exam, HepB (if not at hospital), 2 nd Newborn bloodspot screen
2-4 weeks	Exam
2 months	Exam, DTaP/Hib/IPV, PCV20, RV, HepB
4 months	Exam, DTaP/Hib/IPV, PCV20, RV
6 months	Exam, DTaP/Hib/IPV, PCV20, RV, HepB, Flu (in season)
9 months	Exam
12 months	Exam, MMR , Varicella , HepA , Hemoglobin, Lead and TB screens (if needed)
15 months	Exam, DTaP/Hib/IPV, PCV20
18 months	Exam, Autism screen
2 years	Exam, Autism screen, HepA , Lead and TB screens (if needed)
2.5 years	Exam
3 years	Exam, TB (if needed)
4 years	Exam, DTaP/IPV, MMR/Varicella, TB (if needed)
5-10 years	Exam, TB (if needed)
11 years	Exam, Tdap, MCV4, HPV, Varicella (if needed), TB (if needed)
12-15 years	Exam, HPV , Dyslipidemia screening (if needed), TB (if needed)
16 years	Exam, MCV4, MenB, Dyslipidemia screening (if needed), TB (if needed)
17-18 years	Exam, MenB , Dyslipidemia screening (if needed), TB (if needed)

Yearly well child visits and flu vaccines are recommended from 2-18 years.

For more information on visit recommendations, see:

http://brightfutures.aap.org/pdfs/AAP%20Bright%20Futures%20Periodicity%20Sched%20101107.pdf

For more information on vaccine schedules, see:

http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm#parents

For more information on vaccines, see:

http://www.cdc.gov/vaccines/pubs/vis/default.htm

Vaccines in bold above, by abbreviation:

DTaP - Diphtheria, Tetatus, acelluar Pertussis

HepA - Hepatitis A

HepB - Hepatitis B

Hib – Hemophilus influenza type B

HPV - Human Papilloma virus

IPV - Inactivated Polio

MenB - Meningococcal type-B

MCV4 – Meningococcal conjugate MMR – Measles, Mumps, Rubella

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PCV20 - Prevnar20, pneumococcal conjugate

RV – Rotavirus

Tdap - Tetanus, Diphtheria, acellular Pertussis

Varicella - Chicken pox

Flu - Influenza quadrivalent vaccine

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