

## **Ivy Children's Clinic Visit/Immunization Schedule**

Birth (hospital) / First clinic visit (2-5 days old): Hep B

2 weeks: Clinic visit

1 month: Well visit, Hep B

2 months: Well visit, DTaP, Hib, IPV, PCV, Rota

4 months: Well visit, DTaP, Hib, IPV, PCV, Rota

6 months: Well visit, DTaP, Hib, IPV, PCV, Rota

9 months: Well visit, Screen for lead exposure, CBC (+/- serum lead level), Hep B

12 months: Well visit, Tuberculosis screen, MMR, Varicella, Hep A

15 months: Well visit, DTaP, Hib, PCV

18 months: Well visit, Hep A

2 years: Well visit, Hep A (if not received at 18mo)

3 years: Well visit

4 years: Well visit, DTaP, IPV, MMR, Varicella, and any missed immunizations

5 to 10 years: Yearly Well visit

11 to 12 years: Yearly Well visit, Tdap booster, Menactra, Trumenba or Bexsero (Meningitis B), (Gardasil is elective)

13 to 18 years: Yearly well visit, Trumenba or Bexsero (Meningitis B), 16 to 18 year old patients may receive 2<sup>nd</sup> Menactra, (Gardasil is elective)

6 months to 18 years: Yearly Flu vaccine (elective)

## **Immunizations Definitions**

DTaP: Diphtheria and tetanus toxoids and acellular pertussis

Hep A: Hepatitis A

Hep B: Hepatitis B

Hib: Hemophilus influenzae type B conjugate

Gardasil/Hpv: Human papilloma virus vaccine (2 doses)

IPV: Inactivated poliovirus

Menactra: Meningococcal vaccine

MMR: Measles, mumps, and rubella

PCV: Pneumococcal

Rota: Rotavirus

Tdap: Tetanus and diphtheria toxoid and acellular pertussis (for adolescents)

Varicella: Chickenpox

Trumenba/Bexsero: Meningitis B