Checkup & Immunization Schedule

Typical Newborn and Infant Checkup and Immunization Schedule as of current recommendations					
Age	Physical Exam	Immunizations	Tests/Screenings		
Birth	Exam	Hep B #1 at hospital	Hearing		
48 hrs to 1 week	Exam		Neonatal metabolic screen		
2 weeks	Exam				
1 month	Exam				
2 months	Exam	IPV #1, DTaP #1, Hep B #2, Hib #1, PCV13 #1, Rotavirus #1			
4 months	Exam	IPV #2, DTaP #2, Hep B #3, Hib #2, PCV13 #2, Rotavirus #2			
6 months	Exam	IPV #3, DTaP #3, Hep B #4, Hib #3, PCV13 #3, Rotavirus #3 Influenza if Fall/Winter and then annually			
9 months	Exam		Developmental screening		
12 months	Exam	Hep A #1,Hib #4, PCV13 #4, MMR #1, Varicella #1	Lead Screening, iron, TB Risk		
15 months	Exam	DTAP #4, Hep A #1			
18 months	Exam		Developmental screening, Autism screening		
2 years	Exam	Hep A #2	Autism screening, TB, Lead Level		

Notes: Pediarix Combo Vaccine may be used = IPV + DTaP + Hep B PCV13 = Pneumococcal conjugative vaccine

Other vaccine combinations may be offered at time of visit to satisfy immunization schedule requirements.

Typical Child and Adolescent Checkup and Immunization Schedule as of current recommendations

Age	Physical Exam	Immunizations	Tests/Screenings
Age	Exam	IIIIIIuiiizatioiis	rests/screenings
3 years	Exam		Hearing*, Vision, Developmental screening
4 years	Exam	DTaP #5, IPV #4, MMR #2, Varivax #2	Hearing, Vision
5 years	Exam		Hearing, Vision
6 years	Exam		Hearing, Vision
7 years	Exam		Hearing*, Vision*
8 years	Exam		Hearing, Vision
9 years	Exam		Hearing*, Vision*, cholesterol
10 years	Exam		Hearing, Vision, cholesterol-if missed at 9yr
11 years	Exam	Tdap, HPV (3 doses), Meningoccocal	Hearing*, Vision*, cholesterol-if missed at 10yr
12 years	Exam		Hearing*, Vision
13 years	Exam		Hearing*, Vision*
14 years	Exam		Hearing*, Vision*
15 years	Exam	Tdap	Hearing*, Vision, Screen Girls only for Gonorrhea & Chlamydia
16 years	Exam		Hearing*, Vision*, Screen Girls only for Gonorrhea & Chlamydia
17 years	Exam		Hearing*, Vision*, Screen Girls only for Gonorrhea & Chlamydia

Typical 18 years and Up Checkup and Immunization Schedule as of current recommendations

Age	Physical Exam	Immunizations	Tests/Screenings
Age	LAGIII	IIIIIIdiii2diiOii3	rests/ocreenings
18 years	Exam	MMR, Meningoccocal (if not given opreviously)	Hearing*, Vision
19 years	Exam		Hearing*, Vision*
20 years	Exam	Tdap or Td	Hearing*, Vision*
21 years	Exam		Hearing*, Vision*

<u>Key</u>: * risk assessment to be performed, with appropriate action to follow. if positive.

Other vaccine combinations may be offered at time of visit to satisfy immunization schedule requirements.

FLU VACCINES ARE RECOMMENDED ANNUALLY for 6 months of age and older

Note: After the 5 year booster, a tetanus shot (Tdap or Td) is recommended every 5-10 years. If your child sustains an open or penetrating wound and more than five years have elapsed since the last booster, an additional booster may be needed. Please, call your pediatrician for their recommendations.

If your child is behind on their immunizations, please see the following schedule:

CDC Recommended Catch-up Immunization Schedule for Children that missed Immunizations (Aged 4 months to 18 years)