

# NASHUA PEDIATRICS

## Routine Well Child Exams and Immunization Schedule

(Revised 9/2/2011)

<input type="checkbox"/> 2 Weeks	<u>Well Child Exam</u>	(Hep B #1 if not given at birth)
<input type="checkbox"/> 2 Months	<u>Well Child Exam</u>	*(DTap, eIPV, Hib, Hep B), PCV13, Rotavirus
<input type="checkbox"/> 4 Months	<u>Well Child Exam</u>	*(DTap, eIPV, , Hib,)PCV13, Rotavirus
<input type="checkbox"/> 6 Months	<u>Well Child Exam</u>	*(DTap, eIPV, Hib Hep B), PCV13, Rotavirus
<input type="checkbox"/> 9 Months	<u>Well Child Exam</u>	No regular immunizations( make up vaccines if needed)
<input type="checkbox"/> 12 Months	<u>Well Child Exam</u>	MMR , Varicella, HepA (fingerstick blood test for iron and lead)
<input type="checkbox"/> 15 Months	<u>Well Child Exam</u>	DTaP, HIB, PCV13
<input type="checkbox"/> 18 Months	<u>Well Child Exam</u>	Hep A (must be at least 6 months from the first Hep A)
<b>2 Years and older</b>	<b><u>Annual Well Child Exams</u></b>	
	Catch up on any missed immunizations	

*(Hepatitis A vaccine may be recommended for your child if they have not received it yet)*

**Age 4 -5 Years** \*(DTaP, eIPV), (MMR, Varicella) (Hearing and Vision Screening at age 5 yrs)

**11 Years or older** Tdap (required at age 11), Meningococcal, HPV

**College Entry:** As required by school and provider's recommendations: *This may include: Urinalysis, Blood Work, Meningococcal, HBV, HAV, and a Tuberculosis Test (PPD)*

**\* Some vaccines may be given as combination vaccines (see explanation below).**

**Influenza (Flu) Vaccine: Recommended annually (in the Fall/Winter) for ages 6 months and above.**

### **Explanation of Immunizations**

**DTaP:** Diphtheria, Tetanus, acellular Pertussis

**eIPV:** Inactivated Polio

**HAV:** Hepatitis A

**HBV:** Hepatitis B

**HIB:** Haemophilus Influenza Type B

**HPV (Gardasil):** Human Papilloma Virus

**MMR-** Measles, Mumps, Rubella (german measles)

**Meningococcal (Menactra):** Meningococcal Meningitis

**PCV13: (Prevnar 13):** 13 strains of pneumococcal infections

**Rotavirus (RotaTeq or Rotarix):** intestinal rotavirus

(given orally)

**Tdap (Boostrix or Adacel)** (age 11 and over):

Tetanus, diphtheria, acellular pertussis

**Varicella (Varivax)** - Chicken Pox

#### **\*Combination Vaccines**

**Pediarix:** eIPV, DTaP & HBV

**Pentacel:** eIPV, DTaP & HIB

**Proquad:** MMR & Varicella

**Kinrix:** eIPV & DTaP