

## **WELL-CHILD VISITS & IMMUNIZATION SCHEDULE**

Birth to 21 years

Why are well visits important? This is a scheduled time to ask questions about your child's development, behavior, and well-being. During a well-child visit, your provider will perform several screening tests as well as discuss/administer vaccines. Well-visits occur much more frequently during the first two years. Monitoring your child during these first two years of life is important because of their rapid development. Most insurances cover well-child/screening visits at 100%, with no out-of-pocket expense.

This vaccine schedule is recommended by the ACIP and approved by the CDC, AAP and AAFP.

**KEY of Symbols** 











**Screening Questions** 

Age	Recommended Vaccines & Screenings		Age	Recommended Vaccines and Screenings	
Birth		Newborn Screen* HepB	24 mos	4 2	Lead*
3-5 days	4		30 mos	4	
2-4 wks	4		3 years		
2 mos		DTap, Hib, IPV, HepB, PCV, RV	4 years		DTap, IPV, MMR, VAR
4 mos		DTap, Hib, IPV, PCV, RV	Every year (Ages 5-10)		
6 mos		DTap, Hib, IPV, HepB, PCV, RV	11 years		Tdap, MenACWY, HPV Cholesterol*
9 mos			Every year (Ages 12-15)		
12 mos		Hep A, MMR, VAR Lead* & Hgb*	16 years		MenACWY, MenB
<b>1</b> 5 mos		DTap, Hib, PCV	Every year (Ages 17-21)		
18 mos	<b>1 (1)</b>	НерА	Ask your provider if Flu or COVID vaccination is recommended for your child.		

## **Vaccine Abbreviations & Common Trade Names**

## Vaccines in the Child and Adolescent Immunization Schedule\*

Vaccines	Abbreviations	Trade names
Diphtheria, tetanus, and acellular pertussis vaccine	DTaP	Daptacel* Infanrix*
Diphtheria, tetanus vaccine	DT	No trade name
Haemophilus influenzae type b vaccine	Hib (PRP-T) Hib (PRP-OMP)	ActHIB* Hiberix* PedvaxHIB*
Hepatitis A vaccine	НерА	Havrix® Vaqta®
Hepatitis B vaccine	НерВ	Engerix-B* Recombivax HB*
Human papillomavirus vaccine	HPV	Gardasil 9*
Influenza vaccine (inactivated)	IIV	Multiple
nfluenza vaccine (live, attenuated)	LAIV4	FluMist® Quadrivalen
Measles, mumps, and rubella vaccine	MMR	M-M-R II°
Meningococcal serogroups A, C, W, Y vaccine	MenACWY-D	Menactra*
	MenACWY-CRM	Menveo*
	MenACWY-TT	MenQuadfi*
Meningococcal serogroup B vaccine	MenB-4C	Bexsero*
	MenB-FHbp	Trumenba*
Pneumococcal 13-valent conjugate vaccine	PCV13	Prevnar 13*
Pneumococcal 23-valent polysaccharide vaccine	PPSV23	Pneumovax 23*
Poliovirus vaccine (inactivated)	IPV	IPOL*
Rotavirus vaccine	RV1 RV5	Rotarix* RotaTeq*
Tetanus, diphtheria, and acellular pertussis vaccine	Tdap	Adacel® Boostrix®
Fetanus and diphtheria vaccine	Td	Tenivac* Tdvax™
Varicella vaccine	VAR	Varivax*

Combination vaccines (use combination vaccines instead of separate injections when appropriate)						
DTaP, hepatitis B, and inactivated poliovirus vaccine	DTaP-HepB-IPV	Pediarix*				
DTaP, inactivated poliovirus, and Haemophilus influenzae type b vaccine	DTaP-IPV/Hib	Pentacel®				
DTaP and inactivated poliovirus vaccine	DTaP-IPV	Kinrix* Quadracel*				
DTaP, inactivated poliovirus, Haemophilus influenzae type b, and hepatitis B vaccine	DTaP-IPV-Hib- HepB	Vaxelis*				
Measles, mumps, rubella, and varicella vaccine	MMRV	ProQuad*				

<sup>\*</sup>Administer recommended vaccines if immunization history is incomplete or unknown. Do not restart or add doses to vaccine series for extended intervals between doses. When a vaccine is not administered at the recommended age, administer at a subsequent visit. The use of trade names is for identification purposes only and does not imply endorsement by the ACIP or CDC.

Source: CDC 2021 Recommended Child and Adolescent Immunization Schedule for ages 18 & younger