



**Schedule of Well Visits and Immunizations  
Newborn – 5 Years of Age**

First Newborn Visit-----	Height, Weight, Head Circumference
One Month Visit-----	Height, Weight, Head Circumference
Two Month Visit-----	Height, Weight, Head Circumference Vaxelis #1, PCV #1, Rotateq #1
Four Month Visit-----	Height, Weight, Head Circumference Vaxelis #2, PCV #2, Rotateq #2
Six Month Visit-----	Height, Weight, Head Circumference, Vision Screen Vaxelis #3, PCV #3, Rotateq #3
Nine Month Visit-----	Height, Weight, Head Circumference CBC, Lead Screening
One Year Visit-----	Height, Weight, Head Circumference PCV #4, Hepatitis A #1, Varicella #1, MMR #1
Fifteen Month Visit-----	Height, Weight, Head Circumference DTaP #4, HiB #4
Eighteen Month Visit-----	Height, Weight, Head Circumference, Vision Screen Hepatitis A #2
Two Year Visit-----	Height, Weight
Three Year Visit-----	Height, Weight, Blood Pressure, CBC, Vision Screen
Four Year Visit-----	Height, Weight, Blood Pressure, Vision Screen Quadracel (DTaP, Polio), Proquad (MMR, Varicella)
Five Year Visit-----	Height, Weight, Blood Pressure, CBC, Vision Screen

CBC – Complete Blood Count (Screen for anemia, white blood cell count, platelet count etc.)

DTaP – Diphtheria, Tetanus, Acellular Pertussis

HiB – Hemophilus Influenza Type B

MMR – Measels, Mumps, Rubella (German measles)

Varicella – Chicken Pox

IPV – Inactivated Polio Vaccine

PCV – Pneumococcal Conjugant Vaccine

Vaxelis (combination vaccine) – DtaP, Hepatitis B, IPV, HiB

Rotateq – Rotavirus

Quadracel (combination vaccine) – DtaP, IPV

Proquad – MMR, Varicella (combination vaccine)

\* Immunization schedule conforms with recommendations published by the Center for Disease Control and Prevention and the American Academy of Pediatrics. It is subject to change as new research becomes available and as new recommendations are made.



**Schedule of Well Visits and Immunizations  
6 Years of Age and Up**

Six through ten years-----Height, Weight, Blood Pressure, Vision Screen

Eleven year-----Height, Weight, Blood Pressure, Vision Screen, CBC, Lipid  
Tdap, MenQuadfi #1, Gardasil #1 (second dose given 6 months after first)

Twelve through fifteen years---Height, Weight, Blood Pressure, Vision Screen

Sixteen year-----Height, Weight, Blood Pressure, Vision Screen  
MenQuadfi #2, Bexsero #1 (second dose given six months after first)

Seventeen year and Older-----Height, Weight, Blood Pressure, Vision Screen

CBC – Complete Blood Count (Screen for anemia, white blood cell count, platelet count etc.)

Tdap – Tetanus (lock jaw), Diphtheria, Acellular Pertussis (whooping cough)

Gardasil – Human Papillomavirus (HPV)

MenQuadfi – Meningococcal Serogroups A, C, Y and W-135

Bexsero – Meningococcal Serogroup B

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