NORTH POINT PEDIATRICS

Immunization Schedule

	Birth	1 m	2 m	4 m	6 m	9 m	12 m	15 m	18 m	4 yr	11 y	16 y	17 y
Hepatitis B	X	or X											
D/TaP			X	X	X				X	X	X		
Polio													
PCV			X	X	X		X						
Hib			X	X	X			X					
Rota (oral)			X	X	X								
RSV*		*> 11 lb & < 8 m if no prenatal dose given*											
MMR								X		X			
Varicella							X						
Hepatitis A							X		X				
Men ACWY											X	X	
HPV*											*2 doses when started < 15 y*		
Men B												X	X
Influenza*					*Given annually at 6+ months in fall/winter, 2 doses needed the first year given*								
COVID*					*Given annually at 6+ months, 2 doses needed the first year given*								

* indicates encouraged but not required

Combination Vaccines:
Pediarix: DTaP, Hep B, Polio
Proquad: MMR & Varicella
Kinrix: DTaP & Polio

Abbreviations:
DTaP/TDaP: diphtheria, tetanus, & pertussis
PCV: pneumococcal bacteria
Hib: *H. influenzae* type B bacteria
Rota: rotavirus
RSV: respiratory syncytial virus

MMR: measles, mumps, rubella
Var: varicella (chickenpox)
Men: meningitis (groups A, C, W, Y, & B)
HPV: human papillomavirus