

# ***Framingham Pediatrics***

## **Routine Immunization and Screening Schedule**

<b>Newborn</b>	HepB #1
<b>2 Week</b>	
<b>1 Month</b>	
<b>2 Month</b>	<b><u>Vaxelis</u></b> (DTaP #1, HepB #2, Hib #1,IPV #1) PCV20 #1, Rotavirus #1
<b>4 Month</b>	<b><u>Vaxelis</u></b> (DTaP #2, HepB #3, Hib #2, IPV #2) PCV20 #2, Rotavirus #2
<b>6 Month</b>	<b><u>Vaxelis</u></b> (DTaP #3, HepB #4, Hib #3, IPV #3) PCV20 #3, Rotavirus #3 (The 6 month visit must be <b><u>on or after</u></b> 6 months of age)
<b>9 Month</b>	CBC & Lead screening
<b>12 Month</b>	MMR #1, VARIVAX #1, PCV20 #4 SPOT vision screening (The 12 month visit must be <b><u>AFTER</u></b> the first birthday)
<b>15 Month</b>	<b>Pentacel</b> (Dtap#4, Hib #4, IPV#4) Hep A #1
<b>18 Month</b>	
<b>24 Month</b>	Hep A #2 CBC & Lead screening, SPOT vision screening (The 24 month visit must be <b><u>AFTER</u></b> the second birthday)
<b>2 ½ Year</b>	At the discretion of the physician
<b>3 Year</b>	CBC & Lead screening Begin yearly vision screening and BP check
<b>4 Year</b>	<b><u>Kinrix</u></b> (DTaP #5, IPV #5), <b><u>Proquad</u></b> (MMR #2, VARIVAX #2) ( <b><i>Beginning March 2025</i></b> ) Hearing Screening
<b>5 Year</b>	<b><u>Kinrix</u></b> (DTaP #5, IPV #5), <b><u>Proquad</u></b> (MMR #2, VARIVAX #2) ( <b><i>For Children who have not received these vaccines at 4-year visit</i></b> )
<b>Yearly</b> physical exams are recommended after 5 years of age.	
<b>9 Year</b>	CBC, Cholesterol screening, HPV #1
<b>10 Year</b>	HPV #2
<b>11 year</b>	Tdap#1, MCV4 #1
<b>16 year</b>	MCV4 #2 ( <b><i>must be given on or after age 16yr</i></b> )
<b>17 year</b>	CBC, Cholesterol screening

Entrance to 7<sup>th</sup> Grade requires completion of the Hepatitis B Series, Tdap Booster, documentation of chicken pox disease or Varivax, and 2 MMR vaccines.

**MCV4 Booster** - Given at age **16** if primary dose is administered at age 11-12yrs, Age 16-18yrs if primary dose is administered at 13-15yrs. Booster not required if primary dose is administered after 16yrs.

**HPV vaccine if started on or after age 15:** 3 dose series (0, 1-2 months, 6 months)

Minimal interval between dose 1 and 2 is 4 weeks, dose 2 and 3 is 12 weeks and dose 1 and 3 is 5 months

Earliest age for 1<sup>st</sup> dose of **Vaxelis** (DTaP, Hep B, IPV Hib) and PCV15 is 6 weeks old.

1<sup>st</sup> dose of **Rotavirus** vaccine must be given prior to 12 weeks of age, last dose prior to 32 weeks

Minimal interval between vaccines **Vaxelis** (DTaP, Hep B, IPV, Hib) and PCV15 is 4 weeks.

**Hepatitis B Vaccine for older patients** requires minimum 4 week interval between 1<sup>st</sup> and 2<sup>nd</sup> doses with 3<sup>rd</sup> dose given 6-12 months later (minimum intervals of 4 months between 1<sup>st</sup> and 3<sup>rd</sup> doses and 2 months between 2<sup>nd</sup> and 3<sup>rd</sup> doses).