

# HUNTINGTON PLAZA PEDIATRIC GROUP

## RECOMMENDED VACCINE SCHEDULE

2 months	PEDIARIX	HIB	PREVNAR	RotaTeq
4 months	PEDIARIX	HIB	PREVNAR	RotaTeq
6 months	PEDIARIX	(HIB)	PREVNAR	RotaTeq
9 months	check Hemoglobin (Dr. Discretion)			
12 months	MMR	Varivax	Prevnar	CBC and/or Lead if indicated
15 months	DTaP	HIB	Hep A	
2 years	HEPATITIS A			
4-6 years	MMR	Varivax	Polio	DTap
	TB Skin Test	Urine	Hemoglobin	
11+ years	Tdap	HPV	Menactra	Cholesterol

DTaP: Diphtheria, Tetanus, Pertussis (whooping cough)  
 Hib: Haemophilus Influenzae Type B (meningitis)  
 HPV: Human Papilloma Vaccine (cervical cancer)  
 Menactra: Meningitis  
 MMR: Measles, mumps, rubella  
 PEDIARIX: Diphtheria, Tetanus, Pertussis (whooping cough), Polio, Hepatitis B  
 PREVNAR: Pneumococcal bacteria (pneumonia, meningitis)  
 RotaTeq: Rotavirus (diarrhea)  
 Tdap: Tetanus, Diphtheria, Pertussis (whooping cough) Booster  
 Varicella: Chicken pox

American Academy of Pediatrics: [www.aap.org](http://www.aap.org)  
 Center for Disease Control and Prevention: [www.cdc.gov](http://www.cdc.gov)  
 American Medical Association: [www.ama-assn.org](http://www.ama-assn.org)  
 National Network for Immunization Information: [www.immunizationinfo.org](http://www.immunizationinfo.org)