WELL CHILD VISIT SCHEDULE

- 1 Month Your infant will have a physical exam and a second HBV. *
- **2 Months** Your infant will have a physical exam and receive the DTaP, HIB, IPV, Prevnar (all 3 may be combined as a single vaccine) and RV.
- **4 Months** Your infant will have a physical exam and receive the DTaP, HIB, IPV, Prevnar (all 3 may be combined as a single vaccine) and RV.
- **6 Months** Your infant will have a physical exam and receive the DTaP, HIB,IPV, Prevnar (all 3 may be combined as a single vaccine) and RV.
- **9 Months** Your infant will have a physical exam and the HBV.
- **12 Months** Your child will have a physical exam and receive the MMR, Varivax and Hepatitis A. The nurse will draw blood to check for lead poisoning and anemia.
- 15 Months Your child will have a physical exam and receive the Prevnar and HIB vaccines.
- **18 Months** Your child will have a physical exam and receive the DTaP and Hepatitis A vaccines. Lab work is not usually necessary at this visit.
- 24 Months Your child will have a physical exam and the nurse will draw blood to check for lead poisoning. If your child has missed any vaccines, we will update them at this visit.
- **30 Months** Your child will have a physical exam and developmental screening. Any new or catch-up vaccines will be offered.
- 3 Years Your child will have a physical exam. Any new or catch-up vaccines will be offered.
- **4 Years** Your child will have a physical exam. He/she will be eligible for Kindergarten vaccines which consist of DTaP, MMR, Varivax, and IPV. The nurse may draw blood to check for anemia. The nurse will check your child's vision and hearing.
- **5 Years IT'S KINDERGARTEN TIME!** Your child will have a physical exam and all lab work and vaccines that were not done at the 4 year old visit will be done at this visit. The nurse may also check your child's vision and hearing.
- **6-18 Years** We recommend your child have a physical exam every 1-2 years, depending upon each individual's health status. There are several newer vaccines your child should receive between the ages of 9 and 18. All children are recommended to have their cholesterol checked at least once in the teenage years.

PLEASE, GIVE ANY DAY CARE OR SCHOOL FORMS YOU NEED COMPLETED TO THE NURSE AS SOON AS YOU ARE TAKEN INTO AN EXAM ROOOM. THANK YOU!

VACCINE ABBREVIATIONS

DTaP=Diphtheria, Tetanus, Pertussis vaccine
HepA= Hepatitis A vaccine
HBV=Hepatitis B vaccine
HIB= Haemophilus Influenza Type B vaccine
Gardasil®=Human Papillomavirus
Pentacel®= DtaP,HIB,IPV combined vaccine

IPV= Injectable Polio vaccine MMR= Measles, Mumps, Rubella vaccine Prevnar®= Pneumococcal Conjugate vaccine Rotateq/RV= Rotavirus oral vaccine Varivax®=Chickenpox vaccine