

Child's Name: _____

Date of Birth: _____

Immunization	Series	Age Range	Date
DTP/aP	1 of 5	2 mos	
DTP/aP	2 of 5	4 mos	
DTP/aP	3 of 5	6 mos	
DTP/aP	4 of 5	15-18 mos	
DTP/aP	5 of 5	4-6 yrs	
Polio (IPV or OPV)	1 of 4	2 mos	
Polio (IPV or OPV)	2 of 4	4 mos	
Polio (IPV or OPV)	3 of 4	6-18 mos	
Polio (IPV or OPV)	4 of 4	4-6 yrs	
Hib	1 of 4	2 mos	
Hib	2 of 4	4 mos	
Hib	3 of 4	6 mos	
Hib	4 of 4	12-18 mos	
PCV	1 of 4	2 mos	
PCV	2 of 4	4 mos	
PCV	3 of 4	6 mos	
PCV	4 of 4	12-18 mos	
HepB	1 of 3	Birth	
HepB	2 of 3	1-2 mos	
HepB	3 of 3	6-18 mos	
MMR	1 of 2	12-15 mos	
MMR	2 of 2	4-6 yrs	
Varicella	1 of 2	12-15 mos	
Varicella	2 of 2	4-6 yrs	
Lead	1 of 2	By 1 year	
Lead	2 of 2	By 2 Years	
TB	1 of 1	Physician's discretion	

Combinations:	ProQuad (MMR/Var)
	Pediatric (DTaP/HepB/IPV)
	COMVAX (HepB/Hib)
	Pentacel (DTaP/Hib/IPV)
	Prevnar [=Pneumococcal or IPD or PCV]

Last Reviewed:

Child's Name: _____

Date of Birth: _____

Immunization	Series	Age Range	Date
DTP/aP	1 of 5	2 mos	
DTP/aP	2 of 5	4 mos	
DTP/aP	3 of 5	6 mos	
DTP/aP	4 of 5	15-18 mos	
DTP/aP	5 of 5	4-6 yrs	
Polio (IPV or OPV)	1 of 4	2 mos	
Polio (IPV or OPV)	2 of 4	4 mos	
Polio (IPV or OPV)	3 of 4	6-18 mos	
Polio (IPV or OPV)	4 of 4	4-6 yrs	
Hib	1 of 4	2 mos	
Hib	2 of 4	4 mos	
Hib	3 of 4	6 mos	
Hib	4 of 4	12-18 mos	
PCV	1 of 4	2 mos	
PCV	2 of 4	4 mos	
PCV	3 of 4	6 mos	
PCV	4 of 4	12-18 mos	
HepB	1 of 3	Birth	
HepB	2 of 3	1-2 mos	
HepB	3 of 3	6-18 mos	
MMR	1 of 2	12-15 mos	
MMR	2 of 2	4-6 yrs	
Varicella	1 of 2	12-15 mos	
Varicella	2 of 2	4-6 yrs	
Lead	1 of 2	By 1 year	
Lead	2 of 2	By 2 Years	
TB	1 of 1	Physician's discretion	

Combinations:	ProQuad (MMR/Var)
	Pediatric (DTaP/HepB/IPV)
	COMVAX (HepB/Hib)
	Pentacel (DTaP/Hib/IPV)
	Prevnar [=Pneumococcal or IPD or PCV]

Last Reviewed: