



This immunization schedule is recommended by the Center for Disease Control and Prevention. If you'd like to try a modified schedule, speak with your pediatrician.

Vaccine	Birth	1 mo.	2 mos.	4 mos.	6 mos.	12 mos.	15 mos.	18 mos.	24 mos.	4-6 yrs.	11-12 yrs.
Hepatitis B	█	█			█	█	█				
Diphtheria, Tetanus, Pertussis			█	█	█		█			█	█
Haemophilus Influenza Type B			█	█		█					
Inactivated Poliovirus			█	█	█	█	█			█	
Measles, Mumps, Rubella						█				█	
Varicella						█				█	
Meningococcal											█
Pneumococcal			█	█	█	█					
Influenza						yearly					
Hepatitis A						█					
Rotavirus			█	█	█						
HPV (girls only)											█