

# Pediatric Associates of Charlottesville, Plc

## Immunization/Periodicity Schedule Winter 2010

Birth	Hep B
1 Month	Hep B
2 Months	DTaP-Hib,-IPV, PCV7, Rotavirus <sup>1</sup> , Hep B (if not received 2 doses)
4 Months	DTaP-Hib-IPV, PCV7, Rotavirus <sup>1</sup>
6 Months	DTaP-Hib-IPV, PCV7, Rotavirus <sup>1</sup>
9 Months	Hep B, Hgb, Lead (medicaid, zip codes <sup>2</sup> )
12 Months	PCV7, Hep A, TB
15 Months	VZV, MMR,
18 Months	DTaP, Hib <sup>5</sup> , MCHAT
2 Years	Hep A, Lead (medicaid, zip codes <sup>2</sup> ), MCHAT (Hib) <sup>5</sup>
3 Years	(Hib) <sup>5</sup>
4-6 Years	DTaP, IPV <sup>6</sup> , MMR, VZV <sup>3</sup> , Hgb, UA, Aud (4 and 5yo) TB (5yo),
6-11 Years	VZV (if not received 2 doses)
11-18 Years	Tdap, MCV4 (required for college entry), Aud (11yo) HPV4 (females), VZV <sup>3</sup> (if not received 2 doses), TB (college)
6 Mon-Adults	Influenza <sup>4</sup> (seasonal)

### Key

D = Diphtheria  
T = Tetanus  
aP = acellular Pertussis  
Hib = Hemophilus influenza b  
PCV7 = Pneumococcus  
IPV = Inactivated Polio  
MMR = Measles, Mumps, Rubella  
VZV = Varicella (chicken pox)  
HepB = Hepatitis B  
HepA = Hepatitis A  
Tdap = modified DTaP for teens  
HPV4 = Human Papilloma Virus  
MCV4 = Meningococcus  
Hgb = Hemoglobin  
UA = Urinalysis  
MCHAT = autism screen  
TB = Tuberculosis screen  
Aud = Hearing screen

1. First dose must be given before 14 weeks of age to start series (or not at all), and the second and third doses must be given before 32 weeks.
2. High risk zip codes: Ch/Alb: 22901, 03, 31, 37, 43, 47, 59, 24590; Buck: 23936; Greene: 22935; Fluvanna: 23022, 84; Louisa: 23024; Madison: 22709, 19, 27, 32; Nelson: 22938, 64, 69, 71, 24464, 24553; Orange: 22972. Others available at: <http://www.vahealth.org/leadsafe/index.asp>
3. For children under 13yo, minimum 3 months between varicella doses. For children 13yo and older, minimum 1 month between varicella doses.
4. Influenza is recommended for all children 6 months to 18 years.
5. Administer Hib if child has not received at least one Hib after age 12 months.
6. Administer Kinrix if needs 4<sup>th</sup> IPV.