



Recommended Vaccine Schedule

2 weeks: HEP B

2 months: DTaP IPV HIB HEP B PREVNAR ROTAVIRUS

4 months: DTaP IPV HIB PREVNAR ROTAVIRUS

6 months: DTaP HIB PREVNAR ROTAVIRUS

9 months: HEP B

12 months: VARIVAX HEP A

15 months: HIB MMR

18 months: DTaP IPV

2 years: HEP A

4/5 years: DTaP IPV MMR VARIVAX

11 years: Tdap GARDASIL MENACTRA



Westchester Commons

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COMMONWEALTH PEDIATRICS

Parent With Confidence

Immunizations:

DTaP: Diphtheria, Tetanus and Pertussis (Whooping Cough)

GARDASIL: Human Papillomavirus Vaccine

HEP A: Hepatitis A

HEP B: Hepatitis B

HIB: Haemophilus Influenzae Type B (Meningitis)

IPV: Inactivated Polio Virus

MENACTRA: Meningococcal

MMR: Measles, Mumps and Rubella

PREVNAR: Pneumococcal Bacterial (Pneumonia Meningitis)

Tdap: Tetanus, Diphtheria and Pertussis (Whooping Cough) Booster

VARIVAX: Chickenpox Vaccine

For more information, please see:

American Academy of Pediatrics: www.aap.org

American Medical Association: www.ama-assn.org

Center for Disease Control and Prevention: www.cdc.gov

National Network for Immunization Information: www.immunizationinfo.org



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