

Recommended Childhood and Adolescent Immunization Schedule United States 2006

Age▶	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	24 months	4-6 years	11-12 years	13-14 years	15 years	16-18 years
Vaccine▼	Hep B	HepB		HepB	HepB			HepB Series						
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP		DTaP			DTaP	Tdap	Tdap		
Haemophilus Influenzae Type b			Hib	Hib	Hib**	Hib***								
Inactivated Polio Virus			IPV	IPV	IPV					IPV				
Measles, Mumps, Rubella						MMR #1				MMR #2	MMR #2 (if missed)			
Varicella						Varicella			(Varicella)					
Meningococcal						Vaccines within broken line are for selected populations.					MCV4		MCV4	
Pneumococcal			PCV	PCV	PCV	PCV			PCV	PPV				
Influenza						Influenza (Yearly)			Influenza (Yearly)					
Hepatitis A						Hep A Series (2 doses at least 6 months apart)			Hep A Series					

** If COMVAX® is used, give the 3rd dose 6 months from the time of the 1st dose. *** If COMVAX® is used, Hib at 12 months is not necessary. Vaccines are listed under the routinely recommended ages. Bars indicate range of acceptable ages for immunization. Catch-up immunization should be done during any visit when feasible. Shaded areas indicate vaccines to be given if previously recommended doses were missed or given earlier than the recommended minimum age. The lighter shading indicates range of recommended ages. Darker shading indicates catch-up immunization.