

**Trestlewood Pediatrics**  
**Well Child Visit and Routine Immunization Schedule**

**Birth/First Visit**

Hep B #1

**2-4 Weeks**

**2 Month**

Pediarix (DTaP, IPV, Hep B)  
 Prevnar 13  
 Rotavirus  
 Hib

**4 Month**

Pediarix (DTaP, IPV, Hep B)  
 Prevnar 13  
 Rotavirus  
 Hib

**6 Month**

Pediarix (DTaP, IPV, Hep B)  
 Prevnar 13  
 Rotavirus  
 Seasonal Flu vaccine

**9 Month**

**12 Month**

MMR  
 Varicella  
 Hep A # 1  
 Lead level questionnaire  
 Hemoglobin

**15 Month**

DTaP  
 Prevnar 13  
 Hib

**18 Month Visit**

**2 Year**

Hep A #2

**3 Year**

Start Blood Pressure (BP) check

**4 Year**

DTaP  
 IPV Polio vaccine  
 MMR  
 Varicella  
 Vision  
 Hearing

**5 Year**

4 Year Vaccines if not given  
 Vision  
 Hearing

**7 Year**

Vision

**9 Year**

Vision

**11 Year**

Vision  
 T dap  
 Menactra

**12 Year**

Vision

**13 Year**

Vision  
 May begin HPV series

**14 Year**

Vision

**15 Year**

Vision

**16 Year**

Vision

**17 Year**

Vision  
 Menactra booster if needed