

DAYONE FAMILY HEALTHCARE IMMUNIZATION SCHEDULE

Thank you for entrusting the care of your child to DayOne. On the back of this sheet is the schedule of immunizations that you can expect your child to receive at their well child checks. Immunizations are normally given at these appointment times. If your child is ill at their checkup, the provider will determine if immunizations are appropriate. Should your child get behind on immunizations, the schedule may change. We firmly believe in the effectiveness and safety of vaccines to prevent serious illness and to save lives. We recommend that all children and young adults receive all the recommended vaccinations according to the schedule published by the Center for Disease Control (CDC) and the American Academy of Pediatrics. Vaccinating children and young adults may be the single most important health-promoting intervention we offer as health care providers.

The recommended vaccine schedule outlined below is the result of many years of scientific study and data gathered on millions of children, by thousands of our brightest scientists and physicians. We feel very strongly that vaccinating children by the recommended schedule with currently available vaccines is absolutely the right thing to do. Please recognize that by not vaccinating you are putting your child at unnecessary risk for a life-threatening illness, disability and even death.

To help ease any discomfort your child may experience, we recommend that you give your child Tylenol (acetaminophen) 30 minutes before their appointment time. Please use the attached dosing guide according to their weight for the correct dosage. Also note that Motrin is not advised for children less than 6 months of age.

Please contact your insurance carrier to determine what coverage you have before your son/daughter's first well child check. Everyone's insurance plan is different, and benefit/coverage is determined by each individual policy.

We are excited to participate in the care of your children. The physicians and entire staff of DayOne Family Healthcare watch with pride as we see your children grow. Thank you and congratulations!

Initial visit (3-5 days) =HepB (if not given at birth)

2 Week=Well Child Visit

2 MO=Well Child Visit

DTaP/IPOL/HIB (Pentacel)

Hep B

Pneumococcal (PCV-13)

Rotavirus

4 MO=Well Child Visit

DTaP/IPOL/HIB (Pentacel)

Pneumococcal (PCV-13)

Rotavirus

6 MO=Well Child Visit

DTaP/IPOL/HIB (Pentacel)

Hep B

Pneumococcal (PCV-13)

Rotavirus

9 MO=Well Child Visit

12 MO=Well Child Visit

Hepatitis A

MMR

Varicella

Pneumococcal (PCV-13)

Lead level/Hemoglobin

15 MO=Well Child Visit

18 MO=Well Child Visit

Lead Level (if not done at 12 months)

DTaP/IPOL/HIB (Pentacel) Hepatitis A (#2)

2 and 3 YR=Well Child Visit (lead level again at age 2)

**Give PPSV23 to 2 and up with a long-term health problem (see list on VIS sheet)

4-6 YR=Well Child Visit

DTaP

MMR/Varicella (ProQuad)

IPV

11-12 YR=Well Child Visit

Tdap

Meningitis

HPV (males and females)

Hep A

2nd Varicella

12 YR and up=Well Child Visit/Sports physical and immunizations