

# ABC PEDIATRICS, P.C.

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## **\*PRESENT RECOMMENDED SCHEDULE FOR WELL CARE AND IMMUNIZATIONS\***

<u>AGE</u>	<u>ITEM</u>
2-4 DAYS AFTER DISCHARGE	NEW BORN WELL CHILD EXAM, POST-NATAL DEPRESSION SCREENING
2-3 WEEKS	WELL CHILD EXAM, POST-NATAL DEPRESSION SCREENING
2 MONTHS	WELL CHILD EXAM, PENTACEL (DTAP, HIB, & POLIO), HEP B, PREVNAR & ROTATEQ, POST-NATAL DEPRESSION SCREENING
4 MONTHS	WELL CHILD EXAM, PENTACEL, PREVNAR & ROTATEQ, POST-NATAL DEPRESSION SCREENING
6 MONTHS	WELL CHILD EXAM, PENTACEL, PREVNAR & ROTATEQ, POST-NATAL DEPRESSION SCREENING
9 MONTHS	WELL CHILD EXAM, HEPATITIS B
12 MONTHS	WELL CHILD EXAM, HEMOGLOBIN, MMR, VARIVAX & HEP A, LEAD LEVEL
15 MONTHS	WELL CHILD EXAM, DTAP, HIB, PREVNAR
18 MONTHS	WELL CHILD EXAM, HEP A, AUTISM SCREENING
2 YEAR	WELL CHILD EXAM, AUTISM SCREENING, LEAD LEVEL
2.5 YEAR	WELL CHILD EXAM, DEVELOPMENTAL SCREENING
3 YEAR	WELL CHILD EXAM
4 YEAR	WELL CHILD EXAM, QUADRACEL (DTAP, IPV), MMR & VARIVAX, VISION SCREEN, LEAD SCREENING
5 YEAR	WELL CHILD EXAM, VISION SCREEN, HEARING SCREEN
6-9 YEAR	WELL CHILD EXAM, VISION SCREEN
10 YEAR	WELL CHILD EXAM, VISION SCREEN, LIPID SCREEN
11 YEAR	WELL CHILD EXAM, VISION SCREEN, TDAP, MENACTRA, GARDASIL, DEPRESSION SCREENING
12-15 YEAR	WELL CARE EXAM (SPORTS PHYSICAL FORMS IFAPPLICABLE), GARDASIL (IF NEEDED), VISION SCREEN, DEPRESSION SCREENING
16 YEAR	WELL CARE EXAM, TRUMENBA, CHLAMYDIA SCREENING, VISION SCREEN
17 YEAR	WELL CARE EXAM, MENACTRA, TRUMENBA, CHLAMYDIA SCREENING, VISION SCREEN, LIPID SCREEN

### SEASONAL IMMUNIZATIONS

- Influenza – age 6months and up
- COVID-19: age 6months and up
- RSV: under 6months (if applicable)

