

STARTS JANUARY 1, 2009

Pentacel- DTaP, IPV, HIB

1 MONTH-	PKU, HEMOGLOBIN
2 MONTH-	PENTACEL, HEP B, PREVNAR, ROTATEQ
4 MONTH-	PENTACEL, HEP B, PREVNAR, ROTATEQ
6 MONTH-	PENTACEL, HEP B, PREVNAR, ROTATEQ
12 MONTH-	MMR, VARIVAX, PREVNAR
15 MONTH-	DTAP
4-6 YEARS-	DTAP, IPV, MMR, VARIVAX
12 YEARS-	TDAP, MENACTRA, GARDASIL
(MENATRA AND GARDASIL ONLY AT PARENT REQUEST)	

**If someone has both private and Medicaid insurance then
VFC vaccines are to be used.**