

## Early Childhood Well Visit Schedule

<u>Vaccines/</u> Age	Dtap (Diphtheria, tetanus, & acellular pertussis)	<u>IPV</u> (Polio)	HiB (Haemophilus influenza type B)	PCV_ (Pneumococcal conjugate)	MMR (Measles, mumps, and rubella)	HepA (Hepatitis A)		<u>Flu</u> (Influenza)	Vitals	Tests/ Screens	Notes
12 Months					Ø	$\diamond$	Ø	yearly	Height, Weight, Head Circumfrence	Developmental screen, Hemoglobin, Lead test, Tuberculosis risk assessment	Consider dentist
15 Months	Ø		Ø	Ø					Height, Weight, Head Circumfrence		Consider fluoride
18 Months						Ø			Height, Weight, Head Circumfrence	Developmental Screen, Autism Screen	None
24 Months								yearly	Height, Weight, Head Circumfrence	Autism Screen, Lead Test, Tuberculosis risk assessment	Consider fluoride
30 Months									Height, Weight, Head Circumfrence	Developmental Screen	Consider fluoride
3 Years								yearly	Height, Weight, Blood Pressure, Pulse	Developmental Screen, Lead Screen, Vision, Tuberculosis risk assessment	Consider fluoride
4 Years	Ø	Ø			Ø		Ø	yearly	Height, Weight, Blood Pressure, Pulse	Developmental Screen, Lead Screen, Vision, Hearing, Tuberculosis risk assessment	Consider fluoride

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