

Brookside Pediatrics, P.C.
4637 Main Street, Suite #4
Bridgeport, CT 06606
203.374.3001

Schedule

Age	Procedure	Immunizations	Lab Work	Comments
1 wk	Weight check, newborn records, family history, AG	HepB#1 (if not given in the hospital)		AG = anticipatory guidance Every well check
2 wk	Weight check, AG			
1 mo	Well Baby Exam			
2 mo	Well Baby Exam	Pentacel #1 Hep B#2		
3 mo	Nurse Visit-vaccinations only	Rota #1 Prevnar #1		
4 mo	Well Baby Exam	Pentacel #2		
5mo	Nurse Visit-vaccinations only	Rota #2, Prevnar #2		
6mo	Well Baby Exam	Pentacel #3 HepB # 3		
7mo	Nurse Visit- vaccinations only	Rota #3		
9mo	Well Baby Exam	Prevnar # 3	CBC, Lead	Lab slip given to have blood drawn prior to 12mo visit
12 mo	Well Toddler Exam	MMR#1 Var #1 HepA #1 & PPD	CBC, Lead	Check-up must be scheduled <i>AFTER</i> birthday
15mo	Well Toddler Exam	Dtap #4 Hib#4		
18mo	Well Toddler Exam	Prevnar #4		
2yr	Well Toddler Exam	HepA#2	CBC, Lead	
3yr	Well Toddler Exam	(catch-up vaccines if needed)	Hgb, UA	BP = Blood pressure screening at all yearly exam
4yr	Well Child Exam	Dtap#5 IPV#4 MMR#2 Var#2	Hgb, UA	Check-up must be scheduled <i>AFTER</i> birthday BP, Vision, Hearing
5yr	Well Child Exam	(catch-up 4yr vaccines if needed)	Hgb, UA	
6-10yr	Well Child Exam	HPV series (can be started on children age 9 & up)	Cholesterol Hgb, UA	Vision & Hearing (typically 3 rd , 6 th & 9 th grades)
11yr	Well Child Exam	Tdap#1, Menactra#1, HPV#1 HPV#2, two months later, HPV #3 6 months after 1 st HPV	Hgb, UA	
12-16yr	Well Adolescent Exam	(catch-up vaccines if needed) Menactra#2 (at age 16)	Hgb, UA	12yr check-up must be <i>AFTER</i> birthday
17yr	Well Adolescent Exam	Catch-up vaccines if needed	Hgb, UA	Screening cholesterol, varicella titer, CBC, thyroid
18 & up up*	Well Adult Exam	Catch-up vaccines if needed	Hgb, UA	<i>AFTER</i> birthday** Labs

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HepB	Hepatitis B vaccine
Pentacel	Combination vaccine: DTaP, IPV, HiB
DTaP	Diphtheria, Tetanus & Pertussis (whooping cough) vaccine
IPV	Inactivated Polio Vaccine
Rota	Rotavirus Vaccine (oral): must start by 12 weeks of age & complete 3 doses by 8 Months of age
Pevnar	Streptococcus pneumoniae vaccine
MMR	Measles, Mumps, and Rubella vaccine
Var	Varicella (Chicken pox) vaccine
HepA	Hepatitis A vaccine
PPD	Purified Protein Derivative (screening test for tuberculosis exposure)
Hib	Haemophilus influenzae type B vaccine
HPV	Human Papilloma virus vaccine
Menactra	Meningitis vaccine (bacterial meningococcal disease)
Tdap	Tetanus, Diphtheria & Pertussis (whooping cough) vaccine
Hgb	Hemoglobin (finger prick to assess for anemia)
BP	Blood pressure screen
AG	Anticipatory Guidance
CBC	Complete Blood Count (drawn at lab)
UA	Urinalysis (best specimen is an appointment day, first morning, mid-stream collection. Catch in a sterile container with a leak proof lid & store in refrigerator until your appointment)

* Check-ups must be scheduled after a child's birthday.

* Topical anesthetic cream is available over-the-counter (OTC) as LMX for use prior to vaccines.

* Patients with asthma, ADD, physical complaints or concerns should schedule separate appointments in order to address these conditions.

**18yr & up: must be full-time students, or living at home and covered under parents insurance