




# Recommended Immunization Schedule for Children

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16-18 yrs
Hepatitis B (HepB)	1 <sup>st</sup> dose	← 2 <sup>nd</sup> dose →			← 3 <sup>rd</sup> dose →											
Rotavirus (RV) RV1 (2-dose series); RV5 (3-dose series)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose												
Diphtheria, tetanus, & acellular pertussis (DTaP: <7 yrs)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose			← 4 <sup>th</sup> dose →				5 <sup>th</sup> dose				
Tetanus, diphtheria, and acellular pertussis (Tdap: ≥7 yrs)														(Tdap)		
Haemophilus influenzae type b (Hib)*			1 <sup>st</sup> dose	2 <sup>nd</sup> dose			← 3 <sup>rd</sup> or 4 <sup>th</sup> dose →									
Pneumococcal conjugate (PCV13)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose		← 4 <sup>th</sup> dose →									
Pneumococcal polysaccharide (PPSV23)																
Inactivated poliovirus (IPV) (<18 yrs)			1 <sup>st</sup> dose	2 <sup>nd</sup> dose	← 3 <sup>rd</sup> dose →						4 <sup>th</sup> dose					
Influenza (IIV; LAIV) 2 doses for some: See footnote 8					Annual vaccination (IIV only)						Annual vaccination (IIV or LAIV)					
Measles, mumps, rubella (MMR)							← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose				
Varicella (VAR)							← 1 <sup>st</sup> dose →					2 <sup>nd</sup> dose				
Hepatitis A (HepA)							← 2-dose series →									
Human papillomavirus (HPV2: females only; HPV4: males and females)															(3-dose series)	
Meningococcal (Hib-Men-CY ≥ 6 weeks; MenACWY-D ≥ 9 mos; MenACWY-CRM ≥ 2 mos)															1 <sup>st</sup> dose	
																Booster

 Range of recommended ages for all children

 Range of recommended ages for catch-up immunization

 Range of recommended ages for certain high-risk groups

# Recommended Immunization Schedule for Adults

VACCINE ▼	AGE GROUP ►	19-21 years	22-26 years	27-49 years	50-59 years	60-64 years	≥ 65 years
Influenza*		1 dose annually					
Tetanus, diphtheria, pertussis (Td/Tdap)*		Substitute 1-time dose of Tdap for Td booster, then boost with Td every 10 yrs					
Varicella*		2 doses					
Human papillomavirus (HPV) Female*		3 doses					
Human papillomavirus (HPV) Male*		3 doses					
Zoster						1 dose	
Measles, mumps, rubella (MMR)*		1 or 2 doses					
Pneumococcal 13-valent conjugate (PCV13) *		1 dose					
Pneumococcal polysaccharide (PPSV23)		1 or 2 doses					1 dose
Meningococcal*		1 or more doses					
Hepatitis A*		2 doses					
Hepatitis B*		3 doses					
Haemophilus influenzae type b (Hib)*		1 or 3 doses					

\*Covered by the Vaccine Injury Compensation Program

**For all persons in this category who meet the age requirements and who lack documentation of vaccination or have no evidence of previous infection, zoster vaccine recommended regardless of prior episode of zoster.**

**Recommended if some other risk factor is present (e.g., on the basis of medical, occupational, lifestyle, or other indication).**