Children's Medical Group™
A member of Children's Hospital and Health System.

Southwest Pediatrics
3610 Michelle Witmer Memorial Drive, Ste. 100
New Berlin, Wis. 53151
P: (262) 789-6020
F: (262) 789-6025

VACCINE SCHEDULE-Rohloff, Richter, Young & Schwake

2 weeks or hospital	HEP B
6 weeks or 2 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, HEP B, ROTATEQ
4 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, ROTATEQ
6 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, ROTATEQ
9 months	HEP B
12 months	PREVNAR, HEP A
15 months	PENTACEL (DTAP, IPV, HIB) MMR, VARIVAX
18 months or 2 years	HEP A
4 years	IPV
5 years	DTAP, MMR, VARIVAX
11 years	TDAP, GARDASIL, MENACTRA
16 years	MENACTRA BOOSTER

VACCINE SCHEDULE-Jeruc

2 weeks or hospital	HEP B
6 weeks or 2 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, HEP B, ROTATEQ
4 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, ROTATEQ
6 months	PENTACEL (DTAP, IPV, HIB) PREVNAR, ROTATEQ
9 months	HEP B
12 months	PREVNAR, HEP A
15 months	MMR, VARIVAX
18 months or 2 years	PENTACEL (DTAP, IPV, HIB) HEP A
4 years	IPV
5 years	DTAP, MMR, VARIVAX
11 years	TDAP, GARDASIL, MENACTRA
16 Years	MENATRA BOOSTER

Dtap	Diphtheria, Tetanus, Pertussis
Hib	Haemophilus Influenzae type b
IPV	Polio
Hep A	Hepatitis A
Hep B	Hepatitis B
Rotateq	Rotavirus
Prevnar	Pneumococcal
MMR	Measles, Mumps, Rubella
Varivax	Chicken Pox
TDAP	Tetanus, Diphtheria, Pertussis (Adult)
Gardasil	HPV
Menactra	Meningitis

Catch-up vaccines
*Hep A if not previously given
*Prevnar 13, one dose, for children less than 5 years old and older than 1

Influenza vaccine
Starting at 6 months with 2 doses the first year given if under age 9

REMINDER:

- ALWAYS KEEP A COPY OF YOUR CHILD'S IMMUNIZATION RECORDS AT HOME FOR SCHOOL, CAMP, AND OTHER FORMS
- IF YOU HAVEN'T REGISTERED FOR ACCESS TO WIR (WISCONSIN IMMUNIZATION REGISTERY) PLEASE CONTACT OUR OFFICE TO DO SO.