






















# Family Vaccination Schedule

Vaccines	Pre-K	Kindergarten through Grade 5	Grades 6-11	Grade 12
DTaP/DTP/ DT/Td/Tdap	4 	5 or 4* 	3 	
Tdap	Not Applicable		1 	
IPV/OPV	3 	4 or 3† 	4 or 3‡ 	3 
MMR	1 	2 		
Hepatitis B	3 	3 	3 or 2§ 	
Varicella (chickenpox)	1 	2 		1 
MenACWY	Not Applicable		1 	1 
Hib	1-4 	Not Applicable		
PCV	1-4 	Not Applicable		
Influenza	1 	Not Applicable		

\* 5 doses or 4 doses if the fourth dose was received at age 4 years or older or 3 doses if the child is age 7 years or older and the series was started at age 1 year or older

† 4 doses or 3 doses if the third dose was received at age 4 years or older

‡ 4 doses or 3 doses if the third dose was received at age 4 years or older

§ 3 doses or 2 doses of adult hepatitis B vaccine (recombivax HB) for children who received the doses at least 4 months apart between the ages of 11 through 15 years