Suburban Pediatrics
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SUBURBAN PEDIATRICS OFFICE EXAM SCHEDULE

1 WEEK	OFFICE VISIT
1 MONTH	OFFICE VISIT HEP B
2 MONTH	OFFICE VISIT DTaP PREVNAR ROTATEQ
3 MONTH	OFFICE VISIT HIB IPV ROTATEQ
4 MONTH	OFFICE VISIT DTaP PREVNAR
5 MONTH	OFFICE VISIT HIB IPV ROTATEQ
6 MONTH	OFFIVE VISIT DTaP PREVNAR
9 MONTH	OFFICE VISIT HGB HIB HEP B IPV
12 MONTH	OFFICE VISIT MMR HEPATITIS A PREVNAR
15 MONTH	OFFICE VISIT VARIVAX HIB DTaP
18 MONTH	OFFICE VISIT HEP A HGB LEAD ASSESSMENT
2 YEAR	OFFICE VISIT
3 YEAR	OFFICE VISIT HGB
4 YEAR	OFFICE VISIT HGB TB ASSESSMENT
5 YEAR	OFFICE VISIT HGB QUADRACEL PROQUAD
6 - 10 YEAR	OFFICE VISIT HGB
11 YEAR	OFFICE VISIT HGB ADACEL GARDASIL MENQUADFI LIPID PROFILE
12 - 18 YEAR	OFFICE VISIT HGB GARDASIL MENQUADFI TRUMEMBA
19 YEAR	OFFICE VISIT HGB ADACEL *(if needed)*

ADACEL (Tdap).....Tentanus, Diphtheria and Acellular Pertussis
B/P ..... Blood Pressure
DTaP .....Diphtheria, Tetanus and Pertussis
HEP A ..... Hepatitis A
HEP B ..... Hepatitis B
HIB .....Haemophilus b Conjugate
HGB ..... Hemoglobin Test
IPV ..... Inactivated Polio
GARDASIL ..... Human Papillomavirus
LEAD ASSESSMENT..... Determines if Lead Test is needed
LIPID PROFILE ..... Cholesterol Screening
MENQUADFI.....Meningitis C
MMR .....Measles, Mumps and Rubella
PREVNAR .....Pneumococcal
PROQUAD ..... MMR and Varcilla
ROTATEQ .....Rotavirus
QUADRCEL .....Diphtheria and Polio
TB ASSESSMENT .....Determines if TB Test is needed
VARIVAX .....Varicella (Chicken Pox)
TRUMEMBA.....Menigitis B