Figure 1. Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger—United States, 2017. (FOR THOSE WHO FALL BEHIND OR START LATE, SEE THE CATCH-UP SCHEDULE [FIGURE 2]).

These recommendations must be read with the footnotes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Figure 1. To determine minimum intervals between doses, see the catch-up schedule (Figure 2). School entry and adolescent vaccine age groups are shaded in gray.

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 yrs	17-18 yr
Hepatitis B ¹ (HepB)	1 st dose	⋖ 2 nd (dose>		≺		3 rd dose										
Rotavirus ² (RV) RV1 (2-dose series); RV5 (3-dose series)			1 st dose	2 nd dose	See footnote 2												
Diphtheria, tetanus, & acellular pertussis³ (DTaP: <7 yrs)			1 st dose	2 nd dose	3 rd dose			⋖ 4 th (lose>			5 th dose					
Haemophilus influenzae type b⁴ (Hib)			1 st dose	2 nd dose	See footnote 4		✓3 rd or 4 See foo	th dose, otnote 4									
Pneumococcal conjugate ⁵ (PCV13)			1 st dose	2 nd dose	3 rd dose		∢ 4 th (l dose>									
Inactivated poliovirus ⁶ (IPV: <18 yrs)			1 st dose	2 nd dose	4		3 rd dose		·····>			4 th dose					
Influenza ⁷ (IIV)							An	nual vaccina	tion (IIV) 1 c	or 2 doses				An	inual vaccina 1 dose oi		
Measles, mumps, rubella ⁸ (MMR)					See foo	tnote 8	∢ 1 st 0	lose>				2 nd dose					
Varicella ⁹ (VAR)							⋖ 1 st 0	lose>				2 nd dose					
Hepatitis A ¹⁰ (HepA)							∢ 2-0	dose series, S	ee footnote	10							
Meningococcal ¹¹ (Hib-MenCY ≥6 weeks; MenACWY-D ≥9 mos; MenACWY-CRM ≥2 mos)						See foo	tnote 11							1 st dose		2 nd dose	
Tetanus, diphtheria, & acellular pertussis¹² (Tdap: ≥7 yrs)														Tdap			
Human papillomavirus ¹³ (HPV)														See footnote 13			
Meningococcal B ¹¹															See footn	note 11	
Pneumococcal polysaccharide ⁵ (PPSV23)													S	ee footnote	5		
Range of recommended ages for all children		Range for cate	of recomme ch-up immu	ended ages unization	5	Rang for ce	e of recomn ertain high-r	nended age isk groups	s	grou	ge of recom ups that may vidual clinic	y receive va	ccine, subje	nigh-risk ect to		No recom	mendat