Vermont Required and Recommended Child & Teen Vaccination Schedule

4/2022

									Requ		
									Prior to Kindergarten	Prior to 7th Grade	
Required for child care ed for school	Vaccine	Birth	2 Months	4 Months	6 Months	12–15 Months	15–18 Months		4–6 Years	11–12 Years	13–18 Years
	Haemophilus influenzae type b (Hib)		Hib	Hib	Hib	Hib		e by age 2			
	Pneumococcal (PCV)		PCV	PCV	PCV	PCV					
	Hepatitis B (HepB)	НерВ	НерВ		НерВ						
	Diphtheria, Tetanus, Pertussis (DTaP)		DTaP	DTaP	DTaP		DTaP		DTaP		
	Poliovirus (Polio) (IPV)		IPV	IPV	IPV			o-dat	IPV		
Required for	Measles, Mumps, Rubella (MMR)					MMR		Children should be up-to-date	MMR		
Redu	Varicella (Chicken pox) ¹					Varicella			Varicella		
	Tetanus, Diphtheria, Pertussis (Tdap)									Tdap	
Special Considerations	Meningococcal ACWY (MCV4) ²									MCV4	MCV4 second dose, at age 16
Sp Consid	Meningococcal B (MenB) ³										MenB 2 doses, ages 16-18
	Hepatitis A (HepA)					НерА	HepA				
nded	Rotavirus (RV1 or RV5)		RV1/RV5	RV1/RV5	RV5						
Recommended	Human Papillomavirus (HPV)									HPV 2 or 3 doses⁴	
Rec	Influenza				Influenza — Every flu season						
	COVID-19				COVID-19 — As recommended by CDC						

¹ Vaccine or documentation of history of disease.

² Recommended for all. Required only for residential students entering 7th grade and newly enrolled in 8-12.

³ Recommendation for MenB vaccine is based on clinical discretion. Beginning at age 16, two doses at least one month apart.

⁴ If you start the series before age 15, only 2 doses are recommended. If you start after age 15 or are immunocompromised, then 3 doses are recommended.

Vermont's immunization schedule is compatible with the current recommendations of the Centers for Disease Control and Prevention (CDC). For more information, contact the Vermont Department of Health Immunization Program:



Phone: 802-863-7638 toll free (in VT): 800-640-4374 website: HealthVermont.gov