RECOMMENDED IMMUNIZATION SCHEDULE

VACCINES	AGE	DOSE	DATE GIVEN / SIGN
BCG	Birth	1st	30/10/19 - SN AISYAH
Hepatitis B	Birth	1st	29/10/19 - SN Ferah
	1 mth	2nd	30/12/19
	6 mths	3rd	28/4/20
DTP-IPV-Hib (5-in-1)	2 mths	1st	30/12/19
or	4 ~~3~~ mths	2nd	28/2/20
* **DTP-IPV-Hib-Hep B**	6 ~~5~~ mths	3rd	28/4/20
(6-in-1)			
Rotavirus x 3	2 mths	1st	30/12/19
	4 mths	2nd	28/2/20
	6 mth	3rd	28/4/20
PCV (Pneumococcal)	2 mths	1st	30/12/19
	4 ~~3~~ mths	2nd	28/2/20
	6 ~~5~~ mths	3rd	28/4/20
	≥ 12 mths	4th	5/11/20
* MMR	9 mth	1st	5/8/20
* **MMR** or **MMRV**	≥ 12 mths	2nd ~~1st~~	5/11/20
Varicella (Chickenpox)	≥ 12 mths	1st	5/11/20
	After 3 mth	2nd	18/5/21
* **DTP-IPV-Hib**	18 mths	booster	18/5/21
* **MMR** or ~~**MMRV**~~	~~15-18 mths~~	~~booster~~	
	6 - 7 yrs	booster	
* **DTP-Polio**	6 - 7 yrs	booster	
* **BCG**	6 - 7 yrs	if no scar	

OTHER IMMUNIZATIONS

		Dose	Date Given / Sign
PCV (Pneumococcal)		1st	
		2nd	
		3rd	
Influenza (Flu)	≥ 7 mths	1st	5/8/2020
		2nd	2/9/2020
		yearly	
Hepatitis A	≥ 2 yr	1st	
		2nd	
Japanese Encephalitis	≥ 1 yr	1st	
		2nd	
		~~3rd~~	
		3 ~~yearly~~	
Meningococcal	≥ 2 yrs	1st	
		3 yearly	
Typhoid	≥ 2 yrs	1st	
		3 yearly	
Others			