## CT Immunization Requirements Schedule For Day Care, Family Day Care, Group Day Care Homes

<table>
<thead>
<tr>
<th>Vaccines</th>
<th>Under 2 months of age</th>
<th>By 3 months of age</th>
<th>By 5 months of age</th>
<th>By 7 months of age</th>
<th>By 16 months of age</th>
<th>16–18 months of age</th>
<th>By 19 months of age</th>
<th>2 years of age (24–35 months)</th>
<th>3 to 5 years of age (36–59 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTP/DTaP/DT</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>4 doses</td>
<td>4 doses</td>
<td>4 doses</td>
</tr>
<tr>
<td>Polio</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 doses</td>
<td>2 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
</tr>
<tr>
<td>MMR</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
</tr>
<tr>
<td>Hep B</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 doses</td>
<td>2 dose</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td></td>
</tr>
<tr>
<td>HIB</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 or 3 doses depending on vaccine given</td>
<td>1 booster dose after 1st birthday</td>
<td>1 booster dose after 1st birthday</td>
<td>1 booster dose after 1st birthday</td>
<td>1 booster dose after 1st birthday</td>
<td>1 booster dose after 1st birthday</td>
</tr>
<tr>
<td>Varicella</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Pneumococcal Conjugate Vaccine (PCV)</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>2 doses given 6 months apart</td>
<td>2 doses given 6 months apart</td>
</tr>
<tr>
<td>Influenza</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses</td>
</tr>
</tbody>
</table>

1 Laboratory confirmed immunity also acceptable
2 A Complete primary series is 2 doses of PRP-OMP (PedvaxHIB) or 3 doses of HbOC (ActHib or Pentacel)
3 As a final booster dose if the child completed the primary series before age 12 months. Children who receive the first dose of Hib on or after 12 months of age and before 15 months of age are required to have 2 doses. Children who received the first dose of Hib vaccine on or after 15 months of age are required to have only one dose
4 Hepatitis A is required for all children born after January 1, 2009
5 Two doses in the same flu season are required for children who have not previously received an influenza vaccination, with a single dose required during subsequent seasons

### Vaccines:
- DTaP-IPV-Hib
- DTaP-Hib
- HIB-Hep B
- DTaP-IPV-Hep B
- MMRV
- PCV 7
- PCV 13
- DTaP-IPV

### Brand Names:
- Pentacel
- TriHibit
- Convax
- Pediarix
- ProQuad
- Prevnar
- Prevnar 13
- Kinrix

### Vaccines:
- Varicella
- Hib
- Influenza
- Hepatitis A

### Brand Names:
- Varivax
- ActHib or PedvaxHIB or Hiberix
- Flumist or Fluarix Fluzone or Fluvirin
- HAVRIX or VAQTA

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