

## Recommended Immunizations for Children Aged

# Birth

Write the Date received in the box next to the vaccine once your child has received it.

**HepB**

**Hepatitis B**

(Dose 1 of 3)

Date received

**RSV\***

**Respiratory Syncytial Virus**

(This dose can be administered anywhere from birth-19 months. Talk to your doctor or health care provider for more information.)

(Dose 1 of 1)

Date received

### FOOTNOTES

#### RSV\*

Your child might need an RSV vaccine. Talk to your doctor or health care provider for more information.



**DISCLAIMER:** Dosages and Vaccinations required are as presented on the CDC's recommended infant vaccination schedule. Contact your health care provider or visit <https://www.cdc.gov/vaccines> for more information.

**Last Updated: April 2024**