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HEALTH MAINTENANCE PLAN

3-5 days after hospital discharge	Check up
1 Month	Check up
2 Month	Check up Pediarix, HIB, Prevnar, Rotateq
4 Month	Check up Pediarix, HIB, Prevnar, Rotateq
6 Month	Check up Pediarix, HIB, Prevnar, Rotateq
9 Month	Check up
1 Year	Check up MMR, Varivax, Prevnar
15 Month	Check up DTaP, Hepatitis A
18 Month	Check up
2 Year	Check up Hepatitis A
3 Year	Check up
4 Year	Check up Kinrix, MMR, Varivax
5 Year	Check up Vision/hearing screening (if not done at school)

Well checks are done yearly after the 5 year check up

11 Year	Check up TdaP, Menactra, Gardasil (female)* Varivax booster if not given previously
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DTaP = Diphtheria, Tetanus, and Acellular Pertussis
IPV = Polio
Hep B = Hepatitis B
Hib = Haemophilus Influenzae type B
Rotateq = Rotavirus
Varivax = Chicken Pox
MMR = Measles, Mumps, and Rubella
Hep A = Hepatitis A
Menactra = Meningococcal

Pediarix = DTaP, IPV, Hepatitis B
TdaP = adolescent Diphtheria, Tetanus, and Acellular Pertussis
Comvax = Hep B/Hib
TriHIBit = DtaP/Hib
Gardasil = HPV (cervical cancer)*
Kinrix = DTaP/IPV
Prevnar = Pneumococcal
 *Gardasil can be given after age 9 (three dose series)