

**Immunization Data****At Birth**

OPV 0

**At Six Weeks**

OPV 1

**At Ten Weeks**

Rota-2

**At Fourteen Weeks**

Rota-3

**At Six Months**

Rota-1

**At Seven Months**

Influenza -2

**At Six to Nine Months**

OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2OPV 2Typhoid Conjugate VaccineTyphoid

**At Nine Months**

MMR 1 (Mumps, measles, Rubella)

**At Twelve Months**

Hepatitis A- 1

**At Twelve To Fifteen Months**

PCV Booster

**At Fifteen Months**

Varicella

**At Sixteen To Eighteen Months**

IPV

**At Eighteen To Nineteen Months**

Typhoid Booster

**At Two Years**

Annual Influenza Vaccine

**At Three Years**

Annual Influenza Vaccine

**At Four Years**

Annual Influenza Vaccine

**At Five Years**

Annual Influenza Vaccine

**At Four To Six Years**



### Emotional Behaviour Assessment

|                        |     |
|------------------------|-----|
| Pediatric Emotional    | Low |
| Attention Problems     | Low |
| Internalizing Problems | Low |
| Externalizing Problems | Low |

### Elements of Lifestyle

#### Appetite

|      |               |       |      |     |           |
|------|---------------|-------|------|-----|-----------|
| Carb | Veggies/Fruit | Sweet | Salt | Oil | Junk food |
|      |               |       |      |     |           |

#### Lifestyle

|       |          |           |            |
|-------|----------|-----------|------------|
| Sleep | Exercise | Lifestyle | Meditation |
|       |          |           |            |

#### Substance

|         |         |         |             |
|---------|---------|---------|-------------|
| Smoking | Tobacco | Alcohol | Other Abuse |
|         |         |         |             |