



**NHVHEALTH**  
DEPARTMENT PROMOTE PREVENT PROTECT

## **NEW HAVEN HEALTH DEPARTMENT**

### **VACCINATION HOURS (3 YEARS+)**

COVID-19 VACCINES AND BOOSTERS, FLU SHOTS,  
ROUTINE CHILDHOOD IMMUNIZATIONS

MONDAY – WEDNESDAY

9:00AM–5:00PM

THURSDAY – FRIDAY

2:00PM–5:30PM

No out of pocket cost, no appointment needed!

### **OTHER HEALTH SERVICE HOURS**

STI TESTING, TUBERCULOSIS TESTING, SCHOOL  
PHYSICALS

TUESDAY–WEDNESDAY

10:00AM–4:00PM

Provide insurance card or  
\$20 out of pocket cost.

**54 MEADOW STREET  
NEW HAVEN, CT 06519**

BRING INSURANCE & PHOTO ID (IF AVAILABLE)  
AGES 3–17 YEARS NEED PARENT/GUARDIAN ON SITE TO SIGN  
CONSENT FORM. SCHEDULE SUBJECT TO CHANGE.

**FOR INFORMATION ON VACCINES & CLINICS,  
VISIT [COVID19.NEWHAVENCT.GOV](https://COVID19.NEWHAVENCT.GOV),  
SCAN QR CODE OR CALL 203-946-6999**





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**DEPARTAMENTO DE SALUD  
NEW HAVEN**

**HORARIO DE VACUNACIÓN (3 AÑOS+)**  
VACUNAS Y REFUERZO DE COVID-19,  
VACUNA CONTRA LA INFLUEZA, VACUNAS  
PEDIÁTRICAS HABITUALES  
LUNES A MIÉRCOLES  
9:00AM-5:00PM  
JUEVES Y VIERNES  
2:00PM-5:30PM

SIN GASTOS DE BOLSILLO, SIN CITA PREVIA

**HORARIO DE OTROS SERVICIOS DE SALUD**  
PRUEBAS DE EST (STI), DE TUBERCULOSIS,  
EXAMENES MÉDICOS ESCOLARES  
MARTES Y MIERCOLES  
10:00AM-4:00PM

PROPORCIONAR TARJETA DE SEGURO O  
\$20 DE COSTO DE BOLSILLO.

**54 MEADOW STREET  
NEW HAVEN, CT 06519**

TRAIGA SEGURO E IDENTIFICACIÓN CON FOTO (SI  
DISPONE DE ELLA)  
LOS NIÑOS DE 3 A 17 AÑOS NECESITAN QUE SUS  
PADRES O TUTORES  
ESTÉN PRESENTES PARA FIRMAR EL FORMULARIO  
DE CONSENTIMIENTO.  
HORARIO SUJETO A CAMBIOS.

**PARA OBTENER INFORMACIÓN SOBRE  
VACUNAS Y CLÍNICAS,  
VISITE [COVID19.NEWHAVENCT.GOV](https://COVID19.NEWHAVENCT.GOV),  
ESCANEE EL CÓDIGO QR O LLAME AL  
203-946-6999**

