



Bright Futures Parent Handout 2 Year Visit

Here are some suggestions from Bright Futures experts that may be of value to your family.

Your Talking Child

ASSESSMENT OF LANGUAGE DEVELOPMENT

- Talk about and describe pictures in books and the things you see and hear together.
- Parent-child play, where the child leads, is the best way to help toddlers learn to talk.
- Read to your child every day.
- Your child may love hearing the same story over and over.
- Ask your child to point to things as you read.
- Stop a story to let your child make an animal sound or finish a part of the story.
- Use correct language; be a good model for your child.
- Talk slowly and remember that it may take a while for your child to respond.

Your Child and TV

TELEVISION VIEWING

- It is better for toddlers to play than watch TV.
- Limit TV to 1–2 hours or less each day.
- Watch TV together and discuss what you see and think.
- Be careful about the programs and advertising your young child sees.
- Do other activities with your child such as reading, playing games, and singing.
- Be active together as a family. Make sure your child is active at home, at child care, and with sitters.

Safety

SAFETY

- Be sure your child's car safety seat is correctly installed in the back seat of all vehicles.
- There should be no more than a finger's width of space between your child's collarbone and the harness strap.

SAFETY

- Everyone should wear a seat belt in the car. Do not start the vehicle until everyone is buckled up.
- Never leave your child alone in your home or yard, especially near cars, without a mature adult in charge.
- When backing out of the garage or driving in the driveway, have another adult hold your child a safe distance away so he is not run over.
- Keep your child away from moving machines, lawn mowers, streets, moving garage doors, and driveways.
- Have your child wear a good-fitting helmet on bikes and trikes.
- Never have a gun in the home. If you must have a gun, store it unloaded and locked with the ammunition locked separately from the gun.

Toilet Training

TOILET TRAINING

- Signs of being ready for toilet training
 - Dry for 2 hours
 - Knows if she is wet or dry
 - Can pull pants down and up
 - Wants to learn
 - Can tell you if she is going to have a bowel movement
- Plan for toilet breaks often. Children use the toilet as many as 10 times each day.
- Help your child wash her hands after toileting and diaper changes and before meals.
- Clean potty chairs after every use.
- Teach your child to cough or sneeze into her shoulder. Use a tissue to wipe her nose.
- Take the child to choose underwear when she feels ready to do so.

How Your Child Behaves

TEMPERAMENT AND BEHAVIOR

- Praise your child for behaving well.
- It is normal for your child to protest being away from you or meeting new people.
- Listen to your child and treat him with respect. Expect others to do as well.
- Play with your child each day, joining in things the child likes to do.
- Hug and hold your child often.
- Give your child choices between 2 good things in snacks, books, or toys.
- Help your child express his feelings and name them.
- Help your child play with other children, but do not expect sharing.
- Never make fun of the child's fears or allow others to scare your child.
- Watch how your child responds to new people or situations.

What to Expect at Your Child's 2½ Year Visit

We will talk about

- Your talking child
- Getting ready for preschool
- Family activities
- Home and car safety
- Getting along with other children

Poison Help: 1-800-222-1222

Child safety seat inspection:
1-866-SEATCHECK; seatcheck.org



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Bright Futures Parent Handout

2 1/2 Year Visit

Here are some suggestions from Bright Futures experts that may be of value to your family.

LANGUAGE PROMOTION AND COMMUNICATION

Learning to Talk and Communicate

- Limit TV and videos to no more than 1–2 hours each day.
- Be aware of what your child is watching on TV.
- Read books together every day. Reading aloud will help your child get ready for preschool. Take your child to the library and story times.
- Give your child extra time to answer questions.
- Listen to your child carefully and repeat what is said using correct grammar.

PRESCHOOL CONSIDERATIONS

Getting Ready for Preschool

- Make toilet-training easier.
 - Dress your child in clothing that can easily be removed.
 - Place your child on the toilet every 1–2 hours.
 - Praise your child when she is successful.
- Try to develop a potty routine.
- Create a relaxed environment by reading or singing on the potty.
- Think about preschool or Head Start for your child.
- Join a playgroup or make playdates.

FAMILY ROUTINES

Family Routines

- Get in the habit of reading at least once each day.
- Your child may ask to read the same book again and again.
- Visit zoos, museums, and other places that help your child learn.
- Enjoy meals together as a family.
- Have quiet pre-bedtime and bedtime routines.
- Be active together as a family.
- Your family should agree on how to best prepare for your growing child.
 - All family members should have the same rules.

Safety

- Be sure that the car safety seat is correctly installed in the back seat of all vehicles.
- Never leave your child alone inside or outside your home, especially near cars
- Limit time in the sun. Put a hat and sunscreen on the child before he goes outside.
- Teach your child to ask if it is OK to pet a dog or other animal before touching it.
- Be sure your child wears an approved safety helmet when riding trikes or in a seat on adult bikes.
- Watch your child around grills or open fires. Place a barrier around open fires, fire pits, or campfires. Put matches well out of sight and reach.
- Install smoke detectors on every level of your home and test monthly. It is best to use smoke detectors that use long-life batteries, but if you do not, change the batteries every year.
- Make an emergency fire escape plan.

SAFETY

SAFETY

Water Safety

- Watch your child constantly whenever he is near water including buckets, play pools, and the toilet. An adult should be within arm's reach at all times when your child is in or near water.
- Empty buckets, play pools, and tubs right after use.
- Check that pools have 4-sided fences with self-closing latches.

PROMOTING SOCIAL DEVELOPMENT

Getting Along With Others

- Give your child chances to play with other toddlers.
- Have 2 of her favorite toys or have friends buy the same toys to avoid battles.
- Give your child choices between 2 good things in snacks, books, or toys.
- Follow daily routines for eating, sleeping, and playing.

What to Expect at Your Child's 3 Year Visit

We will talk about

- Reading and talking
- Rules and good behavior
- Staying active as a family
- Safety inside and outside
- Playing with other children

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Important Milestones By The End Of 2 Years (24 Months)

Children develop at their own pace, so it's impossible to tell exactly when yours will learn a given skill. The developmental milestones below will give you a general idea of the changes you can expect as your child gets older, but don't be alarmed if your child takes a slightly different course.

Social

- Imitates behavior of others, especially adults and older children
- More aware of herself as separate from others
- More excited about company of other children

Emotional

- Demonstrates increasing independence
- Begins to show defiant behavior
- Separation anxiety increases toward midyear then fades

Cognitive

- Finds objects even when hidden under two or three covers
- Begins to sort by shapes and colors
- Begins make-believe play

Language

- Points to object or picture when it's named for him
- Recognizes names of familiar people, objects, and body parts
- Says several single words (by 15 to 18 months)
- Uses simple phrases (by 18 to 24 months)
- Uses 2- to 4-word sentences
- Follows simple instructions
- Repeats words overheard in conversation

Movement

- Walks alone
- Pulls toys behind her while walking
- Carries large toy or several toys while walking
- Begins to run
- Stands on tiptoe
- Kicks a ball
- Climbs onto and down from furniture unassisted
- Walks up and down stairs holding on to support

Hand and Finger Skills

- Scribbles on his or her own
- Turns over container to pour out contents
- Builds tower of four blocks or more
- Might use one hand more often than the other

Developmental Health Watch

Alert your child's doctor or nurse if your child displays any of the following signs of possible developmental delay for this age range.

- Cannot walk by 18 months
- Fails to develop a mature heel-toe walking pattern after several months of walking, or walks only on his toes
- Does not speak at least 15 words
- Does not use two-word sentences by age 2
- By 15 months, does not seem to know the function of common household objects (brush, telephone, bell, fork, spoon)
- Does not imitate actions or words by the end of this period
- Does not follow simple instructions by age 2
- Cannot push a wheeled toy by age 2
- Experiences a dramatic loss of skills he or she once had

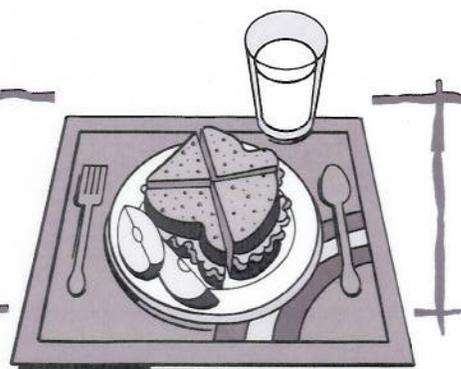
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www.cdc.gov/actearly



Learn the Signs. Act Early.

What's to Eat? Healthy Foods for Hungry Children



A menu for good health

Feeding kids can be challenging because kids can be very picky eaters. Read on for more information about how to please fussy eaters and ideas for healthier fast-food choices. For specific food and nutrition advice, talk with your child's doctor or a registered dietitian.

How much food is enough?

The amount of food and number of servings children need daily from each food group depends on their age and how active they are. Some parents worry because young children seem to eat small amounts of food, especially when compared with adult portions. Don't worry about how little a child eats. A child who is growing well is getting enough to eat. If you are concerned, talk with your child's doctor.

Off to a good start...breakfast

Breakfast gives children energy to carry through an active morning. Children who skip breakfast may not concentrate well at school or may lack energy to play. They also tend to eat unhealthy foods as snacks.

Cereal with low-fat milk is a favorite, but sweetened cereal can have a lot of added sugar. Check the nutrition facts label before buying. Although the percent daily values on food labels are based on calorie levels for adults, they can still be used to select more nutrient-rich cereals (and other foods). Choose cereals with less than 10 grams of sugar and at least 2 grams of fiber per serving. If your child prefers a sweet taste, jazz up unsweetened cereal with sliced peaches or bananas, strawberries, or blueberries.

For children who don't like traditional breakfast foods, like cereal or toast, try one of the following recipes:

- **Breakfast shake:** Combine milk, fruit, and ice in a blender. (See "Milk—whole or reduced fat?")
- **Frozen banana:** Dip a banana in yogurt, then roll it in crushed cereal. Freeze.
- **Leftovers:** Serve whole-wheat spaghetti or chicken hot or cold.
- **Peanut butter snack:** Spread peanut butter on whole-wheat crackers, a tortilla, apple slices, or jicama slices. (See "Safety check.")

Active play is important too!

Physical activity, along with proper nutrition, promotes lifelong health. Active play is the best exercise for kids! Parents can join their children and have fun while being active too. Some fun activities for parents and kids to do together include playing on swings, riding tricycles or bicycles, jumping rope, flying a kite, making a snowman, swimming, or dancing. The daily recommendation for exercise for children (adults also) is at least 1 hour per day. This takes commitment from parents.

Milk—whole or reduced fat?

The following are guidelines about what type of milk to give your child.

Age	Type of milk
Younger than 12 months	Breast milk and/or iron-fortified formula
12 to 24 months	Whole milk. Your child's doctor may recommend reduced-fat (2%) milk if your child is obese or overweight or if there is a family history of high cholesterol or heart disease. Check with your child's doctor or dietitian before switching from whole to reduced-fat milk.
Older than 24 months	Reduced-fat (2%), low-fat (1%), or nonfat (skim) milk

Lunches worth munchin'

Children who help make their own lunches are more likely to eat them. The following are ideas to make lunches fun!

- Use cookie cutters to cut sandwiches into fun, interesting shapes.
- Decorate lunch bags with colorful stickers.
- Put a new twist on a sandwich favorite. Top peanut butter with raisins, bananas, or apple slices.
- For color and crunch, use a variety of veggies as "sandwich toppers": cucumber slices, grated carrots, or zucchini.

Picky eaters

Even the most nutritious meal won't do any good if a child won't eat it. Some children are picky eaters. Others eat only certain foods—or refuse food—as a way to assert themselves. If your child refuses one food from a food group, try another from the same food group. Try these ideas to make your family meals pleasant.

If your child refuses...	Instead try...
Green vegetables	Deep-yellow or orange vegetables
Low-fat milk	Low-fat flavored milk, cheese, or yogurt
Lean beef	Chicken, turkey, fish, or pork

- Boost the nutritional value of prepared dishes with extra ingredients. Add nonfat dry milk to cream soups, milkshakes, and puddings. Mix grated zucchini and carrots into quick breads, muffins, meatloaf, lasagna, and soups.
- Serve a food your child enjoys along with a food that he or she has refused to eat in the past.
- Try serving a food again if it was refused before. It may take many tries before a child likes it.
- Invite children to help with food preparation. It can make eating a food more fun.
- Add eye appeal. Cut foods into interesting shapes. Create a smiling face on top of a casserole with cheese, vegetables, or fruit strips.
- Set a good example by eating well yourself. Ideally, eat at least one meal together as a family every day or try for 3 to 4 times per week.

Hungry and in a hurry? Food for fast times

When it comes to food, families want convenience. It's no surprise that fast-food restaurants are so popular. However, many fast foods have a lot of fat, calories, and salt. Children and adults can afford to eat these foods every once in a while if other food choices are sensible. The following are tips on how to make healthier fast-food choices:

- **At fast-food restaurants**
 - **Share.** Split an order of fries with other family members.
 - **Choose a food from each food group.** Most fast-food places offer a variety of lower-fat choices, including salad bar (low-fat dressing), plain baked potatoes (top with veggies or salsa), chili, low-fat milk, low-fat frozen yogurt, English muffins, or grilled (non-fried) chicken sandwiches.
 - **Substitute.** Order 100% fruit juice (unsweetened) or low-fat milk instead of soft drinks. If dessert is included with a meal, ask if fruit is available instead of a dessert.
 - **Balance high-fat choices with low-fat choices.** Order a small hamburger and the salad bar. Kids often like many foods available on a salad bar like fresh fruit, carrot sticks, and broccoli florets.
- **At the supermarket**
 - **Plan ahead.** It takes less than a minute to fix a sandwich with reduced-fat meat and cheese if you have the ingredients. Check the nutrition facts label on packaged meats because many deli meats are high in fat, like salami and bologna.
 - **Shop for healthier meals.** For grab-and-go meals, try ready-made deli sandwiches (made with reduced-fat deli meats) or roasted chickens served with fresh fruits and vegetables from the salad bar.
 - **Shop for healthier snacks.** Whole-wheat pretzels, baked tortilla chips, and baked potato chips are low-fat alternatives, but watch the salt content.

Safety check

Food safety

Remember 2 important rules to prevent food-borne illness.

1. Everyone should wash their hands well before and after meals.
2. Keep hot foods hot and cold foods cold. When there's no refrigerator to store a bag lunch, the following are ways to keep food safe:
 - Tuck an ice- or freezer-pack into the lunch bag. Or use an insulated container to keep hot foods hot.
 - Add a box of frozen 100% fruit juice (unsweetened).
 - Freeze the sandwich bread and filling—or other freezable foods—the night before.

Choking hazards

Do not feed children younger than 4 round, firm food unless it is chopped completely. The following foods are choking hazards: nuts and seeds; chunks of meat or cheese; hot dogs; whole grapes; fruit chunks (such as apples); popcorn; raw vegetables; hard, gooey, or sticky candy; and chewing gum. Peanut butter can be a choking hazard for children younger than 2.

Peanut allergies

If your child has food allergies, or is diagnosed with peanut or tree nut allergies, avoid nuts and any food that contains or is made with nut products. If nuts are to be eaten away from home, check to make sure there are no children present with nut allergies.

Microwave safely!

A microwave oven can help you cook in a healthful way. Vegetables cooked in a microwave oven stay nutrient-rich. Meat, fish, and poultry dishes can be cooked or reheated with little or no added fat.

Microwaving also can help you cook faster and easier. But it can pose potential hazards—especially when children cook with the microwave oven. BURNS are the most common microwave injury. Children can be burned by

- Removing dishes from the microwave oven—make sure they use a pot holder.
- Spilling hot foods—keep the oven out of a young child's reach.
- Opening microwave popcorn packages and other containers—show older children how to open the container so steam escapes away from their hands and face.
- Eating food that is cooked unevenly or has "hot spots"—show older children how to stir food well before tasting it, or let food "rest" so that heat distributes evenly.
- Use only containers labeled for use in the microwave.

Here's a commonsense rule for microwave ovens: If children are too young to read or follow written directions, they are too young to use a microwave oven without supervision.

MyPyramid.gov food and menu planner

For the latest information from the US Department of Agriculture about making healthy food choices and keeping physically active, visit their Web site at www.mypyramid.gov. MyPyramid offers individualized tools, including a food and menu planner. Dietary information is available for the general public starting at age 2 and older.

Developed in collaboration with the American Dietetic Association (ADA). For more information about the ADA, visit their web site at www.eatright.org.

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From your doctor

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First Steps to a Healthy Smile

Tooth decay is the number-one dental problem among preschoolers, but it can be prevented. Starting children with good dental habits from an early age will help them grow up with healthy smiles. The following is important information about how to care for your child's teeth from birth to 24 months of age and beyond.

Baby teeth are important!

Tooth decay can develop as soon as the first tooth appears. It's important to care for your child's baby teeth because they act as placeholders for adult teeth. If baby teeth are lost too early, the teeth that are left may move and not leave any room for the adult teeth to come in. And tooth decay in baby teeth can be painful and cause health problems like infections, which can at times be life-threatening. It can also lead to teasing and speech development problems.

How to care for your child's teeth

Birth to 12 months

- Good dental habits should begin before the first tooth appears. After feedings, gently brush your baby's gums using water on a baby toothbrush that has soft bristles. Or wipe them with a clean washcloth.
- Ask about fluoride. After the first tooth appears, ask your child's doctor if your baby is getting enough fluoride. Many experts recommend using a fluoride-free toothpaste before the age of 2, but check with your child's doctor or dentist first.
- Schedule your baby's well-child visits. During these visits your child's doctor will check your baby's mouth.
- Schedule a dental checkup. If your baby is at high risk for tooth decay, your child's doctor will recommend that your baby see a dentist.

12 to 24 months

- Brush! Brush your child's teeth 2 times a day using water on a baby toothbrush that has soft bristles. The best times are after breakfast and before bed.
- Limit juice. Make sure your child doesn't drink more than 1 small cup of juice each day and only at mealtimes.
- Consult with your child's dentist or doctor about sucking habits. Sucking too strongly on a pacifier, a thumb, or fingers can affect the shape of the mouth and how the top and bottom teeth line up. This is called your child's "bite." Ask your child's dentist or doctor to help you look for changes in your child's bite and how to help your child ease out of his sucking habit.
- Schedule a dental checkup. Take your child for a dental checkup if he has not had one.

24 months

- Brush! Help your child brush her teeth 2 times a day with a child-sized toothbrush that has soft bristles. There are brushes designed to address the different needs of children at all ages, ensuring that you can select a toothbrush that is appropriate for your child.
Encourage her to brush her teeth on her own. However, to make sure your child's teeth are clean, you should brush them again. If your child doesn't want her teeth brushed, it may help to turn it into a game. For example, the toothbrush can look upstairs and downstairs in the mouth for missing treasure in the teeth.
- Use fluoride toothpaste. You can start using fluoride toothpaste, which helps prevent cavities. Teach your child not to swallow it. Use a pea-sized amount or less and smear the paste into the bristles. Swallowing too much fluoride toothpaste can make white or brown spots on your child's adult teeth. If your child doesn't like the taste of the toothpaste, try another flavor or use plain water.
- Floss. You can begin flossing your child's teeth as soon as 2 teeth touch each other. But not all children need their teeth flossed at this age, so check with your dentist first.
- Schedule a dental checkup. Take your child for a dental checkup at least once a year.

Eating and tooth decay

Parents, especially if they have a history of cavities, can pass germs that cause cavities and gum disease if they share food or drinks with their children. Germs can also be spread when parents lick their children's spoon, fork, or pacifier. This is why it is important for parents to not share food or drinks with their children.

The following are other ways parents can help prevent tooth decay in their babies and children:

- If you put your child to bed with a bottle, fill it only with water.
- If your child drinks from a bottle or sippy cup, make sure to fill it only with water when it's not mealtime.
- If your child wants a snack, offer a healthy snack like fruits or vegetables. (To avoid choking, make sure anything you give your child is soft, easy to swallow, and cut into small pieces no larger than one-half inch.)
- Avoid sweet or sticky snacks like candy, cookies, or Fruit Roll-Ups. There is sugar in foods like crackers and chips too. They should only be eaten at mealtime.
- If your child is thirsty, give him water or milk. If your child drinks milk at bedtime, make sure to clean his teeth afterward. Don't let your child sip drinks that have sugar and acid, like juices, sports drinks, flavored drinks, lemonade, soda pop, or flavored teas.

What is a cavity?

Your child's teeth are protected by an outer coating called *enamel*. Tooth decay happens when germs in the mouth mix with sugar in foods and drinks. The germs then make acids that break down the enamel. Cavities are holes in the enamel caused by tooth decay.

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From your doctor

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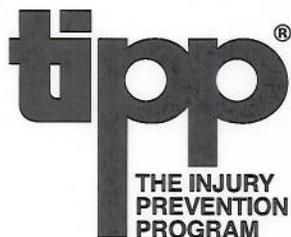
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2 to 4 Years



2 TO 4 YEARS

Safety for Your Child

Did you know that injuries are the leading cause of death of children younger than 4 years in the United States? Most of these injuries can be prevented.

Often, injuries happen because parents are not aware of what their children can do. Children *learn fast*, and before you know it your child will be *jumping, running, riding* a tricycle, and *using tools*. Your child is at special risk for injuries from falls, drowning, poisons, burns, and car crashes. Your child doesn't understand dangers or remember "no" while playing and exploring.

Falls

Because your child's abilities are so great now, he or she will find an endless variety of dangerous situations at home and in the neighborhood.

Your child can fall off play equipment, out of windows, down stairs, off a bike or tricycle, and off anything that can be climbed on. **Be sure the surface under play equipment is soft enough to absorb a fall.** Use safety-tested mats or loose-fill materials (shredded rubber, sand, wood chips, or bark) maintained to a depth of at least 9 inches underneath play equipment. Install the protective surface at least 6 feet (more for swings and slides) in all directions from the equipment.



Lock the doors to any dangerous areas. **Use gates on stairways and install operable window guards** above the first floor. Fence in the play yard. **If your child has a serious fall or does not act normally after a fall, call your doctor.**

Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. It is best to keep all guns out of the home. If you choose to keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. **Handguns are especially dangerous.** Ask if the homes where your child visits or is cared for have guns and how they are stored.



Burns

The kitchen can be a dangerous place for your child, especially when you are cooking. If your child is underfoot, hot liquids, grease, and hot foods can spill on him or her and cause serious burns. Find something safe for your child to do while you are cooking.



Remember that kitchen appliances and other hot surfaces such as irons, ovens, wall heaters, and outdoor grills can burn your child long after you have finished using them.

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If your child does get burned, immediately put cold water on the burned area. Keep the burned area in cold water for a few minutes to cool it off. Then cover the burn loosely with a dry bandage or clean cloth. Call your doctor for all burns. To protect your child from tap water scalds, the hottest temperature at the faucet should be no more than 120°F. In many cases you can adjust your water heater.

Make sure you have a working smoke alarm on every level of your home, especially in furnace and sleeping areas. Test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries at least once a year.

Poisonings

Your child will be able to *open* any drawer and *climb* anywhere curiosity leads. Your child may *swallow anything* he or she finds. Use only household products and medicines that are absolutely necessary and keep them safely capped and out of sight and reach. Keep all products in their original containers.

If your child does put something poisonous in his or her mouth, call the Poison Help Line immediately. Attach the Poison Help Line number (1-800-222-1222) to your phone. Do not make your child vomit.

And Remember Car Safety

Car crashes are the **greatest danger** to your child's life and health. The crushing forces to your child's brain and body in a collision or sudden stop, even at low speeds, can cause injuries or death.

To prevent these injuries, correctly USE a car safety seat EVERY TIME your child is in the car. If your child weighs more than the highest weight allowed by the seat or if his or her ears come to the top of the car safety seat, use a belt-positioning booster seat.

The safest place for all children to ride is in the back seat. In an emergency, if a child **must** ride in the front seat, move the vehicle seat back as far as it can go, away from the air bag.

Do not allow your child to play or ride a tricycle in the street. **Your child should play in a fenced yard or playground.** Driveways are also dangerous. Walk behind your car before you back out of your driveway to be sure your child is not behind your car. You may not see your child through the rearview mirror.

Remember, the biggest threat to your child's life and health is an injury.



From Your Doctor

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Acetaminophen Dosing Information

(Tylenol® or another brand)

Give every 4–6 hours, as needed, no more than 5 times in 24 hours

Weight of child	Age of child	Infant drops  0.8 mL = 80 mg	Children's liquid or suspension  1 tsp (5 mL) = 160 mg	Children's tablets 1 tablet = 80 mg	Junior strength 1 tablet = 160 mg
6–11 lbs (2.7–5 kg)	0–3 mos	0.4 mL (1/2 dropperful)			
12–17 lbs (5.5–7.7 kg)	4–11 mos	0.8 mL (1 dropperful)	2.5 mL (1/2 teaspoon)		
18–23 lbs (8.2–10.5 kg)	12–23 mos	1.2 mL (1½ dropperful)	3.75 mL (¾ teaspoon)		
24–35 lbs (10.9–15.9 kg)	2–3 yrs	1.6 mL (2 dropperful)	5 mL (1 teaspoon)	2 tablets	
36–47 lbs (16.4–21.4 kg)	4–5 yrs		7.5 mL (1½ teaspoons)	3 tablets	
48–59 lbs (21.8–26.8 kg)	6–8 yrs		10 mL (2 teaspoons)	4 tablets	2 tablets
60–71 lbs (27.3–32.3 kg)	9–10 yrs		12.5 mL (2.5 teaspoons)	5 tablets	2½ tablets
72–95 lbs (32.7–43.2 kg)	11 yrs		15 mL (3 teaspoons)	6 tablets	3 tablets

Ibuprofen Dosing Information

(Advil®, Motrin® or another brand)

Give every 8 hours, as needed, no more than 4 times in 24 hours

Weight of child	Age of child	Infant drops  1.25 mL = 50 mg	Children's liquid or suspension  1 tsp (5 mL) = 100 mg	Children's tablets 1 tablet = 50 mg	Junior strength 1 tablet = 100 mg
under 11 lbs (5 kg)	under 6 mos	NOT ADVISED			
12–17 lbs (5.5–7.7 kg)	6–11 mos	1.25 mL			
18–23 lbs (8.2–10.5 kg)	12–23 mos	1.875 mL			
24–35 lbs (10.9–15.9 kg)	2–3 yrs		5 mL (1 teaspoon)	2 tablets	
36–47 lbs (16.4–21.4 kg)	4–5 yrs		7.5 mL (1½ teaspoons)	3 tablets	
48–59 lbs (21.8–26.8 kg)	6–8 yrs		10 mL (2 teaspoons)	4 tablets	2 tablets
60–71 lbs (27.3–32.3 kg)	9–10 yrs		12.5 mL (2½ teaspoons)	5 tablets	2½ tablets
72–95 lbs (32.7–43.2 kg)	11 yrs		15 mL (3 teaspoons)	6 tablets	3 tablets

Name
Sponsor SSN
Phone Number

Date

Modified Checklist for Autism in Toddlers (M-CHAT)

The M-CHAT is designed to screen for Autism Spectrum Disorders in toddlers (i.e., over the age of 12 months, and ideally over the age of 18 months). A parent can complete the items independently. The M-CHAT does not allow a clinician to make a diagnosis of an Autism Spectrum Disorder, but is a very useful clinical tool that has excellent sensitivity and specificity. Positive results suggest a high risk for an Autism Spectrum Disorder, and may necessitate referral.

Please fill out the following about how your child **usually** is. Please try to answer every question. If the behavior is rare (e.g., you've seen it once or twice), please answer as if the child does not do it.

- | | | |
|---|-----|----|
| 1. Does your child enjoy being swung, bounced on your knee, etc.? | Yes | No |
| 2. Does your child take an interest in other children? | Yes | No |
| 3. Does your child like climbing on things, such as up stairs? | Yes | No |
| 4. Does your child enjoy playing peek-a-boo/hide-and-seek? | Yes | No |
| 5. Does your child ever pretend, for example, to talk on the phone or take care of a doll or pretend other things? | Yes | No |
| 6. Does your child ever use his index finger to point, to ask for something? | Yes | No |
| 7. Does your child ever use his/her index finger to point, to indicate interest in something? | Yes | No |
| 8. Can your child play properly with toys (e.g., cars or bricks) without just mouthing, fiddling, or dropping them? | Yes | No |
| 9. Does your child ever bring objects over to you (parent) to show you something? | Yes | No |
| 10. Does your child look you in the eye for more than a second or two? | Yes | No |
| 11. Does your child ever seem oversensitive to noise? (e.g., plugging ears) | Yes | No |
| 12. Does your child smile in response to your face or your smile? | Yes | No |
| 13. Does your child imitate you? (e.g., you make a face-will your child imitate it?) | Yes | No |
| 14. Does your child respond to his/her name when you call? | Yes | No |
| 15. If you point at a toy across the room, does your child look at it? | Yes | No |
| 16. Does your child walk? | Yes | No |
| 17. Does your child look at things you are looking at? | Yes | No |
| 18. Does your child make unusual finger movements near his/her face? | Yes | No |
| 19. Does your child try to attract your attention to his/her own activity? | Yes | No |
| 20. Have you ever wondered if your child is deaf? | Yes | No |
| 21. Does your child understand what people say? | Yes | No |
| 22. Does your child sometimes stare at nothing or wander with no purpose? | Yes | No |
| 23. Does your child look at your face to check your reaction when faced with something unfamiliar? | Yes | No |

Have you ever filled out this form for this child before? Yes No