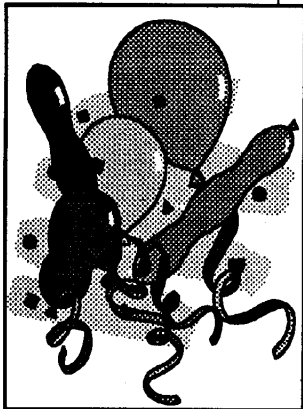

◆C.P.C. Toddler Times◆

1 Year Edition

A publication of Cabarrus Pediatric Clinic



Height:

Weight:

**Head
Circumference:**

*Ideally, all bottle
feeds should be
discontinued by
15 months*

Happy Birthday!

Most parents are amazed at how fast the first year flies by. You are now officially the parent of a toddler. The next year holds at least as much excitement and joy as the first. Over the next 3 to 6 months your child will learn to walk well, will develop a vocabulary of 10 to 50 words, and will feed himself well—if not neatly. Soon, you will have a hard time keeping up with him. Gains in height and weight, on the other hand slow down during this second year. Most children gain only 3-5 pounds over the entire year. This makes all parents nervous, but it's normal.

Your child: *The Great Explorer*

It is important to understand that your child has an unquenchable curiosity at this age. This is how he learns about the world around him. Gradually, he will begin to test the limits that you have set for him. He will also learn that he can say "No" and get his way if he is stubborn enough. Allow him to explore his environment and make some choices, but set firm limits when it comes to dangerous or forbidden activities. In addition, be more firm when behavior is openly defiant (i.e. angrily slapping or biting parent or another child). Time-out is an effective technique to use. If your child misbehaves in an important way despite prior warnings, calmly and quietly pick him up and place him in his empty playpen or crib and leave the room. Wait one minute (per year of age) before returning to him. Tell him "Mommy (or Daddy) loves you but it makes me feel sad when you hit me." Avoid messages such as "You're a bad boy" or "You're mean", rather focus on the way the child's behavior makes *you* feel. Your child needs to know that you love *him* but dislike *his behavior*. Remember to be consistent in enforcing important rules and be sure to praise your child when he behaves in a desirable way.

Nutrition News

Yes, it's true! No more formula! It's time to switch to **whole** milk. Babies need the extra fat in whole milk (rather than skim or lowfat milk) for brain growth. By age 2 years, the majority of brain growth is complete and children should switch to lowfat or skim milk. At this age, your child can eat the same foods as your family, assuming you serve a well balanced meal and you carefully dice foods that are hard to chew. Avoid foods that she could choke on such as hard candy, raw carrots, nuts, popcorn, grapes, hotdogs (unless diced into small bits), and chunks of peanut butter. Vitamin supplementation is not necessary if your child eats a variety of foods. Continue to eliminate daytime bottle feeds by substituting a cup. Ideally, all bottle feeds should be discontinued by 15 months. From 1 to 10 years of age, children need 800 milligrams of calcium a day to help build strong bones. One cup of milk or yogurt supplies 300 mg each. A slice of cheese has 200 mg and 1/2 cup

Good sources of iron

- * red meats
- * chicken
- * fish
- * liver
- * bran cereals
- * blackstrap molasses
- * spinach
- * broccoli
- * other green vegetables
- * enriched pastas, breads, and cereals
- * peanut butter^o
- * raisins, dates, prunes^o

^o-use cautiously due to choking risk

of calcium fortified orange juice contains 160 mg. Orange juice, however, contains no vitamin D or protein and therefore it is not a substitute for milk. **Iron** is equally important for toddlers to prevent anemia (low red blood count). Good sources are listed in the column at left. Note that milk, though a good source of calcium, contains little iron. Therefore do not regularly exceed the 12 to 18 ounces of milk needed for calcium intake. **BE PREPARED FOR AN APPETITE SLUMP DURING THIS SECOND YEAR OF LIFE. IT IS NORMAL!**

Common Illnesses: *Ear Infections*

The majority of children will have had at least one ear infection by age 2. Ear infections occur when bacteria or other germs infect the space behind the eardrum. This is most likely to occur when a child has a cold. The cold causes blockage of the *eustachian tube* which connects the middle ear space to the back of the throat. As a result of the blockage, fluid can collect behind the eardrum and become infected. Ear infections cause ear pain and often irritability and fever. Treatment includes antibiotics and pain relievers such as acetaminophen or ibuprofen. Most ear infections resolve without any complications. Ear infections are not contagious and do not result from getting water in the ear canal. To minimize your child's risk of having recurrent infections limit his exposure to lots of other children with colds (i.e. large daycare settings). Do not allow anyone to smoke in your home or car. Cigarette smoke significantly increases the risk of ear infections, colds, asthma, and other illnesses. Also try to get your child off the bottle as soon as possible. Babies should not take a bottle in bed or lying flat on their back.

Safety

Review the **tipp** safety sheet that you were given today. Remember to post the poison center # (1-800-84-TOXIN) by your phone. Have syrup of Ipecac on hand but do not give it unless you are instructed to do so. For a choking toddler the recommended treatment is now the **Heimlich maneuver**. If the child has a strong cough, or can speak or breathe, do nothing but observe. If not, do the following:

- 1) Stand or kneel behind the child with your arms around her, just below the armpits
- 2) Place your fist with the thumb against the middle of the child's abdomen, just above the navel. Grasp your fist with the other hand.
- 3) Give up to five quick upward thrusts without touching the bones in the chest.
- 4) Repeat steps 2 and 3 until the object is coughed up or the child is able to breathe.

Ask your doctor or nurse to demonstrate. Consider taking a CPR course.

Immunizations

At this visit most children receive immunizations for measles, mumps, rubella, diphtheria, tetanus, pertussis, and hemophilus influenzae. Some children also receive vaccination against chickenpox. You can expect some fever and mild soreness which may be relieved by acetaminophen. The MMR may cause a faint rash about a week after the injection. Call our office if your child has any of the severe reactions listed in the vaccine handouts.

Other instructions:

Next checkup:

18 months