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Your Child at Fifteen Months

Your Next Visit at: 18 months

Immunizations and Tests:

2 injections at today's visit: Varicella #1 and Hib #4.

Some children may develop pain, swelling, fever or rash following the Varicella vaccine. Fevers and rash last about 1-3 days and begin about 10 to 28 days following the injection. Your child may also have a few chicken pox at the site of the injection. These are normal reactions. They may not be allowed to have contact with people who are immunosuppressed (such as at certain points during chemotherapy) within a few weeks after receiving the immunizations. The HIB vaccine for Haemophilus Influenza type B, a bacteria, rarely causes more than slight pain for 1 day after the injection. Acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) may be used following the vaccines.

Development from 15-18 months:

<u>Language</u>: Receptive (what your toddler understands): can point out one body part and one of three named objects, gets an object from another room when asked; Expressive (what your toddler says): Uses 3-5 words and mature jargoning or sounds as if they are talking when they are not and jargons with real words

Gross Motor: Walks well or runs, carries or pushes large objects

<u>Fine Motor</u>: Likes to handle small objects, scribbles, points to body parts

Social: Imitates parent activities, will play next to another child but shares poorly

Early signs of autism: No one-word communications by 16 months of age

Nutrition:

Breastfeeding should continue for as long as mother and baby are enjoying this relationship.

New recommendations from allergists are that there is no reason to delay introducing any particular foods (except for honey) such as egg whites, strawberries or nut products. When introducing new foods, please have Benadryl on hand in the event of a reaction (hives, rash, or swelling of the face). Please

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print the dosing sheet from our website

(http://www.pediatrichealthcare.com/faqs.html) and place the Benadryl and dosing sheet in a ziplock bag so they are together should you need it. If your child has a reaction, give Benadryl and call the office immediately. In the unlikely event that it is a severe reaction where your child has difficulty breathing, call 911 right away. The instructions on the Benadryl indicate that you shouldn't give if under 4 years old because it can be sedating. However, it is safe to give to your baby if they are having an allergic reaction.

If giving milk, provide whole cow's milk—16-24 ounces per day is plenty, do not give more than 24 ounces a day. Try to limit and wean bottle if this has not been done already. No bottle in bed. Offer 3 meals a day including grains, meats, fruits, and vegetables along with good snacks like crackers, cheese, and fruits.

The appetite decreases over the second year as the growth slows and children become more "picky." Continue to offer a variety of healthy choices. Let toddler feed him/herself.

Continue fluoride supplement (by prescription) if drinking water is not fluoridated. Continue Vitamin D supplementation of 600 units per day. If your toddler is eating lean red meats, iron fortified cereals or green vegetables 2-3 times a week, their iron should be fine. They should also be having some vitamin C rich foods because this aids in iron absorption. If you're concerned about their iron intake, please speak to a provider.

New Calcium and Vitamin D Recommendations

 Recommended daily calcium allowance: Depending on your child's age, please see if your child gets enough calcium from their diet and whether they need supplementation.

For all children over the age of 12 months, you will need to supplement only if they are not getting enough through their diet. From 12 months until 4 years you give 700 mg, from 4 years until 8 years you give 1000 mg and 9 years to 18 years 1300 mg, 19 years to 22 years- 1000 mg.

Dietary sources of calcium examples:

Yogurt, lowfat 8 ounces- 300-400 mg Mozzarella, part skim, 1.5 ounces- 300 mg Milk, lowfat, 8 ounces - 300 mg

• Vitamin D is now 600 IU daily for children over 12 months.

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Tooth Care and Tooth Brushing

It is recommended to clean your child's teeth twice a day. Parents must supervise and do the brushing before or after your child until your child is 8 years old or has the manual dexterity to be able to tie their own shoelaces. We recommend that the toothpaste amount be limited to a smear or the size of a grain of rice until 3 years old or a small pea sized amount after 3 years old in case of accidental swallowing of the toothpaste. The use of any toothpaste at all between the age that teeth erupt and 2 years old is currently debated by different health agencies, but limiting it should keep the risk of having too much fluoride down. Your first dental visit should be by two years old if there is no significant family history of dental problems or by 1 if there is such a history. The American Dental Association recommends a first dental visit by 1 year old if you desire.

Safety:

Do not give popcorn, chewing gum, or nuts. Cut meat into small pieces.

Do not allow any access to button batteries because they can cause destructions of the internal tissues if in the nose or airway.

As before: may use a forward facing toddler car seat in the second row when the baby is 12 months old AND 20 lbs. However, the American Academy of Pediatrics now recommends waiting to turn it forward facing until age 2 years.

Car safety, water safety, stair safety should be attended to. Cover unused electrical outlets and use safety devices on windows and screens. Be careful of keeping anything on counters as toddlers begin to be able to reach up to the top of the counter.

If you have guns at home lock them up away from children. Lock up ammunition separately from firearms. Use safety locks. Make sure others you visit do the same.

Set hot water heater temperature at less than or equal to 120 degrees F.

Keep poison control number handy (1-800-222-1222)

Use sunscreen with SPF 15 or greater, and/or cover skin with light-weight clothing and hats to avoid sun tanning.

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Sleep:

Establish a predictable and pleasant bedtime ritual and incorporate reading into this routine. Once put to bed, your child should stay there. Don't use a nightlight in the room as this will encourage waking.

Dental Hygiene:

Use a toddler-size toothbrush moistened with water to clean teeth twice a day. You may use infant toothpaste though it is not necessary. Do not use regular toothpaste because the levels of fluoride are too high for small children. You can consider a visit to the dentist now or at 2 years old.

Guidance:

Give simple directions: tell your child what you want him/her to do. Use time words such as "time for lunch." Continue to play, read, and sing with child. Continue to read simple stories and name objects.

Discipline:

Continue to be consistent with discipline and praise good behavior. Set limits and be consistent. Watch that you are not saying "no" to your child all day longtry to save that word for things that are potentially unsafe or hurtful to others. For example, if your child is standing in a chair, where he might fall, instead of yelling "No! Get down!" say "Chairs are for sitting, the floor is for standing." At the same time, sit him/her down in the chair or stand him/her on the floor to reinforce your words.

Temper Tantrums:

Tantrums occur when a child is becoming more independent and exerting more control. An occasional temper tantrum is a sign of normal development. Some parents find ignoring the tantrum works best; others remove the child from the situation and place them alone in his/her room or in a corner for a short time. Yelling, spanking, and throwing a tantrum yourself are not helpful.

Suggested Reading for Parents:

Your One Year Old: The Fun Loving, Fussy 12-24 Month-old by Louise Bates Ames,

1, 2, 3, The Toddler Years by Irene Van De Zande, Raising your Spirited Child by Mary Sheedy Kurcinka, Your Baby and Child: From Birth to Age Five by Penelope Leach, Child of Mine: Feeding With Love and Good Sense by Ellyn Satter, Positive Discipline A-Z: From Toddlers to Teens, 1001 Solutions to

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Everyday Parenting and Problems by Jane Nelsen, Lynn Lott and Stephen Glenn, Parents, Please Don't Sit on Your Kids by Clare Cherry.