

## WELL CHILD CARE AT 15 MONTHS

### **At Today's Visit**

- We will ask for an update on your toddler's health.
- We will discuss your toddler's growth and development.
- Your toddler will have a physical examination.
- Your toddler will receive immunizations.
- You will have an opportunity to ask questions.

### **Things to Keep in Mind Between Now and the Next Visit**

#### ▪ **FEEDING**

- ▷ Your child should be learning to feed himself. He will use his fingers and maybe start using a spoon. This will be messy.
- ▷ Eat healthy meals together as a family.
- ▷ Make sure to cut the food up into small pieces so your child won't choke.
- ▷ Children need nutritious snacks like cheese, fruit, and vegetables.
- ▷ Whole milk is still recommended for proper brain growth until 2 years of age.
- ▷ Do not use food as a reward.
- ▷ By now, most toddlers should be using a cup only. If your child is still using a bottle, it will soon start to cause problems with his teeth and might cause ear infections. A child at this age will be sad to give up a bottle, so try to replace it with another treasured item - perhaps a teddy bear or blanket.
- ▷ Never let a baby take a bottle to bed.

#### ▪ **DEVELOPMENT**

- ▷ Toddlers are very curious and want to be the boss. This is normal. If they are safe, this is a time to let your child explore new things. As long as you are there to protect your child, let him satisfy his curiosity. Stuffed animals, toys for pounding, pots, pans, measuring cups, empty boxes, and Nerf balls are some examples of toys your child may enjoy. Toddlers start to have temper tantrums at about this age. Trying to reason with or punish your child may actually make the tantrum last longer. It is best to make sure your toddler is in a safe place and then ignore the tantrum. You can best ignore by not looking directly at him

and not speaking to him or about him to others when he can hear what you are saying. Toddlers may want to imitate what you are doing. Sweeping, dusting, or washing play dishes can be fun for children. Reading to your child should be a part of every day. Children that have books read to them learn more quickly. Choose books with interesting pictures and colors. ***Look for the following characteristics in your toddler between 15 and 18 months of age:***

#### **Daily Activities**

- ◆ Avidly explores everything
- ◆ Revels in water play
- ◆ Likes to feed self
- ◆ Begins to use more objects conventionally (for example, may put comb in hair)
- ◆ Enjoys throwing, rolling, pushing, pulling toys

#### **Motor Skills**

- ◆ Stands unsupported
- ◆ Walks without assistance with wide stance and outstretched arms
- ◆ Climbs stairs with assistance
- ◆ Refines grasp
- ◆ Picks up objects from a standing position

#### **Language Development**

- ◆ Adds gestures to speech
- ◆ Prefers adults to other children
- ◆ Likes to watch and imitate activities

#### **Cognitive Development (Thinking and Learning)**

- ◆ Looks to parent for help in solving problems
- ◆ Learns cause-effect relationship (repeats enjoyable actions)
- ◆ Looks for hidden objects in last place seen
- ◆ Begins to experiment through trial and error

#### ▪ **SAFETY TIPS**

- ▷ **ACCIDENTS ARE THE LEADING CAUSE OF SERIOUS ILLNESS AT THIS AGE.**
- ▷ ***Avoid choking and suffocation.*** Keep plastic bags, balloons, and small hard objects out of reach. Use only unbreakable toys without sharp edges or small parts that can come loose. Cut your child's food into small pieces. Toddlers are still at risk for choking on popcorn, hard candy, nuts, chewing gum, and hot dogs.
- ▷ ***Prevent fires and burns.*** Avoid too much direct sunlight, and use sunscreen if outside (SPF 15 or higher, waterproof, broad-spectrum). Keep lighters and matches out of reach. Don't let your child play near the stove. Cover all exposed electrical outlets. Never leave hot liquids on low surfaces. Point pot handles toward the inside of stove surfaces. Set the hot water heater thermostat at or below 120°F (medium setting). Check

your smoke alarms every six months. Protect your child from space heaters, radiators, and warm mist vaporizers.

- ▷ **Prevent drowning.** Toddlers cannot be trusted around water. Watch your child closely around pools. Your child can still drown in the bathtub or in a bucket of water. Do not leave any open pans or buckets of water unattended. Keep toilet seats down.
- ▷ **Avoid falls and cuts.** Lower your toddler's crib mattress. Look for hazards at your toddler's level (stairs, cords, cabinets, windows). Check drawers, furniture, and lamps for stability. Install safety gates to guard stairways. Keep sharp objects out of reach. Low windows need to be securely closed.
- ▷ **Prevent poisoning.** Children at this age are very curious about the world around them. We suggest that you consider putting baby proof latches on all cabinets that your child may reach. Keep any poisonous plants out of reach. Keep all medications, vitamins, and household chemicals securely stored. Poison control's number is **1-800-222-1222** – keep this number on all of your phones. Purchase all medications in containers with safety caps. Syrup of Ipecac is no longer recommended for inducing vomiting after an ingestion in the home.
- ▷ **Outdoor safety.** DEET-containing insect repellants can be used as long as the concentration of DEET is 30% or less. Apply these sprays sparingly on exposed skin, and not on your child's hands, or near the eyes or mouth. Wash treated skin with soap and water after returning indoors.
- ▷ **Guns kill children.** If you have a gun at home, keep it locked and unloaded. Keep the bullets secured in a location separate from the gun.
- ▷ **Pedestrian safety.** Hold onto your child when you are around traffic. Supervise outside play areas.
- ▷ **Car/car seat safety.** Never leave your child alone in the car. Use an approved toddler car seat correctly and wear your seat belt.

#### ▪ **GENERAL RECOMMENDATIONS**

- ▷ Continue reading to your toddler daily. Your child will enjoy “name and object” books.
- ▷ Talk with your toddler about what you are seeing and doing together.
- ▷ Help your toddler express joy, anger, sadness, and fear.
- ▷ Discipline is part of your toddler's education. Toddlers start to have temper tantrums at this age. Setting limits for your toddler is an important skill. Discourage hitting, biting, and aggressive behavior. We suggest you begin by saying “no.” If your toddler does not respond, then remove them from the activity or object. Reward good behavior with praise.
- ▷ Pacifiers should be stopped. A helpful hint may be to cut off 1 mm of the tip every week until your child gives the pacifier up.
- ▷ Limit TV time. The educational benefit is actually low. We suggest no more than 1 hour daily.

- ▷ Your toddler will enjoy learning body parts, and toys that push/pull, fill/empty, and stack.
- ▷ Join play groups and parent support groups.
- **IMMUNIZATIONS**
  - ▷ **At the 15-month visit, your child will receive 2 shots including a:**
    - ◆ Varicella (chicken pox) shot
    - ◆ Hepatitis B shot
    - ◆ *Please refer to your vaccine information statements (VIS) for complete details regarding each vaccine.*
- **IMMUNIZATION SIDE EFFECTS**
  - ▷ Your child may run a fever and be irritable for about 1-2 days after getting shots. Your child may also have some soreness, redness, or swelling at the vaccine sites. Acetaminophen (Tylenol) may help reduce fever and pain. For pain at the sites of the shots, put a cool, wet washcloth on the area as often and as long as needed for comfort.
  - ▷ **Please note:** A small number of children get a fever and rash 7 to 14 days after receiving the chicken pox vaccine. This rash usually appears on the trunk and lasts 2 to 3 days. Call us immediately if the rash changes to purple spots or call us within 24 hours if the rash becomes itchy or lasts more than 3 days.

### **How to Prepare for the Next Visit**

- Please bring in questions and/or observations about your toddler that you would like to discuss.
- Keep track of any illnesses, including visits to other health care facilities and the ER.
- Please bring your vaccine record.
- Please complete the ASQ developmental questionnaire found on our website\* within 1 week of your next well visit.
- Please complete the autism-specific screening tool found on our website\* within 1 week of your next well visit.

### **What to Expect at the Next Visit**

- Your toddler should return when he is **18 months old**.
- Your toddler will have a physical examination.
- We will score and discuss the results of the ASQ developmental questionnaire.
- We will score and discuss the results of the autism-specific screening tool.
- Your toddler will be vaccinated at the eighteen month well child visit against diphtheria, pertussis, tetanus, polio, Hib, and hepatitis A.

\* =found on our web site



## QUESTIONS FOR 15 MONTH VISIT

PATIENT NAME: \_\_\_\_\_

### SLEEP

- Does your child have a transitional object for sleep?  yes  no  
 Does your child have a fairly consistent bedtime?  yes  no  
 Is your child using a pacifier?  yes  no

#### WHERE DOES YOUR CHILD FALL ASLEEP?

- in his/her own room  in a room with a sibling  in his/her parents(s) room  other

#### YOUR CHILD SLEEPS IN:

- a crib  a toddler bed  his/her parent's bed  a twin bed

#### HOW MANY HOURS DOES YOUR CHILD SLEEP AT NIGHT?

- <8  8-10  10-12  >12

#### HOW MANY NAPS DOES YOUR CHILD TAKE IN A DAY?

- 0  1  1-2  2  2-3

#### HOW MANY HOURS OF TOTAL NAP TIME DOES YOUR CHILD SLEEP?

- < 1 hour  1-2 hours  2-3 hours  > 3 hours

#### DOES YOUR CHILD HAVE ANY OF THE FOLLOWING REGARDING HIS/HER SLEEP?

- snoring  restless sleep  is poorly rested after a night of sleep  night terrors  difficulty falling asleep  
 frequent nighttime awakenings  paused or startled breathing during sleep  teeth grinding  nightmares

### VISION

- Do you have any concerns about your child's vision?  yes  no

### HEARING

- Do you have any concerns about your child's hearing?  yes  no

### SAFETY

- Does your child ride in the car using a forward facing car seat with a 5 point harness?  yes  no

#### DO YOU HAVE A POOL?

- Above ground without a fence  Above ground with fence around pool  Above ground with fence around yard  
 In ground without a fence  In ground with fence around pool  In ground with fence around yard

### DEVELOPMENT

- |   |                              |                             |                                   |
|---|------------------------------|-----------------------------|-----------------------------------|
| Laughs aloud  | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Smiles and interacts socially with others                     | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Has a vocabulary of 2-5 words                                 | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Can point to one or more body parts                           | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Understands simple commands                                   | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Walks well, stoops, climbs stairs                             | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Stacks two blocks   | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Listens to a story  | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Indicates what he/she wants by pulling, pointing, or grunting | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Experiences separation anxiety                                | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |
| Experiences stranger anxiety                                  | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> evolving |

M.A.R. 2.2008 SIGNATURE OF PROVIDER: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_