



**HERITAGE**  
PEDIATRICS, PLLC

## Dr. Fitch's 18 month Well Child Handout

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Weight: \_\_\_\_ lbs \_\_\_\_ oz (\_\_\_\_ %)

Height: \_\_\_\_\_ in (\_\_\_\_ %)


Head: \_\_\_\_\_ in (\_\_\_\_ %)

Tylenol dose: \_\_\_\_\_ tsp or \_\_\_\_\_ ml (infant or children's)—4 hours

Ibuprofen dose: \_\_\_\_\_ ml (infant) / \_\_\_\_\_ tsp or \_\_\_\_\_ ml (children's)—6 hours

Benadryl dose: \_\_\_\_\_ tsp or \_\_\_\_\_ ml—every 4-6 hours

### THINGS TO DO:

- Call to schedule your child's 2 year well child visit (call 4-6 weeks ahead). The only timing requirement for the 2 year visit is it needs to be 6 months after the 1<sup>st</sup> Hepatitis A. And, if your toddler has a Fall birthday, they must be 2 to receive a Flumist (if available)
- If your infant didn't get a flu shot last year or only received one flu shot last year and this was their first flu shot today, call to set up 2<sup>nd</sup> flu shot in one month.
- Visit our website: [www.heritagepediatrics.com](http://www.heritagepediatrics.com) for news, announcements, educational materials, health recommendations, and information about our office. Check out my page under the physician tab.
- Follow us on Facebook!! 

### FEEDING:

- I told you at 12 and 15 months that toddlers can become picky anytime between 12 months and 3 years. You may have experienced that in the past 3 months.
- A typical toddler will love a food one day and hate it the next. He / she will go a day or two or even three not eating very much and then eat great the next day. Until your child is 8 (girls) or 9 (boys) variety really means getting something from each food group every 3 or 4 days.
- My advice is still to put good, nutritious food in front of your toddler. If your toddler is hungry, he / she will eat. If they never see it on their plate, they will never try it. Hunger is a good motivator, so use it to your advantage.
- Your toddler is also smart. If they learn that every time I scream I get option B, they will quickly make us a short order cook.
- **New recommendations are for all of us to decrease carbs in our diet. "My plate" should look like 25% fruit, 25% vegetables, 25% protein and only 25% carbs.**
- **The younger a child sees meals placed in front of them in the above ratios and sees what's on mom's and dad's and sibling's plates is exactly what is on their plate, the better chance of developing healthy eating patterns.**



- I want meal times to be fun times. That's not to say there won't be battles. But, I want your toddler to see that it's their battle and not our battle. So, stay relaxed. Calmly respond instead of reacting (that is really hard for me) to normal, picky-toddler eating habits.
- *Choking foods:*  
You still will want to avoid small, hard foods (like peanuts, popcorn, and hard candy) or large foods (like a large piece of steak and raw carrots), or slick foods (like hotdogs and whole grapes).
- *Allergenic foods:*
  - All foods are fair game at this age.
  - As I said at 9 months, peanut butter is now recommended to be introduced in the first year and there is no recommendation to wait on shell fish either.
  - Honey is now approved down to 1 year of age and can be helpful for coughs and as a soothing agent for sore throats.
- Most toddlers are on all table food at 18 months. However, if your toddler will only eat pureed fruits and / or vegetables, it's ok to ride that train as long as he or she will do so.
- Encourage your child to learn to feed him/herself with his/her fingers. This is also the time to introduce utensils to your growing toddler. Remember, at first it will be a bit messy, but with a little time, he / she will become a master at feeding him/herself.
- Limit juice intake to no more than 8 ounces per day.
- Children this age are growing at a much slower pace than they did during their first year. Because of this, they may not eat as much, nor do they need as much to grow well. Keep servings small and try foods again at a later date. Resist those foods that can spoil your child's appetite such as desserts, sweets, punches or soft drinks.
- Meal time should be family time. Discourage "grazing behaviors" by having set meals and if able, have all members of the family eat together. There are great studies of adolescents that show great emotional, psychological, educational, and physical benefits of family meals. So, get in this habit when your child is young. Then this is just part of your routine when life starts getting busy and your school age child becomes a tween and then a teen.

### **Milk:**

- The recommendations are still 2% or whole milk. If there is a family history of cardiovascular disease or obesity, it is recommended to go to 2% (though carbs are probably a bigger issue than healthy fats—see 12 month handout). If your child is slower to move to table food, you can continue with breast milk or formula for now.
- If your child is really picky (no fruits or vegetables) you can still do 1 or 2 bottles formula a day as a vitamin / supplement. You just want to make sure that your child doesn't fill up on milk / formula (see below) which will keep them from being hungry.
- The official amount recommended is 12-24 oz. Though your toddler probably gets 12 oz of calcium in a typical diet without milk, I think there is great benefit of getting your toddler in the habit of drinking milk at meals. When your child is 8 (girls) or 9 (boys), I'm going to recommend that they get 3 glasses of milk a day to meet their calcium needs. So, drinking 3 (8 oz) glasses now is getting them in the habit. If your toddler is getting more than



24 oz of milk in a day, we worry that he / she will fill up on milk and not eat food. If your child is drinking 32 oz and is a good eater, that is ok.

- I'm not an anti-bottle physician. I would much rather your toddler drink milk out of a bottle than no milk out of a sippy cup. I've never had a child go to Kindergarten with a bottle. If you can switch to the sippy cup, that is great (and it doesn't spill as much), but pick your battles. We have to tell our children "no", but pick which hills to die on.

### **WET & DIRTY DIAPERS:**

- Most toddlers are having 1-2 soft bowel movements a day at this point. Every other day is ok as long as it is soft.
- I want to jump on constipation quickly. If your toddler remembers it hurts to go, he / she can start holding it in even at this young age. This can then affect toilet training.
- If your toddler is really straining, having hard little balls, or you see blood, we will introduce measures to soften the stool. This may include a little watered down juice, adding more fruit in the diet, or adding a stool softener to a cup of any liquid.
- Please call our office if bowel movements become a problem.
- Some toddlers (especially those with older siblings) will begin showing interest in toilet training. Signs include telling you they are going or just went; going longer stretches being dry; waking up from nap times dry; wanting to sit on the toilet, flush, or watch others go to the bathroom. From my perspective there is no rush on toilet training. If your child is no closer at 3 years than they are right now, that's ok. You don't want to push the training and create a battle (if it's a battle, they will often begin holding the stool in which can lead to severe constipation), but you also don't want to ignore interest and miss a window of opportunity.

### **SLEEP:**

- Most toddlers are sleeping through the night.
- If at all possible, your toddler should not sleep in the parents' room. Do not allow your toddler to come into your bed if he or she awakens during the night. Check on safety and comfort, but keep him or her in their own bed.
- Establish a bedtime routine and a consistent time for bed. This may include: baths, stories, songs, prayer time, etc.
- Be firm when it comes to bedtime.
- Have a quiet time prior to putting your toddler to bed, so that he or she is not overly excited from play and unable to go to sleep.
- Keep their room dark, dark, dark when they sleep and make their room/ house bright, bright, bright when they wake up (this, and a consistent sleep schedule, may be the most helpful things to set their circadian rhythm).
- Do not allow food or drink in bed. No bottles should be allowed in bed!!!
- Most will transition from 2 naps to 1 nap by 18 months. However, your toddler can take 2 naps as long as that works for your schedule.



**DISCIPLINE** (Remember this means *Training*--also refer to 15 month handout):

The key to understanding your toddler lies with understanding the development of their thought processes. Here are some clues to how their bright and curious minds work:

- He / she has a very short memory (they understand cause and effect but have very little reasoning ability).
- He / she can't think ahead about what might happen.
- He / she can't wait for anything because he / she can't think ahead.
- He / she doesn't understand his / her own feelings.
- He / she may not understand as much as you think.
- His / her use of the word "no" means he's / she's fighting for independence.
- He / she plays next to, but not with, other children.

**DISCIPLINE DO'S:**

- Ignore the undesirable behavior, if possible. They will soon see they are not getting your attention. This behavior is often just to get our attention or get a reaction from us.
- If you are in a place where you can't ignore the behavior, remove them until they are calm and ready to behave properly.
- Distraction often works with younger children.
- Administer a consequence like a Timeout: no attention, no toys, and no fun for a minute or two. This can be in their room, sitting on a step, standing in a corner or sitting on a chair. If one place doesn't work, try another. Remember, consistency is important.
- Don't expect a consequence to "work" at this age. You want them to know they exist.
- I think the two tricks / wisdom of parenting are 1) deciding when do I ignore a behavior versus when do I administer a consequence and 2) which consequence works best (this may seem like it changes from week to week).
- Praise him / her for good behavior.

**Summary: Discipline is a balance of love and limits. If it all love and no limits, we raise a spoiled / entitled child. If it's all limits and no love, we crush their spirits. If there is none of the above we have a delinquent child. The hard part for us parents is calmly responding and not reacting. And, we must enforce "No means No". We all love our kids and want them to have the world; however, whether our child is 18 months or a teenager it's not our job to be their friend. We need to be their parent!!**

**PLAYTIME:**

- Reading stories to your child is always encouraged. Show pictures in the books and have your child name the objects in the pictures. Avoid using talk radio or the TV as background noise; he / she needs to learn that talking means communicating and responding, not just chatter.
- Encourage independent play, but also arrange time with other toddlers. They don't share well at 18 months, but it's good to give them opportunities to practice.
- Rough and tumble play is O.K. Toddlers have lots of energy, so give them opportunities to get the energy out (both inside and outside the house).



- Have your child do small chores, like picking up toys. Give simple commands with no choices (example: "Please bring me the book.")
- It is common for toddlers to touch their genitals during playtime, changing and bath time. When they repeatedly do this, they may find that it feels good and want to continue touching. This can make all of us parents feel uncomfortable, but it is a normal exploratory behavior. Try not to pay too much attention or over react to this behavior. Paying too much attention can actually increase the behavior or shame the child. We want them to know that all parts of their body were created special. As they get older (approaching 3 years old) it is appropriate to let them know that some areas are "special and private" and we don't touch them around others.

### **IMMUNIZATIONS:**

There are no scheduled shots today unless it's the time of year to get a flu shot or there are catch up shots to be given:

#### **(1) Flu (preservative free Influenza)**

- If it is flu season and your toddler hasn't received a flu shot, he / she will receive one today.
- Though we recommend a universal flu vaccine for all our patients, those under 2 years are at the greatest risk for hospitalization and secondary infections resulting in antibiotic administration.
- We recommend the flu vaccine be administered one month before flu arrives in the community. Though it's usually the end of December or later when flu arrives, some years it can come as early as November.
- We use the preservative free flu vaccine for all our infants/ toddlers.
- The first year you get the flu vaccine you get 2 shots a month apart.
- If today was the first flu vaccine (and he / she didn't receive 2 flu shots last year), schedule your toddler to return in 1 month for the second flu vaccine.

### **DEVELOPMENT:**

- Most are walking well and can stoop and stand back up (though a few may have just started walking). Most are also running and climbing and will carry a large toy.
- They can turn a knob; stack 3-4 blocks; and are showing hand preference.
- They are using utensils (though still not well) and are scribbling.
- They may only have 3-5 words but they understand everything.
- They can do a two part command (selectively, ie, if they want to).
- They are pointing to multiple body parts.
- They are communicating by pointing and screaming (this is annoying but it is a huge developmental milestone) or taking your hand and dragging you where they want to go.
- They are showing affection like hugging and kissing (some are more affectionate than others).



- May show parent preference (can develop any time after 6 months). Though this can hurt parents' feelings, this is just a phase that will pass. Continue to hold and love and engage with your toddler.
- Separation anxiety can develop any time after 6 months.

#### **DENTAL CARE:**

- Be sure to brush your toddler's teeth twice a day with a soft toothbrush. A small smear of fluoride toothpaste is ok. If you want more toothpaste, use one without fluoride.
- I suggest you let your child hold the tooth brush both times, but make sure you brush their teeth after they do before bed to prevent milk caries.
- If the tooth brush is a battle, at least wipe the teeth off with a wash cloth before bed. It may still be a battle, but then the battle is with the wash cloth and not the tooth brush.
- We are recommending **Fluoride** application once teeth erupt (we will apply in the office). After studying the recommendation (apply every 3-6 months), I'm convinced it's safe and it's cheap (pennies). If it has the potential to prevent a cavity in an infant or toddler (which would require sedation to fix), I think it's worth it.
- Part of the above new recommendations is for you to see a dentist starting at 12 months. Unless you or I have a concern, I am fine waiting to see the dentist until 3 years of age.

#### **SAFETY:**

- Use an appropriate car seat for every ride. Never leave him alone in the car. The back seat is the safest place to place your toddler, rear-facing until age 2.
- Don't leave a chair near a railing, table, counter, stove or window where a toddler might climb and fall, pull objects down, or get burned.
- Make sure all medicines, household cleaners, and poisons are out of reach. Have the poison control number available: 1-800-222-1222
- Outside play needs to be supervised.
- Don't smoke around your baby.
- Cover all unused electrical outlets and avoid loose or dangling cords.
- Never leave him near a bucket of water, bathtub or a wading/swimming pool; he can drown quickly in just a few inches of water.

Follow us on Facebook 

**Poison Control:**  
**(800) 222-1222**

**Clinic Hours:**  
**Monday – Friday AM:**  
**8:00 am - 12:30 pm**  
**1:30 pm - 4:30 pm**

**FridayPM & Saturday AM**  
**Urgent Care Clinics:**  
**1:30-4:30 PM & 8:00 AM**  
**until last patient is seen**