



HERITAGE
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Dr. Fitch's 3 Year Well Child Handout

Name: _____ Date: _____

Weight: _____ lb (____ %)


Height: _____ in (____ %)

Tylenol dose: _____ tsp or _____ ml (children's 160mg/5ml)—4 hours

Ibuprofen dose: _____ tsp or _____ ml (children's 100mg/5ml)—6 hours

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

THINGS TO DO:

- Schedule your child's 4 year well child visit (4-6 weeks ahead—longer if his /her birthday is in July or August as this is our busiest time of year for check-ups). This **MUST** be **ON** or **AFTER** their birthday. We can do the visit before their birthday but the immunizations must be on or after the birthday.
- Schedule a date night. I re-visited this last year. Mom and dad having time together is important. It only gets harder as they get older, so get in the habit of regular date nights right now.
- Schedule a dentist appointment.
- Visit our website: 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 have told you since your toddler was 1 year old that they can become picky anytime between 12 months and 3 years. You may have experienced that in the past 12 months.
- Most who are still good eaters at 3 will stay good eaters, but they could still become picky.
- The advantage of the 3 year old is they have a little bit of reasoning ability. You can use that to your advantage. You can establish family rules like, "If you don't take 2 bites you don't get seconds, bread, or dessert." This will motivate the 3 year old a little while it would have just frustrated the 18 month old.
- My goal is to get your toddler to take 2 bites / try new foods. It may take 15-20 tries until they like it. If they can add two new foods to their diet each year they will add 30 new foods by the time they graduate from high school.
- If your child is picky and you try to make them a great eater by 4 years old, it won't happen. You will likely get discouraged and be tempted to give up. Make baby steps (take 2 bites and add 2 new foods a year) and you can make some significant progress over time.
- Until your child is a pre-teen (8--girls or 9--boys) variety still means getting something from each food group every 3 or 4 days. At 2 new foods a year, that is 10 new foods for girls and 12 new foods for boys by the time nutrition becomes more important on a meal by meal basis.



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• **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.**

- I want meal times to be fun times. So, stay relaxed. Calmly respond instead of reacting.
- Limit juice intake to no more than 8 ounces per day. 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 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:

- It is recommended to drink skim or 1%, but a low carb diet is more important than lower fat milk.
- The official amount recommended is still 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 keeping 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 (8oz) glasses of milk a day to meet their calcium needs. So, drinking 3 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.

BOWEL HABITS & TOILET TRAINING:

- 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.
- Most toddlers are 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 still no rush on toilet training. 3 out of 4 of my children were 3 or older when they were trained. You don't want to push the training and create a battle (if it's a battle, they will often begin holding in the stool which can lead to severe constipation—believe me you don't want to go there if you can help it), but you also don't want to ignore interest and miss a window of opportunity.
- If you think your child is ready, take a week where you can stay pretty close to home (many schools will assist you during the day while you are out or at work). Start the day in panties/underwear. Take your toddler to go sit on the toilet every hour. If they don't have success, go back every 30 minutes until they go. If you meet a lot of resistance or you have 6 accidents by noon, have a quick retreat plan and try again in a few weeks.
- If your child will urinate but won't have a bowel movement in the toilet, that is ok. I would rather you put a diaper / pull-up on your toddler to go hide under the dining room table and have a bowel movement than hold it in and become constipated (again, don't let the toilet training [especially bowel movements] become a battle).
- This is early to be dry through the night. If your toddler is dry that is great, but expect some accidents (especially during growth spurts, illnesses, or when they are extra tired).



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- I think it makes sense to empty his / her bladder before bed, but besides that, I don't think there is anything you can do to facilitate nighttime dryness at this age. For some children it just takes longer (often there is a family history of prolonged bed wetting). You are ready to make the transition to panties / underwear when your toddler is consistently dry, but you have to define consistently.

SLEEP:

- A 3 year old's bedtime is usually between 7 and 8 pm. They still need 11-12 hours of sleep at night. Establishing a bedtime routine (baths, stories, songs, prayer time, etc.) and a consistent time for bed will help prevent many sleep problems.
- 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, will help to set their circadian rhythm).
- 3 year olds should be expected to fall asleep on their own and remain in their own bed until morning.
- Fears of the dark, thunder, lightning, etc are common at this age. Nightmares will sometimes awaken a child from sleep. Comfort your child and put them back to bed in their own room.
- Most are in a regular bed by 3 years old (but it's ok if they are still in a crib—2 of mine were).
- Be firm when it comes to bedtime especially when they have moved to a regular bed. If they think they have the freedom to get out and explore, they will. Ultimately you can't keep them in a regular bed, but you can keep them in their room. I know this is more challenging when they share with a sibling; however, I'm comfortable (perhaps for a temporary time) doing something to keep them in their room: baby lock, baby gate, etc.
- 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 (us dads often rile them up right at bedtime).
- Most are taking 1 nap at 2 years. However, many will drop a nap over the next year. That doesn't mean they don't need a quiet time. I recommend at least 1-2 hours of a rest time until Kindergarten.

DISCIPLINE (Remember this means *Training*):

- 3 years old is a funny age. Half of parents say, "Things are so much better than 2", while the other half says, "What happened? My child woke up on his / her 3rd birthday and I don't know whose child this is."
- It can still be tough to be a parent of a 3 year old. They continue to assert their independence and they are only beginning to have reasoning ability. As I said last year, remember it's a phase. I know it can be challenging, but remember to enjoy the moment.
- Your mainstay of discipline is still to ignore, redirect, and praise positive behavior (try to catch them being good). Try to respond calmly versus reacting harshly (this is so hard for me).
- Give yourself permission to make mistakes parenting. When you make mistakes, let your kids know and apologize to them. They may learn more from this than all the things we do right.
- Consequences, which were introduced in the last 18 months, are beginning to have an effect as they have some reasoning ability. Though it may not change the undesired behavior, you can see it in their eyes as they weigh the desire to do what they want versus receive a consequence. Often they don't have the self-control to not do what they want to do, but you can see the wheels starting to turn. If a consequence stops getting their attention, try a different place or a different consequence.
- Consistency really is important. In fact, if we are inconsistent we confuse our toddlers and do them a disservice.
- Limit choices (especially if they don't handle being told "no" well). Tell them to do things; don't ask if they want to.
- Setting limits really does give your child freedom. It gives them the freedom to play within the boundaries (just like a fence around a playground on a busy street gives freedom to use the whole playground right up to the fence) .



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- I know sometimes at the end of the day you just want to cry and that's ok. If you really want to cry, read the book, Let Me Hold You Longer by Karen Kingsbury. Remember to laugh as well.
- Feel free to check out my recommended reading list on my page of our website.

(www.heritagepediatrics.com)

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:

- Children at this age enjoy sand and water play, books, and reading.
- Pretend play, using both toys and household objects, is developing. Passive play (such as TV viewing) should be limited to less than 2 hours per day. Let them be creative with art and building materials as well.
- Having direct conversations with your child improves their language development. Early on, children do not learn language from TV or radio. Encourage your child to talk about their day or other topics of interest.
- Show your affection by your behavior, not just words (so give unexpected hugs, quiet time together). Each parent should spend some time alone with each child each day.
- Playmates are important. Allow your child to interact with other children.
- Mother's Day Out programs are great and I encourage moms to get out (without children), however, they are certainly not a must. Your toddler does need to learn how to separate from parents and interact with other children (and adults). However, this can come from playgroups, gym nurseries, church nurseries, baby sitters, cousins, neighbors, etc.
- If your child struggles with separation, I recommend that you drop the child and leave quickly. Let the care providers call you if they need to (give them permission to not call you if they are ok with the crying—ie, not a disruption to the class/nursery). The more they get exposed to this separation, the quicker they will be comfortable with it.
- Sibling rivalry is normal. If both children are over 3 years old, let them work it out a little. If you are always quick to jump in and resolve / fix it for them, they will never learn how to resolve conflict. Afterwards you can praise them for what they did well and correct them on what they did poorly.
- 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 are older now, 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 regular vaccines at this visit except for a flu vaccine during the flu season. If your child is behind on any immunizations, this is a great visit to get caught up:



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(1) Flu (Preservative free Influenza injection or Flumist [if approved and available])

- If it is flu season and your toddler hasn't received a flu vaccine, he / she will receive one today.
- Your toddler is now old enough to receive the nasal Flumist (and may have received this last year—again if approved and available). Though the flu vaccine is different each year (each year it has different strains—now the Flumist and injectable vaccines have 2 A strains and 2 B strains), it is very unusual for us to see any side effects (fever, fussy, or mild flu-like symptoms) from the Flumist. Side effects from the flu shot are usually minimal (fever/fussy) but this can vary depending on the year.
- I am comfortable giving the Flumist to my asthmatic / wheezing patients as long as he / she are well controlled and not currently wheezing/ coughing.
- I believe in the universal flu vaccine recommendation for all my patients. The benefits include studies that show: decreased hospitalization (especially for the young and old), decreased antibiotic use for secondary infections, and herd immunity for the community.
- We recommend the flu vaccine be administered by the end of October. Ideally, you want to receive it one month before flu arrives in the community.

DEVELOPMENT:

- Most can stand on 1 foot, jump, pedal a tricycle, alternate feet going up stairs, and walk on tiptoes (if your toddler does this a lot have them wear shoes inside to keep this from becoming a habit).
- Most can copy a circle, plus sign and square, and can string large beads.
- They can color, but don't stay in the lines well.
- Most can use a fork and spoon well and a cup (still may be messy).
- Most are using multiple word sentences.
- Someone who knows the child well will probably understand 90% or more of their speech, but an outside observer may only understand 50% (if they feel comfortable [not shy] talking to the person).
- Most know first and last name and know their gender.
- They are beginning to recognize colors.
- They can brush their teeth with help; they can undress themselves and put on a shirt.
- They enjoy playing with friends, and are beginning to share, participate in pretend play, and listen to short stories.
- 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, love, and engage with your toddler.
- Separation anxiety can develop any time after 6 months.

DENTAL CARE:

- I recommend seeing a dentist this year. I want the first visit to be a happy visit so your toddler will want to go back. If they don't do a whole lot at this first visit, that is ok.
- 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.
- 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.

SAFETY:



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Injuries are the number one cause of death for children with almost half of injuries involving motor vehicles.

- Children should remain in car seats or convertible seats until they out-grow them (usually around age of 5 and/or 40 pounds.) They should be restrained in belted booster seats until they are at least 8 years old (or over 4'9" tall). The back seat is the safest place for children to ride.
- Poison-proof your house. Check storage cabinets for kerosene, solvents, paints and removers, and drain cleaners. Keep these items (and all medicines) out of reach and locked up. Never refer to medication as "candy." Call the Poison Control Center if your child puts something poisonous in his mouth.
- Always supervise your child when he / she is playing near a street. Remember, a 3 year old child does not understand danger or remember "no"; your child cannot be counted on to be aware of outside hazards.
- Insist on a smoke-free house and car; check batteries in smoke detectors on daylight savings dates (spring/fall).
- If you choose to have a gun in the house, keep it unloaded and in a locked place separate from the ammunition.
- Start to teach your child his / her full name, address, and phone number. Start to teach stranger safety – not to follow strangers and not allow themselves to be touched by others in ways they don't like.

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Poison Control:
(800) 222-1222

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

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