



One Year Preventive Exam

Development

Many one-year-olds are beginning to walk. Some children walk as early as 10 months of age, others don't take that first step until about 15 months. He should pick up small objects with a 2 finger pincer grasp. Children also begin to say words at about a year of age. Most one-year-olds are starting to use a couple of syllables together. You can help your child's developmental progress by giving him plenty of opportunities to move around furniture on carpeted floors and by talking a lot. Explain everything that you are doing with your child. Tell your baby what he is eating, playing with, or wearing. Teach body parts and animal sounds. Reading provides an excellent speech model and teaches object permanence. By 15 months of age, most children understand speech and are using at least 5 words. Research shows toddlers at this age cannot learn information from screens. Don't have the TV on during meals or as background noise. Consider making a family media plan to limit screen time for all family members (see <https://www.healthychildren.org/English/media/Pages/default.aspx>).

A child this age starts to recognize what is permitted, but may try something that is forbidden while watching his parent's reaction. This is normal behavior and part of the process of internalizing rules. Tantrums become more frequent as he tries to master these skills & moves towards independence. Try not to punish him with spanking, shouting, or long explanations. Redirecting or distracting your child with something new can help to reduce unwanted behaviors. Use positive language to describe behaviors you desire as much as possible, such as "time to sit" and "don't stand." Try to limit the use of "no" and praise good behaviors by describing what he has done that made you happy.

Diet

Your child may now eat all types of foods in a high chair or booster seat. She may eat less now and toddlers often graze. Your toddler's appetite will vary; eating a lot at one time, and not much the next. You can introduce cow's milk. Ask your pediatrician if they recommend whole milk or low fat milk for your child. Milk should now be thought of as something to drink with meals rather than a meal itself, no more than 16-24oz/day. The only foods to avoid are hard things that might cause choking or aspiration. These include peanuts, hard candy, popcorn, nuts, hard raisins, seeds, and hard pieces of meat. Grapes should be cut in half and hot dogs should be cut into small pieces. Aim for 2-3 oz servings of protein such as eggs, lean meat, chicken or fish.

Oral health

Gently clean your baby's teeth and gums twice a day. All infants need a source of fluoride so if your water does not contain fluoride use a smear of fluoridated toothpaste, no larger than a grain of rice. Avoid baby foods or juices that toddlers have to suck out of a bag or pouch as his teeth or gums will be in contact with pureed food longer than necessary, which can lead to tooth decay. Avoid sharing utensils with him or putting his pacifier in your mouth because it introduces your own bacteria into your toddler's mouth, which can contribute to tooth decay. He should now be drinking out of straw cups or no spill cups so that the bottle can be discontinued.

Safety

Keep baby powder, household cleaners, tide pods, and E-Cigarettes out of reach as accidental ingestions and aspirations may occur. Nicotine cartridges from e-cigarettes are especially dangerous. Keep firearms locked up. Avoid baby walkers and Bumbo sitters. It's important to keep your car, home, and other places where your baby spends time free of tobacco smoke and E-cigarette vapor. Now is a good time to make sure your house is child-proofed if you have not already done so. Install electrical outlet guards, place safety gates at the top & bottom of stairs, bolt down furniture as needed, and install child-proof latches. Make sure the crib mattress is at the lowest level. Move dangerous chemicals such as those found in drain cleaners and dish-washing detergents out of your baby's reach. Some house plants are poisonous, so move them up high, too. If your child ingests anything potentially poisonous, **call Poison Control at 800-222-1222**. Keep this phone number by your phone.

New car seat recommendations came out in 2018. Use an approved, rear-facing car seat. Your child may have outgrown the infant rear facing seats and you can transition to a convertible or 3-in-1 car seat approved for rear facing to higher weights and heights. Your child will be the safest if rear facing until she outgrows the manufacturer limits (for height/weight) of the car seat, which should be beyond 2 years old. Your own safe driving behaviors are important as well. Use a seat belt, do not drive under the influence of drugs or alcohol, and do not text or use mobile devices while driving.

As your child becomes more mobile, it is extremely important to supervise her around any body of water. If you have a pool, it should be fully enclosed and equipped with self-closing gates. Buckets of water and kiddie pools should be emptied when not in use. REMEMBER, IT ONLY TAKES SECONDS TO DROWN. Sun exposure should be limited at any age, but a baby's skin can be especially sensitive. When outside, protective clothing should be worn and sunscreen should be applied. Click here for a [sunscreen](#) page in the parent information section of our website for more information.

Social connections, child care

Carve out time for family each day. Use this time to focus on your children through games, story-telling, reading aloud, pointing and naming, listening to music, laughing, and playing. Make sure to discuss your child's medical needs and your feelings about healthy diet, discipline, oral health, physical activity, and media use with all caregivers. Maintain or expand ties to your community through friends and social, faith-based, cultural, volunteer, and/or recreational organizations.

What to expect at this visit

A developmental screen should be completed before the visit. A blood test to check for anemia called a Hematocrit and a test for lead will be done from a heel stick. You will know the results before leaving the office. Immunizations given at this visit include: MMR (Measles, Mumps, and Rubella), Varicella (Chicken Pox) vaccine, and Hepatitis A. Flu vaccine may be given at this visit, if in season. Fever and a rash that can look like measles, mumps, rubella, or varicella can occur 5 days to 3 weeks after vaccination. Use acetaminophen or ibuprofen as needed. See our [Medication Dosing Guide](#) for recommended dosing. Please call if a more severe reaction occurs (Fever of 105, convulsions, collapse, inconsolable for more than 3 hrs).

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