



Partners in
Pediatrics

Naturally Healthy Kids Since 1977

HAPPY BIRTHDAY!

WELL-CHILD CARE

AGE: 12 MONTHS

GROWTH:

Weight: lb. oz. (%)

Height: inches (%)

Head Circumference: inches (%)

IMMUNIZATIONS:

Diphtheria

Tetanus

Acellular pertussis

Pentacel (DTaP, Hib, IPV)

Hemophilus B

Hepatitis B

Hepatitis A

Measles, Mumps, Rubella

Chicken Pox vaccine

Pneumococcal

IPV (Injectable Polio)

Flu Vaccine (seasonal)

COVID

Development:

SCREENING:

Hgb

GENERAL PARENTING ISSUES:

1. NUTRITION

If they haven't already, your child may now eat **all** foods, EXCEPT obvious choke-inducing foods, such as peanuts, popcorn, etc. You may now add honey. Please don't allow your child to wander with food in their mouth, as their risk of choking is greatly increased. You may cautiously add **spicy** foods and occasional **sweets**. Hopefully by now your child is eating what the family is eating, and textures are gradually increasing toward full adult food texture.

A. Calcium Requirements

Your child needs **3 servings of calcium rich foods per day** for adequate daily intake. Examples of calcium rich food serving sizes are:

- (1) 6 oz. of 2% or whole milk
- (2) 3-4 oz. of yogurt (avoid "non-fat")
- (3) 8 oz. of cottage cheese (2 - 4% fat)
- (4) 1 oz. of hard cheese
- (5) Two breast feedings
- (6) 6 oz. of calcium enriched almond or soy milk
(5 grams of fat per serving)

If your child does not meet these requirements, please consult us for recommendations regarding **calcium supplementation or calcium rich foods**.

2. SELF-FEEDING TECHNIQUES

A. Bottle

This is an important time to begin the process of **weaning** the bottle. There are three reasons for this:

- To protect your child's teeth.
- This is a developmental age when children are more receptive to changes in old habits than they will be in a few months.
- Excessive use of the bottle may inhibit speech development.

Over the next several weeks you should begin practicing intensely with the cup. Once your child has established a good level of competency with the cup, the process of weaning the bottle can begin.

Make a list of the times your child is offered a bottle and which of these appears most important to you and your child for comfort and convenience. Then,

begin to eliminate the least important bottle, one bottle per week, and substitute this bottle with a cup. Upon nearing completion of this process, begin offering water in these remaining bottles as a method of further enhancing your baby's disinterest in the bottle.

Use of the nighttime bottle genuinely endangers your child's teeth and is strongly discouraged. Please refer to the sleep section in this handout on guidelines for establishing new bedtime routines.

Once the cup use routine has become a firm habit, remove the bottle from the program.

ALL bottles, both daytime and nighttime, should be eliminated by 15 months. You may now notice that your child will drink fewer liquids overall, including milk. A rough estimate of daily FLUID intake is 16-20 ounces per day with larger volumes as required during warmer weather. Some use of the pacifier is acceptable. Its use, however, should begin to be limited to nap times, long car trips, etc., as a method of promoting relaxation. Try to eliminate the pacifier by 18 months. You will note better speech development progress!

B. Utensils

Begin practicing with spoons and forks now. Close supervision is mandatory, especially with forks. Don't expect good results initially. **Most** children are not efficient with utensils until 15-18 months. **Don't** allow your toddler to walk around with utensils — that can lead to serious injury. Your child should be seated.

3. VITAMINS

Most healthy, growing children do not need a multivitamin. Exceptions are children with certain chronic diseases or children with a restricted diet due to multiple allergies. If you have any questions please speak to your provider.

4. SLEEP

Please refer to our recorded sleep classes on our PIP website and the 9-month sheet. Many children between 12 and 15 months



will change from two naps to one per day, if they haven't already done so.

This is an excellent age to develop a bedtime ritual to enhance your child's ability to go to sleep (or self-induce sleep) more independently.

The ritual should include a routine of clothes changing, hygienic activity (e.g., tooth brushing, face washing, etc.) followed by cuddle time in a comfortable chair with a story, lullaby, etc. Then put your child to bed awake but drowsy.

Not only are these precious moments, but they really help a toddler develop independent sleep induction skills, making them more flexible in sleep behavior.

The following is an effective technique to eliminate the nighttime bottle with minimal trauma: A **bedtime ritual** should now be established. The ritual should include.



- Hold your child in your lap in a quiet room, preferably their own bedroom.
- The child should be offered the cup or bottle with a minimum amount of only water (remember milk residue on the teeth leads to cavities).
- **A bedtime story or lullaby should be the main focus of attention at this time.**
- Also, a soft object (cloth blanket) can be placed in the lap to encourage **transfer of security from bottle to this object.**

5. STOOLS

Stool frequency generally ranges from 3 to 4 times per day to once every other day. As long as the infant is comfortable, this amount of variation is fine.

6. TEETH

Brush teeth 1-2 times per day. Use a small **toothbrush** with scant **toothpaste**, and brush all teeth and gums. Parents should always brush baby's teeth first, then baby can play with the toothbrush while seated. If your baby absolutely refuses to let you brush their teeth, try using a wet washcloth to wipe their gums and teeth.

For those infants in the "family bed" and nursing during the night, you should know that pooled breast milk around the teeth can lead to the rapid development of **tooth decay**.

Pediatric dentists like to do a first dental exam for your child at this age. They can also provide valuable tips for brushing and caring for your child's teeth.

7. LEAD SCREENING

As discussed in the 6-month handout, if you still have questions concerning lead exposure, discuss this with your health-care provider.

8. TELEVISION/ SCREENTIME EXPOSURE

Please limit the use of "screen time" (all screens, smart phones, tablets, computers and TV's as well as electronic toys). There is overwhelming evidence that they have a significant impact on the developing brain and can have a major impact on socialization, communication, and attention. We recommend that these devices only be used by your child in situations where all other interactions and distractions are not keeping them content. The goal should be **NO** screen time in this age group.

DEVELOPMENT/STIMULATION:

Most children are upright now, with independent walking being the major means of mobility. Of course, with this accomplishment comes the beginning of climbing. Be certain that toys are sturdy and in a safe place. Some babies begin climbing upstairs. Coming downstairs is more difficult.

Along with increased mobility comes an ability to sit longer, especially with entertainment. Many of the toys mentioned in the last handout are appropriate, as sophistication of play is a natural progression and children enjoy repetition and perseverance as they move through each stage.

They now enjoy turning pages of a book, talking on a play phone, and beginning to play imitatively. A kitchen cupboard with non-harmful pots and pans (old plastic containers) and spoons for stirring are good. They also enjoy pouring water in the bathtub or sand in the sandbox. Some very simple first words are also emerging, so objects such as a cup, spoon (and other one syllable words) are good toys.

Children also enjoy imitating activities of daily living such as brushing hair, pouring, stirring, and washing their face. These activities can be incorporated into imitative games.





HOMEWORK ASSIGNMENTS:

1. Place finishing touches on **safety-proofing** your home with emphasis on the mobile child.
2. Visit this site to read up to date information, research and tips for parents regarding media exposure and children at www.cmch.tv.
3. Make an appointment with a pediatric dentist for your child's first dental exam.

COMING NEXT:

1. The next appointment is at 15 months.
2. Recommended vaccines.

YOUR NOTES:

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visit us at

www.partnersinpediatrics.com