BRIGHT FUTURES HANDOUT ► PARENT 21/2 YEAR VISIT

Here are some suggestions from Bright Futures experts that may be of value to your family.





FAMILY ROUTINES

- Enjoy meals together as a family and always include your child.
- Have quiet evening and bedtime routines.
- · Visit zoos, museums, and other places that help your child learn.
- Be active together as a family.
- Stay in touch with your friends. Do things outside your family.
- Make sure you agree within your family on how to support your child's growing independence, while maintaining consistent limits.



LEARNING TO TALK AND COMMUNICATE

- Read books together every day. Reading aloud will help your child get ready for preschool.
- Take your child to the library and story times.
- Listen to your child carefully and repeat what she says using correct grammar.
- · Give your child extra time to answer questions.
- Be patient. Your child may ask to read the same book again and again.



GETTING ALONG WITH OTHERS

- Give your child chances to play with other toddlers. Supervise closely because your child may not be ready to share or play cooperatively.
- Offer your child and his friend multiple items that they may like. Children need choices to avoid battles.
- Give your child choices between 2 items your child prefers. More than 2 is too much for your child,
- Limit TV, tablet, or smartphone use to no more than 1 hour of high-quality programs each day. Be aware of what your child is watching.
- Consider making a family media plan. It helps you make rules for media use and balance screen time with other activities, including exercise.



GETTING READY FOR PRESCHOOL

- Think about preschool or group child care for your child. If you need help selecting a program, we can give you information and resources.
- Visit a teachers' store or bookstore to look for books about preparing your child for school.
- Join a playgroup or make playdates.
- Make toilet training easier.
 - Dress your child in clothing that can easily be removed.
 - Place your child on the toilet every 1 to 2 hours.
 - Praise your child when he is successful.
- · Try to develop a potty routine.
- Create a relaxed environment by reading or singing on the potty.

21/2 YEAR VISIT—PARENT



- Make sure the car safety seat is installed correctly in the back seat. Keep the seat rear facing until your child reaches the highest weight or height allowed by the manufacturer. The harness straps should be snug against your child's chest.
- Everyone should wear a lap and shoulder seat belt in the car. Don't start the vehicle until everyone is buckled up.
- Never leave your child alone inside or outside your home, especially near cars or machinery.
- Have your child wear a helmet that fits properly when riding bikes and trikes or in a seat on adult bikes.
- Keep your child within arm's reach when she is near or in water.
- Empty buckets, play pools, and tubs when you are finished using them.
- When you go out, put a hat on your child, have her wear sun protection clothing, and apply sunscreen with SPF of 15 or higher on her exposed skin. Limit time outside when the sun is strongest (11:00 am-3:00 pm).
- Have working smoke and carbon monoxide alarms on every floor. Test them every month and change the batteries every year. Make a family escape plan in case of fire in your home.

WHAT TO EXPECT AT YOUR CHILD'S 3 YEAR VISIT

We will talk about

- Caring for your child, your family, and yourself
- Playing with other children
- Encouraging reading and talking
- Eating healthy and staying active as a family
- Keeping your child safe at home, outside, and in the car

Consistent with Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition

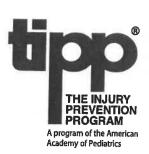
For more information, go to https://brightfutures.aap.org.

The information contained in this handout should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Original handout included as part of the *Bright Futures Tool and Resource Kit*, 2nd Edition.

Inclusion in this handout does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of the resources mentioned in this handout. Web site addresses are as current as possible but may change at any time.

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2 TO 4 YEARS

Safety for Your Child

Did you know that injuries are the leading cause of death of children in the United States? Most of these injuries can be prevented.

Often, injuries happen because parents are not aware of what their children can do. Children *learn quickly*, and before you know it your child will be *jumping*, *running*, *riding* a tricycle, and *using tools*. Your child is at special risk for injuries from falls, drowning, poisons, burns, and car crashes. Your child doesn't understand dangers or remember "no" while playing and exploring.

Falls

Because your child's abilities are so great now, he or she will find an endless variety of dangerous situations at home and in the neighborhood.

Your child can fall off play equipment, out of windows, down stairs, off a bike or tricycle, and off anything that can be climbed on. **Be sure the surface under play equipment is soft enough to absorb a fall.** Use safety-tested mats or loose-fill materials (shredded rubber, sand, wood chips, or bark) maintained to a depth of at least 9 inches underneath play equipment. Install the protective surface at least 6 feet (more for swings and slides) in all directions from the equipment.



Lock the doors to any dangerous areas. **Use gates on stairways and install operable window guards** above the first floor. Fence in the play yard. **If your child has a serious fall or does not act normally after a fall, call your doctor.**

Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. It is best to keep all guns out of the home. If you keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. **Handguns are especially dangerous.** Ask if the homes where your child visits or is cared for have guns and how they are stored.



Burns

The kitchen can be a dangerous place for your child, especially when you are cooking. If your child is underfoot, hot liquids, grease, and hot foods can spill on him or her and cause serious burns. Find something safe for your child to do while you are cooking.



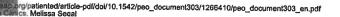
Remember that kitchen appliances and other hot surfaces such as irons, ovens, wall heaters, and outdoor grills can burn your child long after you have finished using them. Also, when you use the microwave stay nearby to make sure your child does not remove the hot food.

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If your child does get burned, immediately put cold water on the burned area. Keep the burned area in cold water for a few minutes to cool it off. Then cover the burn loosely with a dry bandage or clean cloth. Call your doctor for all burns. To protect your child from tap water scalds, the hottest temperature at the faucet should be no more than 120°F. In many cases you can adjust your water heater.

Make sure you have a working smoke alarm on every level of your home, especially in furnace and sleeping areas. Test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries at least once a year.

Poisonings

Your child will be able to *open* any drawer and *climb* anywhere curiosity leads. Your child may *swallow anything* he or she finds. Use only household products and medicines that are absolutely necessary and keep them safely capped and out of sight and reach. Keep all products in their original containers. Use medications as directed and safely dispose of unused medicine as soon as you are done with it.

If your child does put something poisonous in his or her mouth, call the Poison Help Line immediately. Add the Poison Help number (1-800-222-1222) to your phone contacts list. Do not make your child vomit.



Car crashes are the greatest danger to your child's life and health. The crushing forces to your child's brain and body in a collision or sudden stop, even at low speeds, can cause injuries or death.

To prevent these injuries, correctly USE a car safety seat EVERY TIME your child is in the car. It is safest for children to ride rear facing as long as possible, until they reach the highest weight or height allowed by the manufacturer. Many convertible seats have limits that will permit children to ride rear facing for 2 years or more. When they outgrow rear facing, children should ride forward facing in a car safety seat with a harness. Many of these can be used up to 65 pounds or more, and this will help provide the most protection possible.

The safest place for all children to ride is in the back seat. In an emergency, if a child must ride in the front seat, move the vehicle seat back as far as it can go, away from the airbag.

Do not allow your child to play or ride a tricycle in the street. Your child should play in a fenced yard or playground. Driveways are also dangerous. Walk behind your car before you back out of your driveway to be sure your child is not behind your car. You may not see your child through the rearview mirror.

Remember, the biggest threat to your child's life and health is an injury.

From Your Doctor

LIVE WELL PEDIATRICS

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TIPP®-The Injury Prevention Program

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Toilet Training





Teaching your child how to use the toilet takes time and patience. Each child learns to use the toilet in his or her own time. Here is information from the American Academy of Pediatrics to help guide you and your child through the process.

When is a child ready?

Children have no control over bladder or bowel movements before age 12 months. Many children start to show signs of being ready between 18 and 24 months of age. Some children may not be ready until 36 months or older. Remember that it's normal for time frames to vary.



Most children can control their bowels and daytime urine by 3 to 4 years of age. Your child is able to stay dry during the day before being able to be dry at night. Most children are able to stay dry at night between 5 to 7 years of age.

Is your child ready?

Here are signs that your child may be ready.

- Your child is dry at least 2 hours at a time during the day or is dry after naps.
- You can tell when your child is about to urinate or have a bowel movement.
- Your child can follow simple instructions.
- Your child can walk to and from the bathroom and help undress.
- Your child does not like wet diapers and wants to be changed.
- Your child asks to use the toilet or potty chair.
- Your child asks to wear "big-kid" underwear.

If your child has issues with constipation, talk with your child's doctor.

Toilet training tips

- Decide which words to use. Choose the words your family will use to describe body parts, urine, and bowel movements. Don't use the words dirty, naughty, or stinky.
- Pick a potty chair. A child's feet should be able to reach the floor. Books or toys for "potty time" may help make this time more fun.
- Be a role model. Let your child see you use the toilet and wash your hands afterward.
- 4. Know the signs. Your child may grunt or make other noises, or squat, or stop playing for a moment. When pushing, his face may turn red. Explain briefly to your child that these signs mean a bowel movement is about to come. If your child waits to tell you about a wet diaper, praise him for telling you. Suggest that "next time" he let you know in advance. It may take longer for a child to notice the need to urinate than the need to move bowels.

5. Make trips to the potty a routine. Take your child to the potty when you see him showing signs of readiness. Go at other times, too, such as first thing in the morning. Boys can urinate sitting down first and can stand up to urinate when they are better at it.

Early on, many children have bowel movements or urinate right after getting off the toilet. If this happens a lot, it may mean your child is not really ready for training. Learning how to relax the muscles that control the bowel and bladder takes time.

- 6. Teach your child proper hygiene habits. Show your child how to wipe carefully. Girls should spread their legs apart when wiping. They should wipe thoroughly from front to back to prevent bringing germs from the rectum to the vagina or bladder. Make sure both boys and girls learn to wash their hands well after urinating or after a bowel movement.
- 7. Praise your child. Encourage your child with a lot of hugs and praise when success occurs. When a mistake happens, treat it lightly. Punishment and scolding will often make children feel bad and may make toilet training take longer.
- 8. Wait to try training pants. Keep using diapers until your child is able to remain dry during the day for 2 weeks. However, be prepared for "accidents." It may take weeks, even months, before toilet training is completed. Continue to have your child sit on the potty once during the day. If your child uses the potty, praise her. If not, it is still good practice. Some children who are not ready for cloth training pants will still feel that they are more "grown up" if they wear disposable training pants.

Some children will want to go back to diapers, especially for bowel movements. Do not look at this setback as a failure. Instead, praise your child for knowing when she needs to go.

- 9. Avoid a power struggle. Children at toilet training ages are becoming aware of their individuality. They look for ways to test their limits. Some children may do this by holding back bowel movements. Try to stay calm about toilet training. Remember that no one can control when and where a child urinates or has a bowel movement except the child.
- 10. Understand their fear. Some children believe that their bowel movements and urine are part of their bodies. They may be scared of the toilet flushing parts of them away. Some also fear they will be sucked into the toilet if it is flushed while they are sitting on it. To give your child a feeling of control, let him flush the toilet.
- 11. Watch for a desire to move up. Most of the time, your child will let you know when she is ready to move from the potty chair to the "big toilet." Provide a stool to brace her feet.

When toilet training should be put on hold

Major changes in the home may make toilet training more difficult. Sometimes it is a good idea to delay toilet training if

- Your family has just moved or will move in the near future.
- You are expecting a baby or have recently had a new baby.
- There is a major illness, a recent death, or some other family crisis.

Remember

If any concern comes up before, during, or after toilet training, talk with your child's doctor or pediatric health care professional. Often the problem is minor and can be resolved quickly. Sometimes physical or emotional causes will require treatment. Getting professional help can make the process easier.

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