



EIGHTEEN MONTHS

Name _____ Date _____

Weight _____ Length _____ Head Circumference _____

IMMUNIZATIONS (note: your child's doctor may modify the immunization schedule at times)

1. Hepatitis A—protects against infection with hepatitis A virus

DEVELOPMENT

Most children will be walking well by now and even running and climbing. Encourage climbing with appropriately safe cardboard boxes, climbing toys and supervised use of the stairs. Riding toys are usually a hit at this age. Toys that help develop fine motor control include fill-and-dump toys, stacking toys, nesting toys, large magic markers and crayons, puzzles (three to five pieces), large Legos, and blocks.

Your toddler understands almost everything you say now but is not usually saying more than a handful of words. Read to your child every day to help develop his vocabulary. Identify body parts on him and in pictures and expand the parts to include knees, elbows, thumbs, etc. Telephone play and puppet play help stimulate language formation as well. Remember children of this age mimic easily. If you don't want a word or behavior repeated, don't use it around your child.

At this age, your child will most likely display some negative behaviors such as saying "No," screaming when you try to take her away from an activity that she is enjoying, and throwing temper tantrums. Continue to set limits on unsafe behavior, but let the unimportant issues go. If you need to intervene for safety reasons, do it immediately following the behavior that worries you. Delayed punishment has no meaning at this age. Discipline is still best achieved through a firm verbal "No", removing your child from the situation and substituting another activity. Give your child positive reinforcement for making the transition.

Try not to get into power struggles with your child if the issue at hand can be negotiated by compromise. Although your child understands the word "no" at this age, she still does not have the self control to respond appropriately with any consistency, so be realistic in your expectations.

The attention span of the toddler is almost nonexistent. It is normal for her to devastate a play area in a brief period of time and then go on to look for new stimulation elsewhere. This is not the age when a child can sit and work at a task until it is completed (such as pick up all of the toys that she threw on the floor).

EATING

Toddlers are notoriously picky eaters. The toddler binge—eating only one or a small variety of foods—is common. Often, a toddler will eat only one good meal out of three per day, but this is normal. For picky eaters you may offer nutritious in-between meal snacks, but don't allow your child to "graze" on snacks all day long. Offer food only at regular meal or snack times. Encourage your child's use of utensils and a cup at every meal now.

The best way to tell if your child is getting adequate nutrition is by looking at her growth chart in the office. If she is growing well, you can relax and be assured she's getting enough nutrition, even if it seems like she hardly eats anything at all!

Now that your child is no longer receiving iron through breast milk or formula, we recommend a daily multivitamin with iron for example Poly-Vi-Sol with iron or half of a crushed chewable multivitamin with iron.

SPECIAL INSTRUCTIONS

If your baby is still using a bottle, now is the time to get rid of it! Using a bottle past this age may lead to cavities and other dental problems. Remember, never put your to bed with a bottle or cup of milk or juice. If your child wants a drink before bedtime or naptime, give only plain water.

Your toddler may express some casual interest in toilet skills at this time, but is usually not ready to be trained. The average child will respond well to a toilet training program somewhere between two-and-a-half and three-and-a-half years old. If your child is expressing interest in toilet training buy a potty and keep it in the bathroom and follow your child's lead. If she is not interested, don't pursue the issue at this time.

SAFETY

Food Safety

To avoid choking, make sure any foods you give your child are soft, easy to swallow, and cut into small pieces. Avoid high-risk choking foods such as nuts, popcorn, raw vegetables, whole grapes, hard candies, and hot dogs.

Home Safety (see the home safety handout given at the four-month visit and available on our website for more detail)

Poisonings are an important health hazard for children. Keep all medications, cleaning products, and other potentially poisonous substances high up out of reach. Post this phone number for the poison control center near your phone: **1-800-222-1222**.

Since your child is now able to move around quickly, it is very important to make your home safe. Put a hook outside the bathroom door or install toilet locks. Use caution with all hot liquids and hot surfaces. Place a barrier in front of hot radiators. Place gates at the top and bottom of all stairways. Keep plastic bags, wrappers, and latex balloons out of reach. Move dangling electric cords. Use safety plugs in outlets. Remove house plants from reach, as many are poisonous. Make sure that bookcases are anchored to walls so they can't tip over. Install safety guards on windows (screens are NOT strong enough to prevent a child from falling through).

Car Safety

Your child should be in a rear-facing car seat as long as possible (check the sticker on the car seat to see its size limits). It's the best way to keep him safe. Your child should stay in a rear-facing car seat until he reaches the top height or weight limit allowed by your car seat's manufacturer. Once your child outgrows the rear-facing car seat, your child is ready to travel in a forward-facing car seat with a harness. For forward-facing car seats, the shoulder straps should be at or above the level of your child's shoulders. The straps should fit snugly—you should only be able to get only one finger between the straps and your child. In winter, it is safer to put warm layers on top of your child after strapping him into the car seat; securing the straps on top of bulky clothing can reduce the effectiveness of the car seat. If you would like further information on child car safety or would like to find a certified car seat inspector who can check the installation of your car seat, please consult the National Highway Traffic Administration website at www.nhtsa.dot.gov.

Sun Safety

Avoid the midday sun between 10 am and 3 pm as much as possible. Use a hat or canopy and light clothing that covers as much skin as possible. Sunscreen (SPF 15 or higher) should be used on exposed areas of skin during periods of sun exposure.

NEXT VISIT

Your child's next routine visit will be at two years of age. She will have a finger prick blood test to test for anemia and lead poisoning.