

PE D I A T R I C S

of
Northeastern Pennsylvania

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YOUR 1 YEAR OLD CHILD

What happened to that baby? Wasn't it just yesterday you brought him home and now its a first birthday! Oh, they grow up so very fast, walking, climbing, and playing and soon talking. It's absolutely, positively incredible. Included in this handout is some general "baby info." just to keep you going.

NUTRITION

The bottle should be discontinued at this point. Milk and juices should be offered in a cup, remembering that drinks are not the meal anymore. Solids are now the mainstay of the diet. Do not use the bottle as a pacifier. Instead encourage other means of self-soothing. Table foods can be offered now and self-feeding encouraged. The challenge of manipulating bits of food is certainly one way to interest a baby in feeding himself, but remember, the baby is going to tire easily. At times, trying to keep the baby seated and eating is like fighting a tide and results in pressure from parents and sometimes undue emphasis on the feeding. This is not a good time to try and push good table manners or worry about the quantity of food consumed. A baby this age is so distractible. It's better to follow his whims, providing one meal without surrounding distractions. Your child's nutritional needs are easily met. For example, two ounces of an iron containing protein, like meat or an egg, one ounce of orange juice or fruit and a pint of milk or its equivalent and a vitamin will adequately meet nutrition for a 24-hour period.

EXTRA!!! EXTRA!!!

- Appetite decreases during the second year of life along with growth.
- Fluoride supplements are still necessary.

Hemoglobin is routinely done at this check-up to assess baby's iron level. Whole milk is begun and formula discontinued at the Dr.'s discretion.

- Lead testing should be done at 1 year of age, if indicated by risk factors.

SAFETY

Mouthing is still prominent, so be aware of ingestions. Remember, if a foreign substance is eaten, call **Poison Control immediately – 1-800-222-1222**. Initiate the stocking of a first-aid kit for your home. The following is a list of needed supplies:

FIRST AID KIT

1. **First-aid Manual** - Be sure to read this before - not after - an accident happens. Keep it where you can find it for quick reference.
2. **Disposable, instant-activating ice bags** - To minimize swelling. All you do is squeeze and shake and the bags becomes cold.
3. **Small scissors** - To cut adhesive tape and bandages.

4. **Tweezers** - To remove thorns, splinters, and ticks.
5. **Gauze pads** - (2- and 4-inch) and **rolled gauze**. To dress wounds.
6. **Adhesive tape** - To keep gauze pads in place.
7. **Adhesive bandages** - (various sizes) To cover minor cuts and scrapes. Butterfly-shaped wound-closure bandages can tape broken skin together.
8. **Elastic wraps** - (Ace bandages) To support injured wrists, ankles, knees and elbows.
9. **Over-the-counter antihistamine** - To treat the runny nose and itchy eyes caused by hay fever and other minor allergic reactions.
10. **Hydrocortisone cream** - To soothe allergic skin reactions.
11. **Acetaminophen** - To relieve headaches, pain, fever, sprains and strains.

The kitchen contains a myriad of hazards. You must continue to be wary of table cloths that can be tugged at resulting in serious injury. Keep hot liquids at a safe distance along with sharp objects. Your baby will easily be able to feel along a table top edge as they "do their research" pulling a cup, a dish or other utensils down on top of their heads. You must always be on guard to protect your child from injury.

The number of falls that a child this age can achieve is staggering. Not only do they seem always to be exploring some new precarious situation, but the force of their need to explore and to resist limits on their exploration is so great that no parent can get through this age without some accidents. Keep in mind that fear is NOT engendered in these little ones as a result of their falls and little is learned from falling. Try not to react with undue anxiety and concern with each fall. It's important for your child to have the courage to explore and it's our job as parents to aid them in doing so as safely as possible. For example, if your child insists on climbing the stairs, show them how, when you can be there with them. If they insist on climbing on the sofa, pull the cushions off and make it a play-game, let them try climbing. Some things they are just going to do and if we can show them a safe way, it's better.

Continue to gate off unsafe areas, and set limits that are followed with physical action on your part if those limits are challenged by your child.

Especially be careful with your children around machinery, such as cars in driveways, grass cutter, etc. These little ones can move all too fast. Only allow your child to play outdoors in safe and enclosed areas or under direct adult supervision.

EXTRA!!! EXTRA!!!

- Medicines are NOT referred to as candy and shouldn't be left on dressers or on table tops.
- If guns are kept in the house, STRICT safety precautions are crucial.
- Car safety seats are still essential.

GROWING TIPS

Talking to your baby will encourage speech development. You can name common objects, pictures or body

parts for the baby. Talk to your little one during feeding, changing, bathing, walking, whenever. Name objects in their environment, trees, flowers, dogs. You can begin reading to the baby by using picture books with one word and one picture per page.

Despite their growing independence, your little one still needs to be picked up, cuddled, held and lovingly talked to.

Your baby should be exposed to all kinds of play; Alone, with you, Mom and Dad and with siblings.
GROWING TIPS (CONT.)

Autonomy is an approaching important achievement. Your baby's emerging and independent behavior shouldn't be misread as the beginning of an adversarial relationship. It should be seen and accepted as part of normal development rather than simply identified as opposition to the parents. Remember the difference between discipline, (which is teaching) and punishment and the need for consistent realistic limit setting. Verbal "no's" must be followed up with physical action to keep the baby from harm. Remember to praise your little one for desired behavior and share in the wonder of their new achievements and discoveries.

IMMUNIZATIONS

Refer to immunization chart in baby book for immunizations due.

Immunizations and their schedules change according to the American Academy of Pediatrics recommendations. Check with your physician for changes/updates.

GROWTH AND DEVELOPMENT

Motor

Pulls to a stand, cruises, walks with support and may take a few steps alone.
Shows a precise pincer grasp, points, bangs two blocks together, puts one object inside another

Verbal

May say or make one-three meaningful words or sounds, besides using mama and dada correctly, and they imitate vocalization.

Mental

Has a concept of object-permanence, looks for dropped or hidden objects.
Plays social games such as peek-a-boo, patty cake, so big, waves bye bye.
May cooperate in dressing and self feeding, uses a cup.

Please remember these are "typical" milestones for this particular aged child, but every baby is an individual and variations are to be expected.

Please call out office between 7:30 a.m. and 6:00 p.m. with ANY QUESTIONS OR CONCERNS. That's what OUR part of YOUR team is all about.