



INFANT CARE FROM AGE 15 TO 18 MONTHS

www.northfultonpediatrics.com

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SUGGESTED DIET: The following is an “ideal” diet selected from the four food groups, but recognize that your child will not always eat a “balanced diet” every day.

1. **Milk:** 2 to 3 servings whole milk (6-8 oz. per serving) per day. 1 ounce of cheese is equivalent to about 6 oz. milk. Other milk products include yogurt, cottage cheese, pudding and ice cream or frozen yogurt. Whole milk is recommended until your child is two years old, unless we recommend otherwise.
2. **Meats/Proteins:** 2 servings per day. A serving size is 1 ounce (2 tablespoons). Meat, poultry, fish, tofu or eggs are good choices. You get the same amount of protein from 1 oz. meat as from 2 T. peanut butter, 1oz. cheese, or ½ cup cooked beans or peas.
3. **Fruits & Vegetables:** 4 servings of each every day, with a serving size being ¼ cup. Try for 1 serving of a fruit or vegetable high in Vitamin A, such as peaches, broccoli, carrots, squash, or sweet potatoes. Serve at least 1 fruit or vegetable high in Vitamin C, such as orange juice, broccoli, or spinach.
4. **Breads & Cereals:** 4 servings per day, with a serving size being ½ slice of whole grain bread, ½ cup whole grain cereal, or ¼ cup pasta.

FEEDING TIPS

- Children this age are often picky eaters, but at this time their nutritional requirements are not great. Keep the serving size small, and offer a variety of foods.
- You may encourage your child to feed himself/herself finger foods as well as with a spoon and fork. They probably will not master skill with a spoon until at least 18 months of age. Yes it will be messy, but have patience!
- Your child should be drinking only from a cup. Throw away the bottles!
- Try to avoid making mealtime a battleground. Respect their food preferences. Many toddlers are “grazers” and do better eating 3 smaller meals along with 2 - 3 healthy snacks a day.
- To avoid choking, don't give nuts, fruits with seeds, raw carrots, popcorn, hard candy, gum, and whole grapes and hot dogs. Remember to supervise mealtime, making it free from excitement and running.
- Continuing infant cereal during the second year of life ensures that your child will have adequate iron intake.

SLEEPING

Most toddlers continue to need an afternoon nap after a morning of non-stop play. Some continue to take a morning nap as well. No toddler looks forward to going to sleep. It means missing out on the action, separating from you, and facing the nighttime on their own. If you let them, they will spend the entire evening putting off bedtime. Bedtime should be consistent and follow a particular routine (bath, brush teeth, story, hug and kisses). The routine should end with your toddler quiet, but awake, in their crib and ready to fall asleep on their own.

A change in routine is a common cause of nighttime awakening. Your child will now begin actively dreaming which can startle or frighten him awake. Cutting a tooth can even awaken them. These are all valid reasons for your toddler to wake up - but not for you to pick them up or bring them to your bed. If your child awakens during the night, check on safety and comfort, have as little interaction as possible, and quickly leave the room. They will learn to put themselves back to sleep, but it may mean crying at first. If you stay calm and follow a consistent pattern every night, they will soon be putting themselves back to sleep.

ELIMINATION

Your child may start to show an interest in the potty chair or even tell you when they are wet. However, toilet training is easier if you wait until your child is ready - usually somewhere between age 2 and 3. Signs of readiness include: telling you when they are wet, or about to wet, bringing you a clean diaper, tugging at a wet or dirty diaper, waking up dry, possessing good motor skills for walking and sitting well, and a desire to please the parents.

DEVELOPMENT/PLAY

Your child can or soon will be able to: walk well alone, stoop and recover objects, build a tower of 2 cubes, scribble spontaneously, say 4 - 6 words, point to body parts and indicate wants by pointing the index finger or vocalizing. Try to avoid responding to the “point & grunt”, since successful non-verbal communication will preclude good speech.

Toddlers love to imitate their role models in their daily household activities. Provide them with child-size brooms, dust cloths, or other safe household tools that can enable them to do this. Games and toys that enhance gross motor skills and dexterity are appropriate. These include large cardboard boxes, sandbox (with supervision), space to run and jump, and playground equipment. Quiet time activities include painting with water books, drawing with washable markers, building with blocks, and working with puzzles. Continue to read to your toddler. (www.reachoutandread.org/parents)

The American Academy of Pediatrics strongly recommends protecting the developing brains of children younger than 2 years of age by avoiding screen media (TV/computer/video) altogether. This includes educational material that comes in these forms.

DISCIPLINE

Toddlers develop and learn through exploration and require particularly close observation. Children this age are learning to be independent, but cannot judge what is correct or safe behavior. The word “no” becomes important to

success but may not always get the desired response from your child. Nevertheless, you must be consistent to teach your child that “no” means “no” for the same thing every day. Anticipate problems by moving breakable objects rather than saying “no” all of the time.

If your toddler breaks a rule, remove him from the area and encourage another activity. If this does not work, place your toddler in a crib or playpen until he is calm or, if you are busy, until you have completed our task. Google Pediatric Advisor: Discipline Basics. Avoid slapping the hand or spanking since they are too young to understand this action. Be sure to praise correct behavior by saying things like, “I like it when you help me pick up your toys”.

As your child realizes there are rules to follow, they often react with outbursts of frustration and anger, such as breath-holding spells and temper tantrums.

Breath holding is common in the first two years of life. It is the child’s attempt to control the situation. The best way to handle this situation is to ignore the child and walk away. This is not easy to do without feeling guilty, and while these spells are scary to the parent, they are not life threatening. Some children may hold their breath until they turn pale or blue and even pass out for a few seconds (at which time they start breathing again). As you ignore these, initially their frequency may increase as the child tries harder to control you, but with consistent ignoring, they will eventually stop.

Temper tantrums serve the same purpose as breath-holding spells. Try to engage your toddler in other activities before he or she reaches the point of loss of control. Temper tantrums can often be handled by ignoring them. Once you determine that your toddler cannot hurt themselves, walk away from the situation. This will prevent you from becoming angry and will not give your toddler an audience. If this does not work, put them in their crib, playpen or room for a **time out**. You need to use few words and address the problem in a calm voice, i.e.: “No, biting hurts... time out for Michael”. When the tantrum stops, or the time out is over, you may give your attention back to your child.

SAFETY

Safety measures in your house and outdoors cannot be emphasized enough. Still the greatest risk to your child’s health is a car accident. Always use an approved auto restraint seat in the recommended manner: anchored, properly positioned, and secured. There are many accident dangers including burns, falls, poisonings, and drowning. Accidents are more common when your child is not adequately supervised or in a different setting such as a relative’s or friend’s house. It is important to continuously reassess the safety of your toddler’s play area and update it as necessary. In less safe areas and circumstances, extra attentive supervision is necessary. Beware of objects/toys with small batteries or magnets as these can be very dangerous if swallowed.

All infants and toddlers should ride in a rear-facing car safety seat in the backseat until they are 2 years (www.nhtsa.gov/Safety/CPS).

Post the **Poison Control Number (404) 616-9000** by your phone. In case your toddler ingests medication or any other poisonous substance, call poison control first for instructions.

FEVER AND PAIN RELIEF

Please call our office if you have any concerns about your child’s temperature. You may treat your child’s fever with either of the following:

Tylenol (Active ingredient is acetaminophen)

Advil, Motrin (Active ingredient is ibuprofen)

Your child’s next well child care visit should be at 18 months of age.

Additional Resource for Parents

Visit our web site at www.northfultonpediatrics.com

Toddlers and Parents by T. B. Brazelton

www.aap.org/bookstore

The Second Twelve Months of Life by F. Caplan

Caring For Your Baby And Young Child: Birth to

www.chop.edu/service/vaccine

Age 5, by AAP