

Fifteen-Month Visit

Your child is 15 months old! The following are some tips to help support your toddler's growth and development.

Feeding and Nutrition

- Continue to offer 3 meals and 2-3 healthy snacks each day on a regular schedule. Whenever possible, eat meals together as a family and try to always use a seat or high chair instead of offering food "on the go" or while playing. Do your best to make mealtime fun and interesting.
- At this age, your child should be eating almost all of the healthy foods that you eat. Let him feed himself with his fingers and try giving him a spoon. Continue to avoid food that may be a choking risk such as peanuts, popcorn, hot dogs, whole grapes, raisins, or hard foods that can be bitten off such as carrots, celery or raw apple.
- Do not make eating a battle. Children this age are very good at knowing when they are hungry and when they are full; it is your job to offer healthy, safe choices and let them do the rest. If your child rejects a food, try it again. It can take 10-15 times before he is willing to accept a new food.
- In general, offer foods before drinks at mealtime. Offer milk in a cup
 and don't give more than 16-24 ounces of whole milk a day. Too
 much milk can cause anemia (low red blood cell count) and make a
 child too full to eat enough solid foods.
- Juice provides no nutritional benefit and should be limited to no more than 4 ounces a day (100% juice only). Offer water in between meals instead.
- If you haven't already, now is the time to stop giving your child a bottle.
 Children who use bottles after 12 months have a higher rate of cavities,
 ear infections, anemia and speech delay.

Oral Health Tips

- Brush your toddler's teeth twice a day with a soft brush. Let him brush first then you do it again. Make it fun.
- To prevent tooth decay, never let your child fall asleep with a bottle in his mouth. You should brush your child's teeth AFTER the last food/drink of the night.
- Discuss with your doctor when to see a dentist and if your child needs extra fluoride drops (need varies by town water supply).

Sleeping

- At this age, your child should sleep through the night and take 1-2 naps. Toddlers may switch to one nap a day between 12-18 months.
- Total sleep time per day varies a lot. If your child isn't acting overtired, he is likely getting enough sleep.
- Your child's crib mattress should be at the lowest setting to prevent falls.
- Bedtime routines should be consistent and enjoyable.
 Include reading in this time.
- Give your child a comfort item/small blanket (never the bottle!) to take to bed.



Safety Tips

- 1. Keep your child in a rear-facing car seat until age 2, or until he reaches the highest weight AND height allowed by the maker of the seat. This is the safest position in the event of an accident.
- 2. Limit direct sun exposure. Use a large hat and sunscreen SPF 30 or higher.
- 3. Don't let your child out of your sight even for a second near water, tubs, buckets, pools, dogs, lawnmowers, driveways and streets. Children can drown in less than 2 inches of water.

4. Child-proofing:

- V Keep all cleaning supplies and medicines completely out of sight and reach.
- √ Use safety gates, cabinet locks and socket plugs. Install guards on all windows above the 1st floor.
- √ Tie window blind cords and drapes up and out of reach.
- √ Secure TVs and bookcases to the wall and place guards on sharp edged furniture.
- √ To protect from water burns, turn your hot water heater down to 120° or less.
- √ Install smoke and carbon monoxide detectors and change batteries yearly.
- √ Keep guns locked away and ammunition in a different place.

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Fifteen-Month Visit continued...

Development

- Children vary greatly in development. At this age, many toddlers will:
 - 1) Walk better, squat to pick up toys and climb stairs.
 - 2) Say 3-6 words and understand more (including simple questions and directions like "kick the ball to me").
 - 3) Use objects the way they are supposed to be used like talking on a toy phone or sweeping with a broom.
 - 4) Participate in social games (like hide-and seek and peeka-boo) and imitate things you do.
- Try these tips to help with development:
 - 1) Read with your toddler every day and encourage her to use words, sounds and gestures to communicate even if you think you know what she wants.
 - 2) Talk with your child about what you are seeing and doing together using simple, clear phrases.
 - 3) Teach your child her body parts and what to do with them (ex. blink your eyes, stomp your feet...)
 - 4) Offer your child push/pull and sorting/stacking toys and crayons for scribbling.
 - 5) Talk to your doctor if you have any concerns about your child's development.



Immunizations (*vaccine schedule may vary slightly by practice)

Today (some likely given already at 12 months)

- -MMR (measles, mumps and rubella)
- -Varicella (chicken pox)
- -Hepatitis A
- -DTaP
- -HIB
- -Pneumococcal

* The influenza vaccine is

recommended

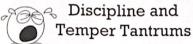
during flu season.

Websites

- AAP Healthy Children | http://www.healthychildren.org (Health topics and news updates from the American Academy of Pediatrics)
- AAP Immunization Info | http://www.aap.org/immunization (Research-based information about childhood vaccines)
- One Tough Job | http://www.onetoughjob.org (Information on development and a variety of parenting topics created by the MA Children's Trust Fund)
- Zero To Three http://www.zerotothree.org (More information on health and development of toddlers)

Your child's next routine visit is recommended at 18 months old.



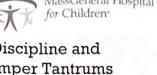


- Most importantly, praise your child when he is behaving well.
- Temper tantrums usually begin around 12-18 months and are a normal part of your child's development.
- Remember to stay calm, ignore the behavior (don't react) and try to use distraction. Don't give ingiving in teaches your child that a tantrum gets him what he wants.
- Spanking or hitting is not ever advised and won't help.
- Reassure your child once negative behavior has stopped.
- Reserve "NO!" for when your child is going to get hurt or hurt others.
- Give your child choices whenever possible. For example, let her decide between two healthy fruits or between two books at bedtime. This will give him a sense of pride and will decrease the tantrums.

Important Numbers

- Poison Control
 - 1-800-222-1222
- Parental Stress Line 1-800-632-8188
- HAVEN Domestic Violence Help Line 1-617-724-0054
- Smoking Quit Line (free): 1-800-TRY TO STOP
- Your doctor's office





VACCINE INFORMATION STATEMENT

Your Child's First Vaccines

What You Need to Know

Many Vaccine Information Statementa are available in Spanish and other languages. See www.immunioe.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunite.org/vis

The vaccines covered on this statement are those most likely to be given during the same visits during infancy and early childhood. Other vaccines (including measles, mumps, and rubella; varicella; rotavirus; influenza; and hepatitis A) are also routinely recommended during the first five years of life.

Your child wi	ill get these var	ccines today:		add during the machy	
□ DTaP	□ Hib	☐ Hepatitis B	☐ Polio	□ PCV13	
(Provider: Check	k appropriate boxes	•	0110	□10V13	

1 Why get vaccinated?

Vaccine-preventable diseases are much less common than they used to be, thanks to vaccination. But they have not gone away. Outbreaks of some of these diseases still occur across the United States. When fewer babies get vaccinated, more babies get sick.

7 childhood diseases that can be prevented by vaccines:

- 1. Diphtheria (the 'D' in DTaP vaccine)
- Signs and symptoms include a thick coating in the back of the throat that can make it hard to breathe.
- Diphtheria can lead to breathing problems, paralysis and heart failure.
 - About 15,000 people died each year in the U.S. from diphtheria before there was a vaccine.
- 2. Tetanus (the 'T' in DTaP vaccine; also known as Lockjaw)
- Signs and symptoms include painful tightening of the muscles, usually all over the body.
- Tetanus can lead to stiffness of the jaw that can make it difficult to open the mouth or swallow.
 - Tetanus kills about 1 person out of every 10 who get it.
- 3. Pertussis (the 'P' in DTaP vaccine, also known as Whooping Cough)
- Signs and symptoms include violent coughing spells that can make it hard for a baby to eat, drink, or breathe. These spells can last for several weeks.
- Pertussis can lead to pneumonia, seizures, brain damage, or death. Pertussis can be very dangerous in infants
 - Most pertussis deaths are in babies younger than 3 months of age.

4. Hib (Haemophilus influenzae type b)

- Signs and symptoms can include fever, headache, stiff neck, cough, and shortness of breath. There might not be any signs or symptoms in mild cases.
- Hib can lead to meningitis (infection of the brain and spinal cord coverings); pneumonia; infections of the ears, sinuses, blood, joints, bones, and covering of the heart; brain damage; severe swelling of the throat, making it hard to breathe; and deafness.
 - Children younger than 5 years of age are at greatest risk for Hib disease.

5. Hepatitis B

- Signs and symptoms include tiredness, diarrhea and vomiting, jaundice (yellow skin or eyes), and pain in muscles, joints and stomach. But usually there are no signs or symptoms at all.
- Hepatitis B can lead to liver damage, and liver cancer. Some people develop chronic (long term) hepatitis B infection. These people might not look or feel sick, but they can infect others.
 - Hepatitis B can cause liver damage and cancer in 1 child out of 4 who are chronically infected.

6. Polio

- Signs and symptoms can include flu-like illness, or there may be no signs or symptoms at all.
- Polio can lead to permanent paralysis (can't move an arm or leg, or sometimes can't breathe) and death.
 - In the 1950s, polio paralyzed more than 15,000 people every year in the U.S.



7. Pneumococcal Disease

- Signs and symptoms include fever, chills, cough, and chest pain. In infants, symptoms can also include meningitis, seizures, and sometimes rash.
- Pneumococcal disease can lead to meningitis (infection of the brain and spinal cord coverings); infections of the ears, sinuses and blood; pneumonia; deafness; and brain damage.
 - About 1 out of 15 children who get pneumococcal meningitis will die from the infection.

Children usually catch these diseases from other children or adults, who might not even know they are infected. A mother infected with hepatitis B can infect her baby at birth. Tetanus enters the body through a cut or wound; it is not spread from person to person.

Vaccines that protect your baby from these seven diseases:

Vaccine	Number of doses	Recommended ages	Other information	
DTaP (Diphtheria, Tetanus, Pertussis)	5	2 months, 4 months, 6 months, 15-18 months, 4-6 years	Some children get a vaccine called DT (Diphtheria & Tetanus) instead of DTaP.	
Hepatitis B	3	Birth, 1-2 months, 6-18 months		
Polio	4	2 months, 4 months, 6-18 months, 4-6 years	An additional dose of polio vaccine may be recommended for travel to certain countries.	
Hib (Haemophilus influenzae type b)	3 or 4	2 months, 4 months, (6 months), 12-15 months	There are several Hib vaccines. With one of them the 6-month dose is not needed.	
Pneumococcal (PCV13)	4.	2 months, 4 months, 6 months, 12-15 months	Older children with certain health conditions also need this vaccine.	

Your healthcare provider might offer some of these vaccines as **combination vaccines** — several vaccines given in the same shot. Combination vaccines are as safe and effective as the individual vaccines, and can mean fewer shots for your baby.

2 Some children should not get certain vaccines

Most children can safely get all of these vaccines. But there are some exceptions:

- A child who has a mild cold or other illness on the day vaccinations are scheduled may be vaccinated. A child who is moderately or severely ill on the day of vaccinations might be asked to come back for them at a later date.
- Any child who had a life-threatening allergic reaction after getting a vaccine should not get another dose of that vaccine. Tell the person giving the vaccines if your child has ever had a severe reaction after any vaccination.
- A child who has a severe (life-threatening) allergy to a substance should not get a vaccine that contains that substance. Tell the person giving your child the vaccines if your child has any severe allergies that you are aware of.

Talk to your doctor before your child gets:

- DTaP vaccine, if your child ever had any of these reactions after a previous dose of DTaP:
 - A brain or nervous system disease within 7 days,
 - Non-stop crying for 3 hours or more,
 - A seizure or collapse,
 - A fever of over 105°F.
- PCV13 vaccine, if your child ever had a severe reaction after a dose of DTaP (or other vaccine containing diphtheria toxoid), or after a dose of PCV7, an earlier pneumococcal vaccine.

3 Risks of a Vaccine Reaction

With any medicine, including vaccines, there is a chance of side effects. These are usually mild and go away on their own. Most vaccine reactions are not serious: tenderness, redness, or swelling where the shot was given; or a mild fever. These happen soon after the shot is given and go away within a day or two. They happen with up to about half of vaccinations, depending on the vaccine.

Serious reactions are also possible but are rare.

Polio, Hepatitis B and Hib Vaccines have been associated only with mild reactions.

DTaP and Pneumococcal vaccines have also been associated with other problems:

DTaP Vaccine

- Mild Problems: Fussiness (up to 1 child in 3); tiredness or loss of appetite (up to 1 child in 10); vomiting (up to 1 child in 50); swelling of the entire arm or leg for 1-7 days (up to 1 child in 30)—usually after the 4th or 5th dose.
- Moderate Problems: Seizure (1 child in 14,000); non-stop crying for 3 hours or longer (up to 1 child in 1,000); fever over 105°F (1 child in 16,000).
- Serious problems: Long term seizures, coma, lowered consciousness, and permanent brain damage have been reported following DTaP vaccination. These reports are extremely rare.

Pneumococcal Vaccine

- Mild Problems: Drowsiness or temporary loss of appetite (about 1 child in 2 or 3); fussiness (about 8 children in 10).
- Moderate Problems: Fever over 102.2°F (about 1 child in 20).

After any vaccine:

Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

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What if there is a serious reaction?

What should I look for?

 Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, and difficulty breathing. In infants, signs of an allergic reaction might also include fever, sleepiness, and disinterest in eating. In older children signs might include a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

 If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not give medical advice.

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The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

There is a time limit to file a claim for compensation.

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How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- · Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO)
 - Visit CDC's website at www.cdc.gov/vaccines or www.cdc.gov/hepatitis

Vaccine Information Statement Multi Pediatric Vaccines

11/05/2015

42 U.S.C. § 300aa-26

