



Date: _____

Weight: _____

Height: _____

Head Circumference: _____

Well Child Care at 2 Years

Nutrition

Family meals are important for your child. They teach your child that eating is a time to be together and talk with others. Letting your child eat with you makes her feel like part of the family. Let your child feed themselves. Your toddler will get better at using the spoon, with fewer and fewer spills. It is good to let your child help choose what foods to eat. Be sure to give her only healthy foods to choose from. For many children, this is the time to switch from whole milk to 2% milk or slim milk. Televisions should never be on during mealtime. It is very important for your child to be completely off a bottle. Ask your doctor for help if she is still using one.

Development

Spend time teaching your child how to play. Encourage imaginative play and sharing of toys, but don't be surprised that 2-year-olds usually do not want to share toys with anyone else. Mild stuttering is common at this age. It usually goes away on its own by the age of 4 years. Do not hurry your child's speech. Ask your doctor about your child's speech if you are worried. Toilet Training: Some children at this age are showing signs that they are ready for toilet training. When your child starts reporting wet or soiled diapers to you, this is a sign that your child prefers to be dry. Praise your child for telling you. Toddlers are naturally curious about other people using the bathroom. If your child seems curious, let him go to the bathroom with you. Buy a potty chair and leave it in a room in which your child usually plays. It is important not to put too many demands on the child or shame the child about toilet training. When your child does use the toilet, let him know how proud you are.

Behavior Control

At this age, children often say "no" or refuse to do what you want them to do. This normal phase of development involves testing the rules that parents make. Parents need to be consistent in following through with reasonable rules. Your rules should not be too strict or too lenient. Enforce the rules fairly every time. Be gentle but firm with your child even when the child wants to break a rule. Many parents find this age difficult, so ask your doctor for advice on managing behavior. Here are some good methods for helping children learn about rules:

- Divert and substitute. If a child is playing with something you don't want him to have, replaced it with another object or toy that he enjoys. This approach avoids a fight and does not place children in a situation where they'll say "no."
- Teach and lead. Have as few rules as necessary and enforce them. These rules should be rules important for the child's safety. If a rule is broken, after a short, clear, and gentle explanation, immediately find a place for your child to sit alone for 2 minutes. It is very important that a

"time-out" comes immediately after a rule is broken. Ask your doctor if you have questions about time-out.

- Make consequences as logical as possible. Remember that encouragement and praise are more likely to motivate a young child than threats and fear. Do not threaten a consequence that you do not carry out. If you say there is a consequence for misbehavior and the child misbehaves, carry through with the consequence gently.
- Be consistent with discipline. Don't make threats that you cannot carry out. If you say you're going to do it, do it.
- Be warm and positive. Children like to please their parents. Give lots of praise and be enthusiastic. When children misbehave, stay calm and say "We can't do that. The rule is _____. " Then repeat the rule.

Reading and Electronic Media

Children learn reading skills while watching you read. They start to figure out that printed symbols have certain meanings. Young children love to participate directly with you and the book. They like to open flaps, ask questions, and make comments. If you choose to introduce digital media at this age, choose high-quality programming or apps, use them together, and limit viewing to less than 1 hour per day. Do not feel pressure to introduce technology. Do not place a TV in your child's bedroom. Using TV to calm fussy toddlers doesn't help them learn way to calm themselves and can lead them to demand media. Use other methods to calm your child, such as distraction, removing them from the trigger, going outside, addressing possible causes of fussiness. (such as hunger or tiredness), or reading together.

Dental Care

After meals and before bedtime, clean your toddler's teeth. Many children exhibit their independence by demanding to brush their own teeth, but infants and children younger than 4 years may not have the motor skills to do so. When a child can tie their shoes then they are able to brush their own teeth. If you have not made a dental appointment, now is a good time to find a pediatric dentist. You can ask Dr. Fikkert or her staff for recommendations.

Personal Hygiene

This is a good time for parents to help their child establish good personal hygiene habits, especially hand-washing. Modeling these behaviors can reinforce the teaching. Help your child wash their hands after diaper changes to toileting and before eating. You also want to make sure their potty chair is cleaned after each use. It is good practice to teach your child to sneeze or cough into their shoulder, and show them how to wipe their own noses.

Safety Tips

Child-proof the home: Go through every room in your house and remove anything that is valuable, dangerous, or messy. Preventive child-proofing will stop many possible discipline problems. Don't expect a child not to get into things just because you say no.

Fires and Burns

- Practice a fire escape plan.
- Check smoke detectors. Replace the batteries if necessary.
- Check food temperatures carefully. They should not be too hot.

- Keep hot appliances and cords out of reach.
- Keep electrical appliances out of the bathroom.
- Keep matches and lighters out of reach.
- Don't allow your child to use the stove, microwave, hot curlers, or iron.
- Turn your water heater down to 120°F (50°C).

Falls

- Teach your child not to climb on furniture or cabinets. Do not place furniture (on which children may climb) near windows or on balconies.
- Install window guards on windows above the first floor (unless this is against your local fire codes.)
- Use stair gates or lock doors to dangerous areas like the basement.

Car Safety

- Use an approved toddler car seat correctly. At this age you are able to turn the car seat from rear-facing to forward facing in the car. Check with the car seat manufacture for specific guidelines.
- Sometimes toddlers may not want to be placed in car seats. Gently but consistently put your child into the car seat every time you ride in the car.
- Give the child a toy to play with once in the seat.
- Parents wear seat belts.
- Never leave your child alone in a car.

Pedestrian Safety

- Hold onto your child when you are near traffic.
- Provide a play area where balls and riding toys cannot roll into the street.

Water Safety

- Continuously watch your child around any water.
- Swimming programs: Some children may be developmentally ready to start learning swim skills; however, parents should be cautioned that even advances swimming skills may not prevent drowning.

Sun Protection

- Always apply Sunscreen with an SPF greater than 15 when your child is outside. Reapply every 2 hours.
- Have your child wear a hat.
- Avoid prolonged time in the sun between 11:00am and 3:00pm.
- Wear Sun protection clothing for summer.

Poisoning

- Keep all medicines, vitamins, cleaning fluids, and other chemicals locked away.
- Put poison center number on all phones. **1-800-222-1222**
- Buy medicines in containers with safety caps.

- Do not store poisons in drink bottles, glasses, or jars.

Smoking

- Children who live in a house where someone smokes have more respiratory infections. Their symptoms are also more severe and last longer than those of children who live in a smoke-free home.
- If you smoke, set a quit date and stop. Set a good example for your child. If you cannot quit, do NOT smoke in the house or near children.
- Teach your child that even though smoking is unhealthy, he should be civil and polite when he is around people who smoke.

Immunizations

Routine infant vaccinations are usually completed before this age. However some children may need to catch up on recommended shots at this visit. An annual influenza shot is recommended for children up until 18 years of age. Ask your doctor if you have any questions about whether your child needs any vaccines.

Next Visit

A check-up at 3 years is recommended. Before starting school your child will need more vaccinations.

Normal Development: 2 Years Old

Physical Development

- Is always in motion.
- Tires easily.
- Runs and climbs.
- Walks up and down stairs alone.
- Starts to walk on tiptoes.
- Goes from random scribbling to somewhat more controlled movements.
- Can button and unbutton large buttons.
- Develops greater independence in toileting needs (still needs some help).
- May have trouble settling down for bedtime.
- Primary teeth finish coming in.

Emotional Development

- Gets upset and impatient easily.
- Shows anger by crying or striking out.
- Gets frustrated when not understood.
- Wants own way.
- May assert self by saying "no".
- Goes back to acting like a baby at times.
- Is upset when daily routine changes.
- His mood changes.

Social Development

- Likes to imitate others.
- Gets more interested in brothers and sisters.
- Knows gender.
- May have an imaginary playmate.
- Enjoys playing among, not with, other children.
- Does not share.
- Claims everything is "mine".
- May scratch, hit, bite, and push other children.

Mental Development

- Is much more interested in language.
- Uses 3- to 5-word phrases by end of second year.
- Understands more words than can speak.
- Likes to "do-it-myself".
- Can build a tower of 5 or 6 blocks.
- Cannot be reasoned with much of the time.
- Cannot make choices.

Each child is unique. Some behaviors and physical milestones tend to happen at certain ages, but a wide range of growth and behavior for each age is normal. It is natural for a child to reach some milestones earlier and other milestones later than the general trend. If you have any concerns about your child's own pattern of development, check with your healthcare provider.

Toilet Training Your Child: The Basics

What is toilet training?

Your child is toilet trained when, without any reminders, he walks to the potty, pulls down his pants, urinates or passes a bowel movement (BM), and pulls up his pants. Some children will learn to control their bladders first. Others will start with bowel control. Both kinds of control can be worked on simultaneously. Bladder control through the night normally happens several years later than daytime control. The gradual type of toilet training discussed here can usually be completed in 1 to 3 months, if your child is ready.

How can I help my child get ready for toilet training?

Don't begin training until your child is clearly ready. Readiness doesn't just happen. It involves concepts and skills you can begin teaching your child at 18 months of age or earlier. All children can be made ready for toilet training by 3 years, most by 2 1/2 years, many by 2 years and some earlier. Ways to help a child become ready include the following: 18 months: Begin teaching about pee, poop and how the body works.

- Teach the vocabulary (pee, poop, potty, etc.).
- Clarify that everyone makes pee and poop.
- Point out when dogs or other animals are going pee or poop.
- Clarify the body's signals when you observe them: "Your body wants to make some pee or poop."

- Praise your child for passing poop in the diaper.
- Do not refer to poop as dirty or yucky stuff.
- Make changing diapers pleasant for the child so he will come to you.
- Change your child frequently so he will prefer dry diapers.
- Teach your child to come to a parent whenever he is wet or soiled.

21 months: Begin teaching about the potty and toilet.

- Teach what the toilet and potty chair are for ("the pee or poop goes in this special place"). Demonstrate by dumping poop from diapers into the toilet.
- Portray using the toilet and potty chair as a privilege.
- Have him observe toilet-trained children use the toilet or potty chair (having an older toilet-trained sibling can be very helpful).
- Buy a floor-level type potty chair. You want your child's feet to touch the floor when he sits on the potty. This provides leverage for pushing and a sense of security. He also can get on and off whenever he wants to. Take your child with you to buy the potty chair. Make it clear that this is your child's own special chair. Have your child help you put his name on it. Allow your child to decorate it or even paint it a different color.
- Have your child sit on the potty chair for fun. Have your child sit on it fully clothed until he is comfortable with using it as a chair. Have your child use it while eating snacks, playing games, or looking at books. Keep it in the room in which your child usually plays. Never start actual toilet training unless your child clearly has good feelings toward the potty chair. Help the child develop a sense of ownership ("my chair").
- Then, bring his potty chair in the bathroom and have him sit on it (bare-bottom) when you sit on the toilet. Don't allow diapers or pull-ups in the bathroom.

2 years: Begin using teaching aids.

- Read toilet learning books and watch toilet learning videos.
- Help your child pretend she's training a doll or stuffed animal on the potty chair.
- Present underwear as a privilege. Buy special underwear and keep it in a place where the child can see it.

How do I toilet train my child?

1. Encourage practice runs to the potty. A practice run (potty sit) is encouraging your child to walk to the potty and sit there with his diapers or pants off. Your child can then be told, "Try to go pee-pee in the potty". Only do practice runs when your child gives a signal that looks promising, such as a certain facial expression, grunting, holding the genital area, pulling at his pants, pacing, squatting, or squirming. Other good times are after naps, 2 hours without urinating, or 20 minutes after meals. Say encouragingly, "The poop or pee wants to come out. Let's use the potty". If your child is reluctant to sit on the potty, you may want to read him a story. If your child wants to get up after 1 minute of encouragement, let him get up. Never force your child to sit there. Never physically hold your child there. Even if your child seems to be enjoying it, end each session after 5 minutes unless something is happening. Initially, keep the potty chair in the room your child usually plays in. This easy access greatly increases the chances that he will use it without your asking him. Consider owning 2 potty chairs. During toilet training, children need to wear clothing that's conducive to using the potty. That means one layer, usually the diaper. Avoid shoes and pants. (In the wintertime, turning up the heat is helpful.) Another option (though less effective) is loose sweatpants with an elastic waistband. Avoid pants with zippers, buttons, snaps, or a belt.

2. Praise or reward your child for cooperation or any success. All cooperation with these practice sessions should be praised. For example, you might say, "You are sitting on the potty just like Mommy," or "You're trying real hard to go pee-pee in the potty". If your child urinates into the potty, he can be rewarded with treats such as animal cookies or stickers, as well as praise and hugs. Although a sense of accomplishment is enough for some children, many need treats to stay focused. Big rewards (such as going to the toy store) should be reserved for when your child walks over to the potty on his own and uses it or asks to go there with you and then uses it. Once your child uses the potty by himself two or more times, you can stop the practice runs. For the following week, continue to praise your child frequently for using the potty. Practice runs and reminders should not be necessary for more than 1 or 2 months.
3. Change your child after accidents. Change your child as soon as it's convenient, but respond sympathetically. Say something like, "You wanted to go pee-pee in the potty, but you went pee-pee in your pants. I know that makes you sad. You like to be dry. You'll get better at this." If you feel a need to be critical, keep it to mild verbal disapproval and use it rarely (for example, "Big boys don't go pee-pee in their pants," or mention the name of another child whom he likes and who is trained). Then change your child into a dry diaper or training pants in as pleasant and non-angry way as possible. Avoid physical punishment, yelling, or scolding. Pressure or force can make a child completely uncooperative.
4. Introduce underpants after your child starts using the potty. Regular underwear can spark motivation. Switch from diapers to underpants after your child is cooperative about sitting on the potty chair and passes urine into the toilet spontaneously 10 or more times. Take your child with you to buy the underwear and make it a reward for his success. Buy loose-fitting ones that he can easily lower and pull up by himself. Once you start using underpants, use diapers only for naps, bedtime and travel outside the home.
5. Plan a bare bottom weekend. If your child is older than 30 months and has successfully used the potty a few times with your help and clearly understands the process, commit 6 hours or a weekend exclusively to toilet training. This can usually lead to a breakthrough. Avoid interruptions or distractions during this time. Younger siblings must spend the day elsewhere. Turn off the TV and do not answer the phone. Success requires monitoring your child during these hours of training. The bare bottom technique means not wearing any diapers, pull-ups, underwear or any clothing below the waist. This causes most children to become acutely aware of their body's plumbing. Children innately dislike pee or poop running down their legs. You and your child should stay in the vicinity of the potty chair. This can be in the kitchen or other room without a carpet. A gate may help your child stay on task. During bare bottom times, supervise your child but refrain from all practice runs and most reminders, allowing the child to learn by trial and error with your support. Create a frequent need to urinate by offering your child lots of her favorite fluids. Have just enough toys and books handy to keep your child playing near the potty chair. Keep the process upbeat with hugs, smiles and good cheer. You are your child's coach and ally.

What if toilet training isn't working?

There are some children who are resistant to toilet training. Your child is considered resistant if after trying to toilet train your child using the method described above:

- Your child is over 2 1/2 years old and has a negative attitude about toilet training.
- Your child is over 3 years old and not daytime toilet trained.
- Your child won't sit on the potty or toilet.
- Your child holds back bowel movements.
- The approach described here isn't working after 6 months.

If your child is resistant to toilet training, ask your healthcare provider for ideas and information about toilet training resistance.

Reference: RelayHealth and Bright Futures 201

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For any questions or concerns please call our office at 817-417-9001.