

Ht:

Date:

Wt:

BMI:

3 YEAR VISIT

Your three year old is growing up so fast. Her speech is so complex. She is able to run, jump, climb, and play with ease. She is constantly asking questions and people understand most of what she is saying. She should have lots of friends by now.

Development

1. Most three year olds are dry during the day, but many are still having bowel movements in the diaper. Night dryness can take several more years, especially with heavily sleeping children.
2. Most three year olds are able to see a dentist and cooperate. If brushing teeth is a challenge, focus on the back molars and hold off on the dental visit for another year. See the handout for some good tips.
3. Most children will drop the afternoon nap during this year, so try to turn it into a healthy hour or so of “quiet time.” The family could use it!
4. Many children will also move out of the crib and into a bed this year, so gating the bedroom door is not a bad idea to prevent nighttime field trips.
5. Limit screen time and smart phone/tablet use. Excessive screen time clearly impacts obesity rates in this country. We have limited understanding on the impact of these devices on the developing brain. Go enjoy the latest family movie. Have fun playing appropriate games on your tablet. Incorporate these technologies to your advantage, but don’t let them become a significant part of your everyday routine with your child. We all know how addictive these devices can be.

Injury Prevention

1. Keep using the car seat. It is best to keep your child in a five-point restraint car seat for as long as you can. Most seats go up to 60-100 lbs, so don’t move to a booster until as old as possible. Remember, riding in the car is the most dangerous thing your child does every day.
2. Water and choking remain significant risks to your three year old. If you need a handout about safety tips, please ask.
3. Keep firearms unloaded in a locked case. Keep ammunition stored separately.
4. Teach your child about the dangers of chasing a pet or a ball into the street. **DO NOT** depend on your child to remember these instructions. Closely supervise children near roads.
5. Teach your child not to approach or pet strange animals, especially when the animal is eating.
6. Continue to talk to your child about not following strangers and about not accepting touching they do not like by others. Do not make your child hug or kiss people when they do not want to. Play “what if” games to teach your child about dealing with strangers. For example, “what if someone wanted you to help them look for a puppy in the woods?” See what your child would do. Teach your child what he/she should do in these situations. Teach them where their “private parts” are and that private parts are *private*.
7. It’s time to buy a helmet!
8. See the handout on playground safety and head injuries.

Nutrition

1. It’s best to focus on what your three year old eats over the course of a week. If you worry about the day-to-day, meals will become more and more frustrating. Realize that children will eat great one day and then nothing the next.
2. Almost all children eat enough calories to grow. If you worry about their nutrition, then use a daily vitamin so you can stop worrying.
3. Obesity is a significant health threat. Continue to focus on healthy snacks with plenty of fruits and veggies. Limit drinking calories. Use the lowest calorie milk that you can. Sugary drinks are completely unnecessary at this age and a very easy habit to break. That is not the case as your child gets older. Be sure that you understand your child’s growth chart.

Next Visit

At the four year visit, it is best to go ahead and get the Kindergarten vaccines over with. Four years olds do so much better with shots than five year olds. How to prepare your child for that visit is personal preference. Some kids do better knowing whereas some do better having it sprung on them. Do what you feel is best for your child. It will be two shots. Don’t forget to get a flu vaccine annually!

Playground Safety Tips for PARENTS

HEADS UP CONCUSSION

As a parent, you play an important role in keeping your child safe on the playground. This sheet will help you learn how to spot a concussion and protect your child from concussion or other serious brain injury each time you take your child on an outdoor play adventure.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

HOW CAN I HELP KEEP MY CHILD SAFE?

Playgrounds are important places for children to have fun, explore, and grow. Children learn through play and need opportunities to take risks, test their limits, and learn new skills through free play. Playgrounds can also put children at risk for concussion.

On the playground, children are more likely to get a concussion or other serious brain injury when using:

1. Monkey Bars



2. Climbing Equipment



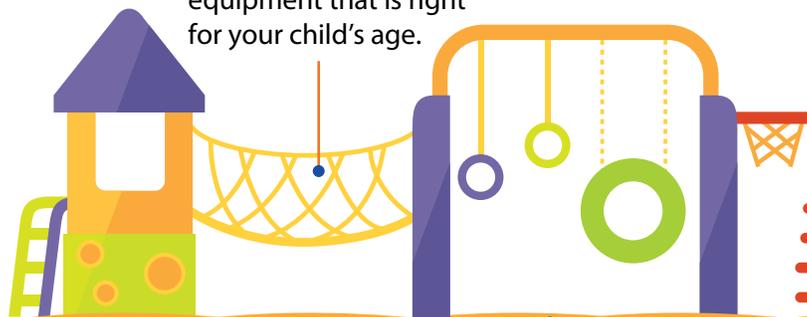
3. Swings¹



¹ Cheng T et al. Nonfatal playground-related traumatic brain injuries among children, 2001-2013. *Pediatrics*, 2015.

To help keep children safe:

✓ Use playground equipment that is right for your child's age.



✓ Make sure there are guardrails to help prevent falls.



✓ Check that playgrounds have soft material under them, such as wood chips, sand, or mulch.

✓ Look out for things in the play area that can trip your child, like tree stumps or rocks.



Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

Be HEADS UP on the Playground

HOW CAN I SPOT A POSSIBLE CONCUSSION?

After a fall or a bump, blow, or jolt to the head or body, look for one or more of these signs and symptoms of a concussion:

Signs Observed by Parents

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can't recall events prior to or after a hit or fall.

Symptoms Reported by Children

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

If you see any of these signs or symptoms and think your child has a concussion, or other serious brain injury, seek medical attention right away. Remember, signs and symptoms may show up right after the injury, or may not appear or be noticed until hours or days after the injury. While most children with a concussion feel better within a couple of weeks, some will have symptoms for months or longer.

WHAT ARE SOME MORE SERIOUS DANGER SIGNS TO LOOK OUT FOR?

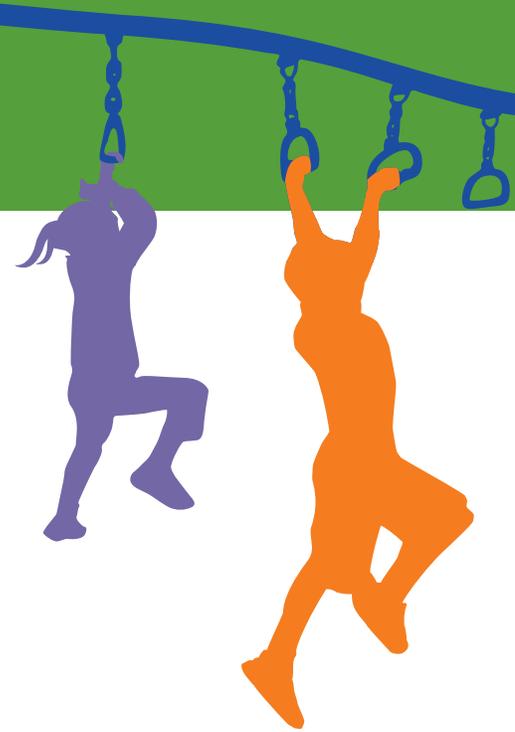
In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or ensure that the child is taken to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions, or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.



You can download the CDC **HEADS UP** app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

The information provided in this fact sheet or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to your physician or other health care provider.



How can you help your child lower their chance of getting a concussion?

Plan ahead. ✓



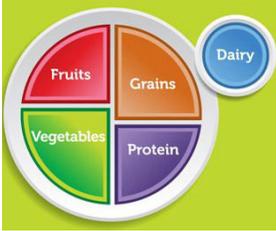
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To learn more, go to www.cdc.gov/HEADSUP

Oral Health Self Management Goals for Parents/Caregivers

Patient Name _____

DOB _____

 <p>Regular dental visits for child</p>	 <p>Dental treatment for family</p>	 <p>Brush twice a day</p>	 <p>Brush with fluoride toothpaste</p>
 <p>Wean off bottle (no bottles for sleeping)</p>	 <p>Less or no juice</p>	 <p>Only water in sippy cups</p>	 <p>Drink tap water</p>
 <p>Healthy snacks</p>	 <p>Less or no junk food and candy</p>	 <p>No soda</p>	 <p>Use xylitol gum, spray, gel, or dissolving tablets</p>

Important: The last thing that touches your child's teeth before bedtime is the toothbrush.

Self Management Goals: 1) Make sure your tap water has fluoride!!! Soddy
 2) Daisy especially
 3) _____

On a scale of 1-10, how confident are you that you can accomplish these goals? 1 2 3 4 5 6 7 8 9 10

Parent/Caregiver Signature: _____

Practitioner Signature: _____

Adapted from Ramos-Gomez F, Ng MW. Into the future: keeping healthy teeth caries free: pediatric CAMBRA protocols. *J Calif Dent Assoc.* 2011 Oct;39(10):723-33. Visit www.aap.org/oralhealth for more information on children's oral health.