



(rev.3-2024)

15 Month Check-Up

Child's Name _____ Date _____

Height _____ Weight _____ Head _____

IMMUNIZATIONS

Your child will receive immunizations today. Please read the information provided and ask your doctor any questions you may have. You will be asked to sign a form, giving consent for the vaccines. At 15 months, your child will receive the MMR and Hib vaccines. Please inform your doctor of any previous reactions to vaccines. Common reactions include fever, fussiness, local redness, swelling, pain, and mild sleepiness, which may last up to 2 days. Significant reactions include fever > 104.5 rectally or inconsolable screaming for more than 3 hours. For mild reactions, treatment includes cool compresses and acetaminophen (i.e. Tylenol). Correct doses are in the chart below – it is more important to dose by weight rather than by age. Please notify us of any significant reactions.

If it is flu season, please be sure all family members, especially siblings, and all people who come in contact with your child are vaccinated against influenza. Young children are at high risk for significant illness from the flu. Influenza vaccine and Covid vaccine will be offered. Remember, good handwashing is the best defense against all illness any time of year.

TYLENOL or acetaminophen	0-3 months (6-11 lbs)	4-11 months (12-17 lbs)	12-23 months (18-23 lbs)	2-3 years (24-35lbs)
ELIXIR (160 mg/5 ml)	1.25 ml	2.5 ml	3.75 ml	5 ml
CHEWABLE (160 mg)				1 tablet

- **If you are unsure about dosages of this or any medication, please contact us**
- **Cold medications are not recommended at this age**

DEVELOPMENT

At 15 months most children:

- Have a vocabulary of 3-10 words. Jargon.
- Point to 1-2 body parts.
- Understand simple commands. Gesture.
- Walk alone, stoop, crawl up stairs. Stack two blocks.

- Feed self with fingers, drink from a cup (off the bottle).
- Indicate wants by pulling, pointing, or grunting.
- Listen to a story.
- Continue to exert his/her independence with “no,” tantrums, refuse foods, resist naps.
- Show affection

Continue to talk and read to your child. Encourage speech by naming objects, pictures, and body parts. Encourage imitative behavior like dusting or sweeping. Continue a regular bedtime routine. The AAP recommends no TV or other screen media except video chatting under the age of 18 months. There should be no TV in the bedroom.

Remember that each child is different, and a wide range of growth and development is normal. If you have concerns about your child’s development, please ask your doctor.

Both the AAP and the AAPD (The American Academy of Pediatric Dentistry) recommend that your child start seeing a pediatric dentist by age 1 to establish a dental home. Brush your child’s teeth twice a day with a tiny smear of fluoridated toothpaste (the size of a piece of rice) on a soft toothbrush.

DISCIPLINE

Children this age are increasingly independent. They will constantly test rules, so it is important to set limits and be consistent: children learn through repetition. Discipline is a means of teaching, not punishing. They are constantly seeking your attention; they will repeat a behavior which got your attention, whether it was positive or negative. Therefore, give lots of attention for “good” behavior, and have your child lose attention (i.e. time out) for “bad” behavior. The recommended duration of a time out is 1 minute per year of age.

FEEDING/ NUTRITION

Continue whole milk. Children this age typically drink 16-24 ounces of whole milk a day. Offer your child a spoon for eating and continue the cup. Continue to offer a variety of table foods; do not limit the menu to only foods he/she likes. Let your toddler decide how much he/she will eat, but only feed at the scheduled meal or snack time. Make sure to cut the food into small pieces and **avoid foods which can cause choking such as nuts, popcorn, gum, raisins, carrot or celery sticks, hot dogs, chips, whole grapes, or anything hard or tough.** When giving peanut butter, use a thin layer, not thick chunks of peanut butter. Do not add sugar or salt to your child’s food. At this age, your child may have no more than 4 ounces a day of 100% fresh or reconstituted fruit juice served with a meal or a snack, but juice is not necessary for nutrition. Eating a piece of fruit offers more nutrition and is preferred. Ask your doctor if a vitamin supplement is necessary.

Continue healthy eating habits:

- 3 meals with 1-2 scheduled healthy snacks per day
- Try to avoid allowing your child to snack/"graze" between regularly scheduled healthy snacks and meals
- Appetite is decreased at this age, but children will not let themselves starve. Offer them the food you would like them to eat. If they eat, that is fine and if they don’t eat, that is

also fine. DO NOT offer them something else just to get them to eat. They will regulate their intake.

- Do not offer junk food. If it isn't offered, they can't eat it.
- Allow your child to eat only in a highchair or booster seat in a designated area, preferably with the family. No eating in front of the TV, while playing, etc.
- Avoid using food for comfort, to soothe, or to quiet your child. This will interfere with his/her ability to regulate food intake.
- Allow your child to feed him/herself.
- Give water between meals and snacks if your child seems thirsty. Juice (maximum 4 oz. per day) may be part of a scheduled meal or snack.
- Do not put your child to bed with a cup or allow your child to carry a cup of milk or juice to drink throughout the day. The sugar will lead to tooth decay. If you have well water, your child may need fluoride supplements.

TOILET TRAINING

Toddlers are typically ready to begin toilet training between 15 and 24 months. They need to be able to walk and be able to tell you when they need to go to the bathroom. Over the next few months, you may buy a potty chair and allow your toddler to become familiar with it. When your child shows interest, take the opportunity to teach. You may encourage, but do not pressure or punish your child. Positive reinforcement is most helpful.

SAFETY

- Continue using a rear facing car seat properly secured in the back seat. Children should always be placed in an approved car seat in the rear-facing position until they reach the highest height or weight allowed by their car seat manufacturer. If they have outgrown the infant seat, they should be in a reversible car seat that is rear facing. Keep your child rear facing as long as possible. Never place your child in the front seat of a vehicle with an airbag. The back seat of a vehicle is the safest place for children of all ages. Avoid bulky clothing and blankets between your infant and the harness and make sure the harness fits snugly against the child's chest. Additional information can be found on the US Department of Transportation website www.seatcheck.org or at healthychildren.org under car seat information for families.
- Switch to a toddler bed, especially if your child is trying to climb out of the crib.
- Do not give your child plastic bags, latex balloons, or small objects such as coins, marbles, or magnets. Do not hang anything around your child's neck.
- Continue to use gates on the stairs (top and bottom) and safety locks and guards (if not an emergency exit) on windows. Keep furniture away from windows.
- Set your hot water heater thermostat to below 120 degrees. Continue to test water temperature with your wrist before bathing. Use cold water immediately for a burn and call our office for advice.
- Children need constant adult supervision, especially around water. Empty any tubs, buckets, and small pools immediately after use. Swimming pools need to be enclosed with a four-sided fence with a self-closing, self-latching gate.
- Do not expect (or allow) a young sibling to supervise your child.

- Monitor your child carefully in the kitchen. Turn pan handles toward the back of the stove. Use latches on all cabinet doors. Keep glassware, cords, and sharp objects away from the edge of a table or countertop.
- In the bathroom, lock cabinets and drawers; install toilet locks.
- Keep your child away from hot stoves, fireplaces, irons, curling irons, space heaters.
- Do not leave heavy objects or hot liquids on tablecloths your child might pull down.
- Check for (and remove) any dangling telephone, electrical, blind, or drapery cords.
- **Never** underestimate your toddler's ability to climb. Secure to the wall dressers, bookcases, or any large furniture which may be toppled if climbed.
- Limit time in the sun. Use sunscreen of SPF 15 or higher and use hats to shade ears, nose, and lips. Please visit the website healthychildren.org for more comprehensive sun safety recommendations.
- Test smoke alarms; change the batteries yearly.
- Keep all firearms unloaded and locked away. Store ammunition separately. Keep cigarettes, lighters, matches, smokeless tobacco, liquid nicotine, and alcohol out of sight and reach. Lock up electrical tools.
- Keep the environment smoke free.

Keep poisonous substances, medications, cleaning agents, health and beauty aids, paints and paint solvents locked in a safe place out of sight and out of reach. If there is an accidental ingestion, call **Poison Control** at **828-9123** or **1-800-222-1222** immediately. Keep the number for Poison Control by your telephone.

CONTACT OUR OFFICE

If non-urgent questions or concerns about your child develop before your next appointment, please feel free to call our office during regular business hours. Our medical advice nurses will be glad to answer your questions. They may recommend that you make an appointment to have your child seen by a doctor or nurse practitioner.

In the case of a true emergency, such as difficulty breathing/respiratory distress, loss of consciousness, seizure, profuse bleeding, or any potentially life-threatening situation, **call 911 or go to the nearest emergency room**. Due to their pediatric ER staff, our providers prefer Chippenham, St Mary's, or VCU Medical Center when you have a choice in where to take your child.

Please call **Poison Control** at **828-9123** locally or **800-222-1222** immediately in the event of any ingestion or suspected ingestion of chemicals, medications not prescribed for your child, accidental overdose, or any other substance of concern.

One of our doctors is always on call after hours for urgent or emergency care concerns. To reach our on-call service, please dial the office phone number and follow the prompts. You will be directed to our nurse on call service and may have to leave a message. You will receive a call back as soon as possible from one of our nurses or providers on call. We ask that you limit after-hours calls to urgent concerns only. Persistent problems such as ongoing illnesses (including colds), constipation, or behavior problems without sudden changes are best addressed during regular office hours when our providers are able to access your child's medical record. Please do not call after hours or on holidays to request antibiotics, including eye drops. In most cases your child will need to be seen to ensure proper

diagnosis. If you feel that your child needs to be seen after hours, please take him or her to the nearest urgent care center or ER.

The next check-up is at **18 months** of age. We encourage you to make your appointment before you leave today. If you would prefer to call, our centralized scheduling department can be reached at 804-320-1353. Please note that our office requires 24-hour notice to cancel an appointment. Thank you.