



Premier Pediatrics, P.A.
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12, 13 and 14 Year Appointments

At Premier Pediatrics, we provide an age-relevant handout prior to each well-visit appointment. Please feel free to use the handout to write down questions and to take notes throughout your appointment. We will be happy to discuss questions you might have regarding anything covered in this handout or otherwise. Please continue to refer back to this handout at home. However, know that you have several options to answer additional questions and concerns that may come up at home.

1. Our staff is available by phone during our office hours: 8AM-4:30PM Monday-Friday.
2. Also, be sure to check our website: www.premierforkids.com. We have partnered with Pediatric Web to bring you a quick symptom guide in addition to a quick medicine and dosage guide.
3. Additionally, we offer triage services through Children's Mercy in the event that you need urgent assistance when we are not in the office. You may follow the prompts from our primary phone number to be connected to this line.

Immunizations

The 12, 13 and 14 year appointments do not necessarily include any immunizations. The next scheduled round will typically be given at the patient's 16 year appointment*. However, your child may need to catch-up on a missed immunization or your provider may recommend an immunization based on the patient's individual needs. Please let the nurse or your provider know if you have any questions regarding your child's immunization needs.

Gardasil (HPV9), is a series of three immunizations which are currently optional, but the AAP (American Academy of Pediatrics), and our physicians do recommend your child receive this immunization. Gardasil may be given to children 9 years of age and older. If your child receives this immunization at his/her well-visit, please be sure to get a vaccine information statement from the nurse.

Appointment and Immunization Schedule

Your child's next regularly scheduled well-visit will be in 1 year.

It is always a good idea to try to schedule these appointments as early as possible. We recommend 3-4 months in advance to ensure an appointment time that works best for you and your child's schedule.

*Well-visit appointments should be scheduled every year around the patient's birthday.

Vaccine Schedule

AGE	REQUIREMENT	DESCRIPTION OF SHOTS
Birth		Hep B
2 month		Pediarix (Dtap, IPV, HepB); PedVaxHib; Prevnar 13 (pneumococcal); Rotarix (Rotovirus-oral)
4 month		Pediarix (Dtap, IPV, HepB); PedVaxHib; Prevnar 13 (pneumococcal); Rotarix (Rotovirus-oral)

6 month	*must be 6M	Pediarix (Dtap, IPV, HepB); Prevnar 13 (pneumococcal); Vision Screen
9 month		Hgb/HCT (finger-prick); Any catch-up shots
12 month	*must be 12M	MMR; Varivax (Varicella); Vision Screen
15 month		Prevnar 13(pneumococcal); Hep A #1
18 month		Infanrix (Dtap); Hiberix; MCHAT
2 year		Hep A #2; Hgb/HCT/Lead (finger prick); MCHAT; Vision Screen
4 year	*must be 4YR	Kinrix (Dtap/IPV); MMRV (MMR/Varicella); Vision Screen
5 year		Vision Screen; Hearing Screen
11 year	*must be 11YR	Boosterix (Tdap); Menveo (Meningococcal ACWY); HPV9; Cholesterol
12 year		HPV9 #2
13 year		HPV if not completed
16 year	* must be 16YR	Menveo (Meningococcal ACWY); Bexsero (Meningococcal B); Cholesterol; Hgb
17 year		Bexsero #2 (Menigococcal B)
18-21 year		Tdap; Catch up on Men B or HPV9 if not complete

Immunization Notes

- *We follow the CDC/AAP (American Academy of Pediatrics) guidelines for vaccinations.
- *We can give the Dtap, IPV (polio) and Hep B individually .and not as a combination shot if necessary.
- *Flu shots do not have preservatives.
- *Minimum spacing between 2M, 4M, and 6M shots is 6 weeks

Health/Physical Forms

We have the Kansas and Missouri Pre-Participation form as well as the Boy Scout form available at our office and will be happy to provide these for your child at a scheduled appointment. If for any reason you need a health form completed outside of a well-visit, we do request that you allow 3 to 5 days to process this request. -You may request the PPE forms through the Patient Portal. We will send it directly through the portal for you to print at home. T-he Boy Scout form must be dropped off and picked up from our office if done outside of the well care appointment. -The physical must be within the last year to be eligible to complete this paperwork.

A Note about PPE (Pre-Participation Physical Evaluation) Forms

Kansas High School PPE forms state “*PPE shall not be taken earlier than May 1 preceding the school year for which it is applicable.*” At Premier Pediatrics, we recommend patients have one well-visit per year around their birthday; this allows our patients’ well-visit appointments to be spread out throughout the year and avoids overflow during the summer months. We will print/prepare a PPE form *after May 1* (in accordance with the Kansas rule) for a patient who has had a well-visit in the last 12 months. This will be prepared with the understanding that our providers have followed your child medically and are aware of any health changes that may have occurred with your child since their last physical exam. Therefore, if your child is an active patient at Premier Pediatrics, he/she *does not* need an additional examination to prepare a PPE form.

Please note that well-visit examinations, physical evaluation, sports physical, camp physical, etc. are synonymous and refer to the same appointment that your child receives once per calendar year.

Immunization Records

We will be happy to provide a copy of your child’s immunization record at any time. Please feel free to ask for one at your child’s well-visit, call to request a copy, or you may print this record from your child’s patient portal account. Immunization records are considered public health records; therefore, they may be faxed if requested or picked up at our office.

Adolescent Care: 12 thru 14 Years

Could anything in life have prepared you for the experiences that you have had with your adolescent? What a roller coaster life it is for you as the parent as well as for your teenager! Your adolescent’s physical features will change a great deal during this time depending on the sex and genetic makeup. Girls usually begin their growth spurt about two years ahead of boys, achieving their peak in height growth at about 12-13 years. Boys achieve their peak growth at 14-15 years.

Your adolescent is very focused on social life, friends and school. Close friendships with members of the same sex are developed. Sometimes, a teenager’s best friend becomes a parent substitute and confidante. These friendships, however, will often change abruptly, causing hurt feelings.

Adolescents pursue personal interests with considerable focus, often to the exclusion of everything else! Although sometimes difficult, this self-centeredness is normal. Traditional sex differences in interests are blurring. For example, both sexes may be interested in clothes or sports. Daydreaming, mood swings, temper outbursts, and name calling are all part of the emotional experience of trying to gain independence. Because of all the changes occurring in every phase of their development, it is no wonder this age can make such an impact on the family. If you are worried about your child in any respect, it is appropriate to discuss this with a professional.

Eating

Adolescents seem to eat continuously! Unfortunately, many teenagers consume fast foods daily and eat snacks that are high in calories and fat. Appropriate snacks should be encouraged and junk food consumed only in moderation. Breakfast is very important. Make sure your child has a nutritious breakfast daily.

Continue to offer your teenager selections from the basic food groups at all meals and snacks. Teach him/her about foods. Of the major food groups, he/she needs: around 4-6 servings of milk or milk products; 6-8 ounces of the meat, poultry, fish, eggs, beans, and nuts group; 2-4 fruit servings; 3-5 vegetable servings; and 6-11 bread, cereal, rice, pasta group servings per day. At least one serving of fruit per day should be a citrus fruit or juice. A yellow or dark green vegetable should be served at least 3 to 4 times a week. A bread serving is one slice or a cup of cereal.

Avoid “empty” calorie snacks such as soft drinks, chips, candy, and cookies. If given, these should be in limited amounts. Encourage snacks of fruit, popcorn, peanut butter, stuffed celery, raisins, cheese strips, etc.

At this age, it is especially important to evaluate your teen's food consumption in relation to the amount of exercise that he/she does. Obesity is quite worrisome in this age group and studies have shown that children who are overweight at this time have a greater chance of obesity as an adult. On the other hand, teenagers also often participate in sports activities, necessitating an increase in caloric intake.

Girls may also develop anemia during this time from a lack of sufficient iron in their diet to replace menstrual losses. Crash dieting is a common response to their obsession with self image and appearance. This may result in thinness. Like obesity, eating disorders such as bulimia or anorexia are common during adolescence. If you need information on foods which are high in iron, advice on a weight loss program, or suspect your child has an eating disorder, then consult your health care provider.

Sleeping

While your child may not be experiencing any particular problems at this age, the adolescent is frequently sleep-deprived. Teenagers require approximately 9 hour of sleep per night. Sleep lost cannot be made up later.

Development

Physical changes are very important to your adolescent, as they signify that he/she is developing like his/her peers. It is important, however, that you talk with your teen about these changes prior to their occurrence so he/she will be prepared and can more easily adjust to his/her changing body. Girls often begin menstruation at this time (the average age being 12 ½). They show changes in breast development, body hair, and broadening of hips. Boys frequently begin to have nocturnal emissions, facial and body hair, and broadening of shoulders. By now you are very aware of how "social" your child is becoming! Even though the family is still very important, friends (individuals, classmates, and group members) and their opinions are highly valued. Teenagers enjoy these interactions and spend a great deal of time with their peers.

School remains very important in your child's life now. Some subjects are enjoyed (as hopefully, are some teachers). Young teens are capable of problem solving and by middle adolescence may begin to think abstractly. They begin to show some concern for political and social problems by the end of this stage and are often idealistic and altruistic in intellectual capabilities.

Teens enjoy board, video, and computer games, sports activities, crafts, sewing, music, musical studies, computers, video/audio equipment, and just "hanging out." Your teenager may join a club in your neighborhood or at school or enjoy an organized group such as scouts or a religious group. Team sports both in and out of school are good for channeling some of the boundless energy and teaching discipline. Support these kinds of activities in your community. Make sure all your child's activities are properly supervised or chaperoned. Some adolescents enjoy reading, particularly a book series, comics or magazines appropriate for their age. You might consider subscribing to some. Others enjoy writing; encourage keeping a log or diary (maybe on the home computer) but respect your child's privacy. You may notice your child enjoys collecting things such as stamps or baseball cards or creating things like collages, building models, or cooking. This is a good time to help your child improve in his/her use of tools, utensils and other household equipment.

Safety Dialogue and Discipline

It is important that the adolescent have increasing independence with appropriate limits set for their safety and well-being. Because of the type of activities your teen enjoys, it is extremely important to teach and reinforce the practice of activity-appropriate safety measures to prevent and limit risk for injury. These activities include: team and individual sports, bicycling, swimming, and those likely to cause bodily damage such as trampolines, skateboards, and roller blades.

Continue to teach your adolescent that all firearms are unsafe and should be presumed loaded. **STORE ALL WEAPONS UNLOADED IN LOCKED CABINETS. AMMUNITION SHOULD BE SIMILARLY LOCKED BUT IN A DIFFERENT LOCATION.** Most firearm injuries occur in and about the home. Consider asking questions about the

presence of firearms at friends' homes. Teach him/her the **NEW** rules of gun safety: **N**ever touch a gun, **E**very gun is loaded, **W**hen in doubt, get out.

Effective education in the area of sex, contraceptives, drugs/alcohol, and cigarettes/chewing tobacco is extremely important. AIDS prevention has magnified the importance of educating your child. It is appropriate and important to impart your own moral values about these subjects, but try to be flexible and open-minded enough to let your child ask questions and express feelings without fear of judgment or punishment. If you are just too uncomfortable to talk about these areas, make this known at an annual exam so your health care provider can help with this. This is an extremely difficult time for parents who must cope with their adolescent while trying to keep the channel of communication open. Try to love with no strings attached!!!

Do you know signs and symptoms of drug abuse or childhood depression? Ask for a handout on these subjects as well as those mentioned above.

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