



Premier Pediatrics, P.A.
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2 Year Appointment

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

Your child will receive his/her next round of immunizations today:

1. Hepatitis A #2

You should have received specific details about this immunization in the 12 month handout. However, please let us know if you would like an additional copy of this information and we will be happy to provide it for you.

Typical Reactions to Immunizations:

Like any other medicine, vaccines can cause side effects. Mostly these are mild "local" reactions such as tenderness, redness or swelling where the shot is given, or a mild fever. They happen in up to 25% of children with most childhood vaccines. They appear soon after the shot is given and typically go away within a day or two; however, they may last up to a week.

When to Call the Doctor after an Immunization:

Though severe reactions to immunizations are rare, you should call the doctor if your baby has any of the following symptoms within two days of a vaccine:

- ✓ High fever (over 104°)
- ✓ Crying for more than three hours at a time (not to be confused with colic)
- ✓ Seizures or convulsions – often related to high fever
- ✓ Severe, persistent seizures or major alterations in consciousness
- ✓ Listlessness, unresponsiveness, excessive sleepiness
- ✓ An allergic reaction (such as swelling of the mouth, face, or throat; breathing difficulties; rash)
- ✓ Behavior changes – you know your little one best, so if you notice any type of behavior that's not normal for your child, it's always smart to check with your pediatrician – just to be on the safe side

Appointment and Immunization Schedule

Your child's next regularly scheduled well-visit will be at 3 years of age.

It is always a good idea to try to schedule these appointments as early as possible. We recommend 2-3 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

A Note about Tylenol and Immunizations

Your child will be receiving his/her next round of immunizations today.

Because receiving immunizations can cause a mild fever, many parents and pediatricians routinely give acetaminophen (Tylenol) to children when they receive their vaccinations. However, we know that a fever is one sign that our body is generating an immune response. A recent study indicated that receiving acetaminophen before vaccines could *possibly* reduce that immune response and thus make the vaccines less effective. This means having a fever could make the vaccines work better!

Giving Tylenol prior to immunizations does not reduce the discomfort associated with the injection. Therefore, the best advice is to wait and see how your child reacts to the immunizations. Many children act fine after receiving their immunizations even if they have a vaccine-related fever. If that is the case, the fever is possibly a good thing and acetaminophen isn't necessary. If, however, your child is acting sick after receiving vaccines, it is then worth talking to your pediatrician to see if acetaminophen or ibuprofen would be helpful. (Adapted from www.healthychildren.org by the American Academy of Pediatrics.)

Daycare/Preschool Forms

We have the Kansas Department of Health forms 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 or daycare form completed outside of a well-visit, we do request that you allow 3 to 5 days to process this request. This information is considered protected health information and is available to be picked up at our office. It can be mailed if you provide a self-addressed-stamped-envelope.

Child Care: 2 Years

What fun your child is! His/her motor and verbal skills are improving each day, as you can see. He/she still asserts his/her independence in the areas of mealtime, bedtime, or toilet training, which can be frustrating for you. Be patient. It's tough being a parent but it's hard being a child as well. Your child's contrariness is normal and important for developing independence.

Sleeping

An afternoon nap is still generally required for your child. Sleep at night may be continuous or you may notice problems such as refusing to go to bed, getting out of bed, or awakening during the night. If so, talk to your health care provider about ways to eliminate the problem.

Elimination

Toilet training usually begins around 24 months based on signs of readiness and interest from your child. Ask for a handout or additional resources on toilet training your child. Remember, training doesn't happen overnight and your child will have accidents. Some children may not be ready (ready includes a dry diaper upon awakening from naps, a regular time for bowel movements, ability to say appropriate words for functions, recognition of urges to eliminate, ability to pull clothing up and down, a desire to please parent) until their third birthday, so try to remain patient and not let this developmental milestone become a battleground.

Development/Play

Playmates are important now. If he/she is not in a day care situation where there are other children, consider a play group or trading time with another mother to allow your child the experience of playtime with a peer. You will need to supervise this playtime as safety remains a factor and attention span is short.

Your child may be going up and down stairs by himself/herself putting both feet on the step. He/she may be able to run more easily and may pick up an object without falling. He/she will throw a ball overhand, build a tower of 6 or more blocks, and can draw a circle or straight lines.

His/her vocabulary is growing considerably. He/she may be saying 2 to 3 word sentences, using his/her name. His/her speech is becoming much clearer and easier to understand. Your child may be able to tell you when he/she wants something to eat, or needs to go to the bathroom, or has a soiled diaper.

Imitative play remains an important part of your child's development. So do gross motor and fine motor play. Appropriate toys for improving these functions include; playground equipment, household items such as toy appliances, telephones, and dishes. Finger paints and play dough are great play items, but are best done with supervision. Simple household tasks such as dusting a table or sweeping an area with a broom are enjoyable for your child and make him/her feel a part of the family. Now that your child may be able to turn pages in a book one at a time, allow him/her to hold the book while you read. This makes him/her feel special! Take him/her to the library to select his/her books.

Safety

Safety precautions are ongoing in the house and outside. Now that your child is mobile and can reach almost everything at counter level, be aware of kitchen utensils left out and potentially within his/her reach such as scissors and knives. Also, be careful about things that might be left at counter level elsewhere; detergents and cleaning agents (particularly liquid and granulated drain cleaners, dye, toilet bowl cleaners, dishwasher detergents, powdered bleach, and spot removers), nail polish remover, makeup, household repair items (particularly paints, shellac, varnish, paint thinner, turpentine, mineral spirits), weed killers, insecticides, gasoline, machine oil, kerosene, lighter fluid, and all medicines. Review your child-proofing and safety plans the first Sunday of every month.

Always keep all poisonous things in their original containers. **Never, ever put poisons in food containers or bottles.** Keep your supply of potentially poisonous things at a minimum. When you are finished using a potential poison, dispose of the remainder and thoroughly rinse the container and dispose of it (or transport it to your local hazardous waste disposal site). Remember that your child might get into the trash. Keep your childhood emergency reference where it can be found easily. Keep emergency numbers including the poison control center in or by each phone.

The greatest risk to your child's health is a motor vehicle accident. Always use an approved safety seat in your car in the recommended manner; anchored, properly positioned and secured. Ask about an additional safety references. This is a good age to start swimming lessons if you have not already begun.

Communication and Discipline

The methods of discipline you use depend on several factors. You are greatly influenced by the way in which your parents raised you. You may already have or wish to should pursue additional education about parenting. These classes or programs can be helpful. To some extent your parenting also depends on the kind of child you have (each is different). By its nature, parenthood requires that you make choices for your child and that you are responsible for these choices. When possible, allow your child to participate in these choices. Your being respectful of your child's opinion will promote his/her

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