Premier Pediatrics, P.A. 8675 College Boulevard, Suite 100 Overland Park, KS 66210 913-345-9400 913-345-9408 fax



4 Month 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: <u>www.premierforkids.com</u>. 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 second round of immunizations today:

- 1. Pedarix: Polio (IPV), Hepatitis B, Diptheria-Tetanus-Pertussis (Dtap)
- 2. PedVaxHib: HIB (Haemophilus influenza type b)
- 3. Rotarix (an oral vaccine): Rotavirus
- 4. Pneumococcal 13

You should have received specific details about these immunizations in the 2 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; whole body 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
- Severe reactions to the Rotovirus vaccine: high fever, vomiting, diarrhea, bloody stool, abdominal distention, stomach pain (the baby brings his/her knees to their chest while screaming)

Appointment and Immunization Schedule

Your child's next regularly scheduled well-visit will be at 6 months of age. Please schedule this appointment as soon as possible. A patient care coordinator will be happy to help you schedule appointments at checkout.

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

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, however, your child is acting sick after receiving vaccines, it is then worth talking to your pediatrician to see if acetaminophen would be helpful. (Adapted from www.healthychildren.org by the American Academy of Pediatrics.)

Daycare Forms

We have the Kansas Department of Health forms available at our office and will be happy to provide these for your child after a scheduled appointment. Please let the patient care coordinator know you need a daycare form at check out. Once the provider has completed the patient note, the well care form will be pushed out to your patient portal. If you are in need of a daycare form at any time outside of the well care visit in the office, please request this form through the portal or call the office and it will be pushed out to the portal. These well care forms are good for one year once your child reaches the age of two years of age.

Infant Care: 4 Months

Have you noticed how active and assertive your baby is becoming? It is important to remember that development follows the same sequence in all children but the rate of acquisition of these skills varies with each individual. Also, no baby is average; each is special, advancing in his/her own way. Similarly, you will notice that he/she is developing specific personality traits. Your baby may be rolling from abdomen to back and/or from back to side. Your baby can hold his/her head steady when held in a sitting position and can sit erect if propped up. Your baby can also look at objects in front of him/her and may try to reach for them. If your baby does grasp the object, he/she will often do it with both hands and bring it to his/her mouth. At this age, babies are mouth explorers.

Your baby is able to locate sound and turn his/her head in that direction. Most babies are very vocal now and squeal, coo, babble, and "talk" a great deal when spoken to. Your baby is also learning about cause and effect. He/she shakes a rattle and it makes noise, throws the rattle and you make noise!

Feeding

Your infant is still on breast milk or commercial formula (or a combination of both). You may begin introducing solid foods between now and the six month visit if your child shows readiness signs. Your child will probably be ready closer

to the six month visit than to this one. Begin with infant rice cereal or oatmeal 1-2 times per day. Mix two teaspoons of dry cereal with breast milk, formula, or water until it becomes a thin soup. Place the contents of the baby spoon about one half of the way back on your baby's tongue to aid swallowing. As your baby improves handling this, gradually increase the thickness of the cereal and the amount fed to two tablespoons. Ask for advice and guidelines about when and which solid foods to introduce to your baby. Remember to introduce only one new food at a time and continue it for 4 to 7 days to make sure he/she is not allergic.

Sleeping

Infants will continue to increase their amount of night time sleep. Most babies sleep 6 to 8 hours at night. Continue the bedtime routine to encourage sleep. Infants also begin to adapt a little more to the family routine and decrease sleeping time during the day to a morning nap and/or an afternoon nap. A routine schedule helps your baby feel secure.

Elimination

Previous patterns will continue but with the addition of solid foods, stools may change in appearance. Breastfed babies' bowel movements will be firmer when solid foods are added to their diets. Green vegetables may give a green color to the stool (as may iron supplements --- a dark green).

Safety

Your baby is definitely becoming more active and because of this, burns can be a major danger. Do not walk with hot foods or liquids while carrying your infant as this is a common cause of burns. A cup of coffee is the most common food cause of scalded children. If you smoke, then ask for help in eliminating the habit. Not only is passive smoke harmful to your baby but with his increasing activity your infant is more likely to get burned.

Never keep the baby in an infant seat on a table or counter where a fall could be life threatening. The floor is probably still a safe place to play at this age. Keep out of your child's reach all small things which could be picked up, swallowed, or chewed up such as safety pins, buttons, coins, plant leaves, etc. These things are choking and aspiration hazards. Remove, secure, or cover all low lying objects that are potentially life endangering: electrical outlets, all electrical cords (these can be chewed on with fatal results), fans, and other electrical equipment.

Develop a fire escape plan for your home. Recheck or purchase a smoke detector(s) and fire extinguisher(s).

Development/Play

At this age, your infant more actively engages in play with you! He/she can entertain himself/herself for short periods. Encourage this independence; put him/her on the floor or in the playpen on his abdomen with soft, different-textured, bright-colored toys to try to reach and grasp. Prop him/her in an infant seat or chair (not unattended) with playthings. Use a swing (not unattended), take a walk with your baby in a stroller or just rock on the porch to give him/her exposure to new sights, sounds, and motions. When you place him/her in front of a mirror, you open a whole new area of entertainment for your baby. Take off his clothes and allow him/her increased freedom of movement. Allow him/her time to splash and play in the tub. Let an alternate care giver feed, change, and bathe your infant. This provides a different variety of interaction and stimuli. Remember, your infant does have a short attention span and will become bored and fussy, so alternate and vary activities. Continue to talk and sing to your baby. Respond enthusiastically to his coos and babbles. Although it is tempting to use "baby talk", try to talk to him/her in adult language most of the time. Read to your infant. Provide him/her with soft plastic/cloth books, because reading is very important to success as an adult; you cannot start early enough.

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FEEDING GUIDELINES: ALL FOODS MUST BE CUT OR PORTIONED TO THE APPROPRIATE SIZE FOR YOUR CHILD.

4-6 months

- Foods should be given for 3 days before new foods are started. This is to check for possible food allergies. Signs of food allergies include: diarrhea, hives, diaper rash, or swollen lips.
- SERVING SIZE IS APPROXIMATLY THE SAME SIZE AS YOUR CHILDS PALM.
- <u>Cereals:</u> (Start here) rice, barley, or oatmeal. Wheat based cereals to be given last.
- Fruits: apples, bananas, pears
- <u>Vegetables</u>: avocados, green beans, sweet potatoes, butternut squash
- <u>Nuts:</u> peanut butter, eggs and yogurt may be introduced now, in most cases. Discuss with your doctor.

6-8 months

- Foods should be given for 3 days before new foods are started. This is to check for possible food allergies. Signs of food allergies include: diarrhea, hives, diaper rash, or swollen lips.
- SERVING SIZE IS APPROXIMATLY THE SAME SIZE AS YOUR CHILDS PALM.
- <u>Cereals/Grains:</u> Cereals may continue as before, may offer crackers (saltines or gram).
- Fruits: Mango, peaches, papaya, plums, prunes, apples, bananas, pears
- <u>Vegetables</u>: carrots (cooked and peeled), cauliflower, parsnips, peas, zucchini, avocados, green beans, sweet potatoes, butternut squash
- Proteins: beef, chicken, pork, turkey, tofu, eggs, fish

8-10 months

- Foods should be given for 3 days before new foods are started. This is to check for possible food allergies. Signs of food allergies include: diarrhea, hives, diaper rash, or swollen lips.
- SERVING SIZE IS APPROXIMATLY THE SAME SIZE AS YOUR CHILDS PALM.
- Finger Foods: rice puffs, cheerios, crackers
- Grains: buckwheat, kasha, flax, kamut, millet
- <u>Fruits</u>: Mango, peaches, papaya, plums, prunes, apples, bananas, pears, cranberries (chopped), figs, grapes (chopped), kiwi, melons, persimmons, blue berries, coconut
- <u>Vegetables:</u> carrots (cooked and peeled), cauliflower, parsnips, peas, zucchini, avocados, green beans, sweet potatoes, butternut squash, asparagus, broccoli, beans, cucumber, eggplant, leeks, onions, turnip, potatoes
- Dairy: cheese, cottage cheese, cream cheese, yogurt
- Proteins: beef, chicken, pork, turkey, eggs, tofu, fish

10-12 months

- Foods should be given for 3 days before new foods are started. This is to check for possible food allergies. Signs of food allergies include: diarrhea, hives, diaper rash, or swollen lips.
- SERVING SIZE IS APPROXIMATLY THE SAME SIZE AS YOUR CHILDS PALM.
- Offer Table Foods At This Time

12 months +

- Foods should be given for 3 days before new foods are started. This is to check for possible food allergies. Signs of food allergies include: diarrhea, hives, diaper rash, or swollen lips.
- SERVING SIZE IS APPROXIMATLY THE SAME SIZE AS YOUR CHILDS PALM.
- Fruits: oranges, grape fruit, strawberries, raspberries, blackberries, honey
- Dairy: whole milk