# 12 Month Well Child Care

## PHYSICAL DEVELOPMENT:

The 12 month old pulls to a stand, can cruise around the furniture, and may be taking a few steps alone. The child can bang 2 blocks together, feed self with fingers, has a precise pincer grasp, and can drink from a cup.

## EMOTIONAL DEVELOPMENT:

At 12 months, children can indicate needs by gestures. They may become anxious or cry when parents leave.

## SOCIAL DEVELOPMENT:

The child imitates others and can wave “bye-bye” and play peek-a-boo.

## MENTAL DEVELOPMENT:

At 12 months, the child can imitate sounds, can say “mama” and “dada” and often a few other words. The child can find a hidden object.

## IMMUNIZATIONS:

At this visit, the health care provider may give the 4th dose of DTaP (diphtheria, tetanus, and pertussis-whooping cough); a 3rd or 4th dose of Haemophilus influenzae type b (HIB); a 4th dose of pneumococcal vaccine;); the 1st dose of MMR-V (measles, mumps, rubella, and varicella or “chicken pox”); and the 1st dose of Hepatitis A injection. A final dose of Hepatitis B or a 3rd dose of the inactivated polio virus (IPV) may be given, if not given previously. In addition, an annual influenza or “flu” shot is suggested during flu season.

## TESTING:

The health care provider should screen for anemia by obtaining a hemoglobin or hematocrit. Lead testing and tuberculin testing may be performed, based upon individual risk factors.

## NUTRITION AND ORAL HEALTH

- Children may stop using infant formula and begin drinking whole fat milk at 12 months.
- Breastfed children should continue breastfeeding.
- For non-breastfed children, daily milk intake should be about 2-3 cups (16-24 ounces) of whole fat milk.
- Provide all beverages in a cup and not a bottle to prevent tooth decay.
- Limit juice to 4-6 ounces per day of a vitamin C containing juice and encourage the child to drink water.
- Provide a balanced diet, encouraging vegetables and fruits.
- Provide 3 small meals and 2-3 nutritious snacks each day.
- Cut all objects into small pieces to minimize risk of choking.
- Avoid foods high in fat, salt, or sugar. Transition the child to the family diet and away from baby foods.
- Provide a highchair at table level and engage the child in social interaction at meal time.
- Do not force the child to eat or to finish everything on the plate.
- Avoid nuts, hard candies, popcorn, and chewing gum, since these are choking hazards.
- Allow the child to feed themselves with cup and spoon.
- Brushing teeth after meals and before bedtime should be encouraged.
- If toothpaste is used, it should not contain fluoride.
- Continue fluoride supplement if recommended by your health care provider.

## DEVELOPMENT

- Read books daily and encourage the child to point to objects when named.
- Choose books with interesting pictures, colors, and textures.
- Recite nursery rhymes and sing songs with your child.
- Name objects consistently and describe what you are dong while bathing, eating, dressing, and playing.

- Avoid using “baby talk.”
- Use imaginative play with dolls, blocks, or common household objects.
- Introduce your child to a second language, if used in the household.
- Toilet training
- Children generally are not developmentally ready for toilet training until about 24 months.
- Sleep
- Most children still take 2 naps per day.
- Use consistent nap-time and bed-time routines.
- Encourage children to sleep in their own beds.

## PARENTING TIPS

- Spend some one-on-one time with each child daily.
- Recognize that the child has limited ability to understand consequences at this age. All adults should be consistent about setting limits. Consider time out as a method of discipline.
- **Minimize television time!** Children at this age need active play and social interaction. Any television should be viewed jointly with parents and should be less than one hour per day.

## SAFETY

- Make sure that your home is a safe environment for your child. Keep home water heater set at 120° F (49° C).
- Avoid dangling electrical cords, window blind cords, or phone cords.
- Provide a tobacco-free and drug-free environment for your child.
- Use gates at the top of stairs to help prevent falls. Do not use infant walkers.
- Use fences with self-latching gates around pools.
- The child should always be restrained in an appropriate child safety seat in the middle of the back seat of the vehicle and never in the front seat with air bags. The car seat can face forward when the child weighs more than 20 pounds **and** is older than one year.
- **Equip your home with smoke detectors and change batteries regularly!**
- Keep medications and poisons capped and out of reach. Keep all chemicals and cleaning products out of the reach of your child.
- If firearms are kept in the home, both guns and ammunition should be locked separately.
- Be careful with hot liquids. Make sure that handles on the stove are turned inward rather than out over the edge of the stove to prevent little hands from pulling on them. Knives, heavy objects, and all cleaning supplies should be kept out of reach of children.
- Always provide direct supervision of your child at all times, including bath time.
- Make sure that furniture, bookshelves, and televisions are securely mounted so that they can not fall over on a toddler.
- Assure that windows are always locked so that a toddler can not fall out of the window.
- Make sure that your child always wears sunscreen which protects against UV-A and UV-B and is at least sun protection factor of 15 (SPF-15) or higher when out in the sun to minimize early sun burning. This can lead to more serious skin trouble later in life. Avoid going outdoors during peak sun hours.
- **Know the number for poison control in your area and keep it by the phone or on your refrigerator.**

## WHAT'S NEXT?

Your next visit should be when your child is 15 months old.

Document Released: 01/07/2008 Document Re-Released: 03/16/2010
ExitCare® Patient Information ©2011 ExitCare, LLC.