

Bright Futures Parent Handout 5 and 6 Year Visits

Here are some suggestions from Bright Futures experts that may be of value to your family.

Healthy Teeth

- Help your child brush his teeth twice a day.
 - After breakfast
 - Before bed
- Use a pea-sized amount of toothpaste with
- Help your child floss her teeth once a day.
- · Your child should visit the dentist at least twice a year.

Ready for School

- Take your child to see the school and meet the teacher.
- Read books with your child about starting school.
- Talk to your child about school.
- Make sure your child is in a safe place after school with an adult.
- Talk with your child every day about things he liked, any worries, and if anyone is being mean to him.
- Talk to us about your concerns.

Your Child and Family

- Give your child chores to do and expect them to be done.
- Have family routines.

HEALTH

- Hug and praise your child.
- · Teach your child what is right and what is wrong.
- Help your child to do things for herself.
- Children learn better from discipline than they do from punishment.
- Help your child deal with anger.
 - · Teach your child to walk away when angry or go somewhere else to play.

Staying Healthy

- Eat breakfast.
- Buy fat-free milk and low-fat dairy foods, and encourage 3 servings each day.
- Limit candy, soft drinks, and high-fat foods.
- Offer 5 servings of vegetables and fruits at meals and for snacks every day.
- Limit TV time to 2 hours a day.
- **UTRITION AND** • Do not have a TV in your child's bedroom.
 - · Make sure your child is active for 1 hour or more daily.

Safety

- Your child should always ride in the back seat and use a car safety seat or booster seat.
- Teach your child to swim.
- Watch your child around water.
- Use sunscreen when outside.
- Provide a good-fitting helmet and safety gear for biking, skating, in-line skating, skiing, snowboarding, and horseback riding.
- Have a working smoke alarm on each floor of your house and a fire escape plan.
- Install a carbon monoxide detector in a hallway near every sleeping area.
- Never have a gun in the home. If you must have a gun, store it unloaded and locked with the ammunition locked separately from the gun.
- Ask if there are guns in homes where your child plays. If so, make sure they are stored safely.
- Teach your child how to cross the street safely. Children are not ready to cross the street alone until age 10 or older.
- Teach your child about bus safety.
- Teach your child about how to be safe with other adults.
 - No one should ask for a secret to be kept from parents.
 - No one should ask to see private parts.
 - No adult should ask for help with his private parts.

Poison Help: 1-800-222-1222 Child safety seat inspection: 1-866-SEATCHECK; seatcheck.org

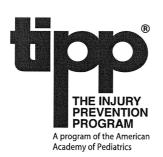
The Perkins Pediatric Clinic, LLC Michael W. Perkins, MD 614 North Pine Street DeRidder, LA 70634

phone: (337) 462-6000 www.perkinspediatrics.com



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6 YEARS

Safety for Your Child

Did you know that injuries are the greatest threat to the life and health of your child? Injuries are the leading cause of death of school-aged children. **Yet you can prevent most major injuries!**

At age 6, your child will become more independent. He or she will be able to do more things that are dangerous. Your child will try to prove that he or she is grown up. But children still aren't good at judging sound, distance, or the speed of a moving car at this age. Your child can learn a few simple things to do for protection, but **you must still be in charge of his or her safety.**

Fire Safety

Make an escape plan in case of fire in your home. Your fire department can tell you how. Teach your child what to do when the smoke alarm rings. Practice what you and your child would do if you had a fire.

Do not smoke in your home. Many home fires are caused by a lit cigarette that has not been put out completely.

Install smoke alarms on every level in your house, especially in furnace and sleeping areas, and test the alarm every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries once a year.



Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. Even if your child is taught never to touch a gun, if there is a gun in the house a child's curiosity can lead to severe injury or death. It is best to keep all guns out of the home. **Handguns are especially dangerous.** If you choose to keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. Ask if the homes where your child visits or is cared for have guns and how they are stored.

Bike Safety

Protect your child from bad head injuries or even death. Make sure your child wears a properly fitted, approved helmet every time she rides a bike. Never let your child ride in the street. Your child is too young to ride in the street safely!

Street Safety

Never let your child play near the street. Your child may dart out into traffic without thinking. The park or playground is the best place to play. Begin to teach your child safe street habits. **Teach your child to stop at the curb,** then look to the left, to the right, and back to the left again. Teach your child never to cross the street without a grown-up.

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And Remember Car Safety

Your child must now use a **booster seat** in the car. Always check to be sure that he or she is correctly restrained in the booster seat before you start the car. Your child should use a booster seat until the lap belt can be worn low and flat on the hips and the shoulder belt can be worn across the shoulder rather than the face or neck (usually at about 4 feet 9 inches tall and between 8 and 12 years old). The safest place for all children, even through school age, is in the back seat of the car. Set a good example.

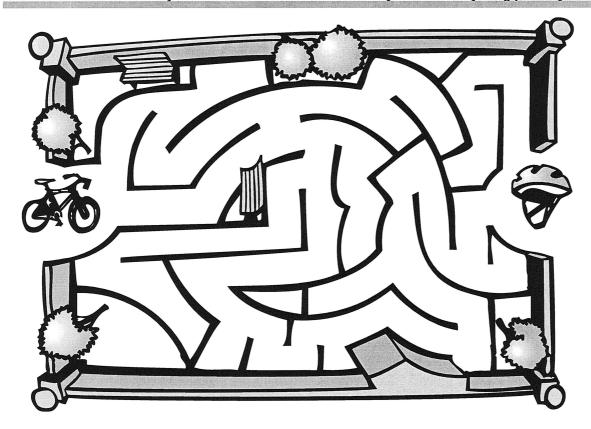
Make sure you and other adults buckle up, too!



SAFETY IN A KID'S WORLD

Dear Parent: Your child is old enough to learn how to prevent injuries. The game below is designed to help your child think about safety. Read the messages with your child and talk about them together. Then take this safety sheet home and post it where everyone can see it.

It takes time to form a safety habit. Remind each other what it says. Make safety a big part of your lives.



Bike Safety

Always wear a



when you ride your



Get the Helmet Habit!

Directions: Find your way through this maze. Connect the helmet with the bicycle.

From Your Doctor

The Perkins Pediatric Clinic, LLC Michael W. Perkins, MD 614 North Pine Street DeRidder, LA 70634 (337) 462-6000 www.perkinspediatrics.com

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Air Bag Safety

An air bag can save your life. However, air bags and young children are a dangerous combination. The following information will help keep you and your children safe:

- The safest place for all infants and children younger than 13 years to ride is in the back seat.
- Never put an infant in the front seat of a car, truck, SUV, or van with a passenger air bag.
- All children should be properly secured in car safety seats, belt-positioning booster seats, or the lap and shoulder belts correct for their size.
 - All infants and toddlers should ride in a rear-facing car safety seat until they are 2 years of age or until they reach the highest weight or height allowed by their car safety seat's manufacturer.
 - All children 2 years or older, or those younger than 2 years who have outgrown the rear-facing weight or height limit for their car safety seat, should use a forward-facing car safety seat with a harness for as long as possible, up to the highest weight or height allowed by their car safety seat's manufacturer.
 - All children whose weight or height is above the forward-facing limit for their car safety seat should use a belt-positioning booster seat until the vehicle seat belt fits properly, typically when they have reached 4 feet
 9 inches in height and are between 8 and 12 years of age.
 - When children are old enough and large enough to use the vehicle seat belt alone, they should always use lap and shoulder seat belts for optimal protection.
- Side air bags improve safety for adults in side impact crashes, but children
 who are not properly restrained and are seated near a side air bag may be
 at risk for serious injury. Check your vehicle owner's manual to see what it
 says about children and side air bags.
- New "advanced" air bags make travel safer for adults, but it is not yet known how they will affect the safety of children. Even though these new air bags may be safer, the back seat is still the safest place for children younger than 13 years to ride.

What Parents Can Do

- Eliminate potential risks of air bags to children by buckling them in the back seat for every ride.
- Plan ahead so that you do not have to drive with more children than can be safely restrained in the back seat.
- For most families, installation of air bag on/off switches is not necessary.
 Air bags that are turned off provide no protection to older children, teens, parents, or other adults riding in the front seat.

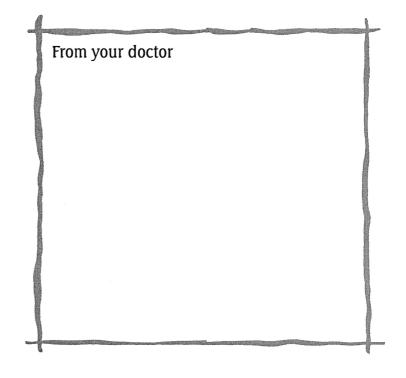




- Air bag on/off switches should only be used if your child has special health
 care needs for which your pediatrician recommends constant observation
 during travel and no other adult is available to ride in the back seat with
 your child.
- If no other arrangement is possible and an older child must ride in the front seat, move the vehicle seat back as far as it can go, away from the air bag.
 Be sure the child is restrained properly for his size. Keep in mind that your child may still be at risk for injuries from the air bag. The back seat is the safest place for children to ride.

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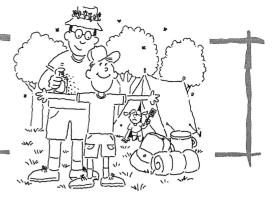
Illustrations courtesy of Automotive Safety Program at Riley Hospital for Children.



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A Parent's Guide to Insect Repellents



Mosquitoes, biting flies, and tick bites can make children miserable. While most children have only mild reactions to insect bites, some children can become very sick. Some insects carry dangerous germs such as West Nile virus, Lyme disease bacteria, and Rocky Mountain spotted fever bacteria.

One way to protect your child from biting insects is to use insect repellents. However, it's important that insect repellents are used safely and correctly.

Read on for more information from the American Academy of Pediatrics (AAP) about types of repellents, DEET, using repellents safely, and other ways to protect your child from insect bites. Also, read about West Nile virus, Lyme disease, and Rocky Mountain spotted fever.

Types of repellents

Insect repellents come in many forms, including aerosols, sprays, liquids, creams, and sticks. Some are made from chemicals and some have natural ingredients. (See "Available Repellents.")

Insect repellents prevent bites from biting insects but not stinging insects. Biting insects include mosquitoes, ticks, fleas, chiggers, and biting flies. Stinging insects include bees, hornets, and wasps.

NOTE: The following types of products are not effective repellents:

- Wristbands soaked in chemical repellents
- Garlic or vitamin B₁ taken by mouth
- Ultrasonic devices that give off sound waves designed to keep insects away
- Bird or bat houses
- Backyard bug zappers (Insects may actually be attracted to your yard.)

About DEET

DEET is a chemical used in insect repellents. The amount of DEET in insect repellents varies from product to product, so it's important to read the label of any product you use. The amount of DEET may range from less than 10% to more than 30%. DEET greater than 30% doesn't offer any additional protection.

Studies show that products with higher amounts of DEET protect people longer. For example, products with amounts around 10% may repel pests for about 2 hours, while products with amounts of about 24% last an average of 5 hours. But studies also show that products with amounts of DEET greater than 30% don't offer any extra protection.

The AAP recommends that repellents should contain *no more than 30% DEET* when used on children. Insect repellents also are not recommended for children younger than 2 months.

Tips for using repellents safely

Dos

- Read the label and follow all directions and precautions.
- Only apply insect repellents on the outside of your child's clothing and on exposed skin. Note: Permethrin-containing products should not be applied to skin.

- Spray repellents in open areas to avoid breathing them in.
- Use just enough repellent to cover your child's clothing and exposed skin.
 Using more doesn't make the repellent more effective. Avoid reapplying unless needed.
- Help apply insect repellent on young children. Supervise older children when using these products.
- Wash your children's skin with soap and water to remove any repellent when they return indoors, and wash their clothing before they wear it again.

Don'ts

- Never apply insect repellent to children younger than 2 months.
- Never spray insect repellent directly onto your child's face. Instead, spray a little on your hands first and then rub it on your child's face. Avoid the eyes and mouth.
- Do not spray insect repellent on cuts, wounds, or irritated skin.
- Do not use products that combine DEET with sunscreen. The DEET may make
 the sun protection factor (SPF) less effective. These products can overexpose
 your child to DEET because the sunscreen needs to be reapplied often.

Reactions to insect repellents

If you suspect that your child is having a reaction, such as a rash, to an insect repellent, stop using the product and wash your child's skin with soap and water. Then call Poison Help at 1-800-222-1222 or your child's doctor for help. If you go to your child's doctor's office, take the repellent container with you.

Other ways to protect your child from insect bites

While you can't prevent *all* insect bites, you can reduce the number your child receives by following these guidelines.

- Tell your child to avoid areas that attract flying insects, such as garbage cans, stagnant pools of water, and flowerbeds or orchards.
- Dress your child in long pants, a lightweight long-sleeved shirt, socks, and closed shoes when you know your child will be exposed to insects. A broadbrimmed hat can help to keep insects away from the face. Mosquito netting may be used over baby carriers or strollers in areas where your baby may be exposed to insects.
- Avoid dressing your child in clothing with bright colors or flowery prints because they seem to attract insects.
- Don't use scented soaps, perfumes, or hair sprays on your child because they
 may attract insects.
- Keep door and window screens in good repair.
- Check your child's skin at the end of the day if you live in an area where ticks are present and your child has been playing outdoors.
- Remember that the most effective repellent for ticks is permethrin. It should not be applied to skin but on your child's clothing.

| Available Repellents | | | |
|---|--|--|---|
| What's available | How well it works | How long it protects | Special precautions |
| Chemical repellents with DEET (N,N-diethyl-3-methylbenzamide) | Considered the best defense against biting insects. | About 2 to 5 hours depending on the concentration of DEET in the product. | Caution should be used when applying DEET to children (see "Tips for using repellents safely"). |
| Picaridin Repellents made from essential oils found in plants such as citronella, cedar, eucalyptus, and soybean | In April 2005 the Centers for Disease Control and Prevention (CDC) recommended other repellents that may work as well as DEET: repellents with picaridin and repellents with oil of lemon eucalyptus or 2% soybean oil. Currently these products have a duration of action that is comparable to that of about 10% DEET. | About 3 to 8 hours depending on the concentration. Usually less than 2 hours. | Although these products are considered safe when used as recommended, long-term follow-up studies are not available. Also, more studies need to be done to see how well they repel ticks. Allergic reactions are rare, but can occur when using repellents made from essential oils. |
| Chemical repellents with permethrin | These repellents kill ticks on contact. | When applied to clothing, it lasts even after several washings. | Should only be applied to clothing, not directly to skin. May be applied to outdoor equipment such as sleeping bags or tents. |

Diseases spread by insects

Diseases spread by insects are a major cause of illness to children and adults worldwide. Following is information about West Nile virus, Lyme disease, and Rocky Mountain spotted fever.

West Nile virus. In the United States, West Nile virus and outbreaks of various types of encephalitis get plenty of media coverage. These illnesses are carried by mosquitoes and transmitted to humans when the insects bite.

Symptoms

- Most cases of West Nile virus are mild, with people showing no symptoms or having a fever, headache, and body aches.
- Less commonly and occurring mostly in older adults, the nervous system
 is affected and symptoms may include a severe headache, high fever, stiff
 neck, confusion, seizures, sensitivity to light, muscle weakness, and loss of
 consciousness.

Lyme disease. In some areas of the United States, Lyme disease is an important health concern. Deer ticks are one of the insects that spread the disease. Deer ticks are tiny, black-brown, biting insects about the size of a poppy seed.

Symptoms

- The first and most obvious symptom of Lyme disease is a rash. It is a red spot surrounded by a light red ring that looks like a target and typically enlarges day by day.
- In addition to the ring-like rash, some children have additional smptoms such as fever, fatigue, headache, aches and pain in muscles or joints, and swollen glands.
- Occasionally, children develop a droop of an eyelid and/or the corner of the mouth (facial nerve palsy) or severe headache, vomiting, and stiff neck (meningitis). Weeks to months later (without antibiotic treatment), some children develop swelling of the knee or other joints (arthritis).

Rocky Mountain spotted fever. Despite the name, Rocky Mountain spotted fever currently occurs mostly in other regions of the United States, including North and South Carolina, Oklahoma, and Tennessee. Ticks spread this bacterial infection.

Symptoms

- Fever
- Severe headache
- Confusion
- Nausea
- Vomitina
- Rash—Most also get a rash that starts as flat red spots that become
 purple over time. It begins on the ankles and wrists and spreads to the
 palms and soles and then to the arms and legs and the trunk.

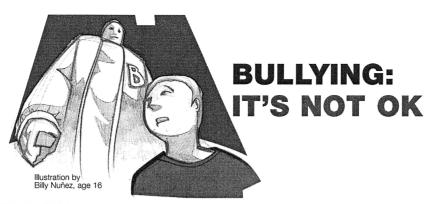
If your child has been bitten by an insect and shows any of the above symptoms of West Nile virus infection, Lyme disease, or Rocky Mountain spotted fever, call your child's doctor.

Remember

Children need and love to be outdoors. The chance of your children becoming infected with *West Nile virus, Lyme disease, or Rocky Mountain spotted fever* is quite low. The best way to protect yourself and your children is to follow the guidelines in this publication for using repellents safely, avoiding areas where there may be a lot of biting insects, and checking yourself and your child for ticks after outdoor activity. If you have any concerns about insect bites, talk with your child's doctor.

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BULLYING AFFECTS ALL CHILDREN

- Victims of bullying can learn how to respond safely to physical, verbal, and social bullying.
- Children who are bullies can change their behavior. When bullies are allowed to continue, it often leads to future problems.
- Bystanders—children who watch the bullies pick on others—can help stop bullying.
- Concerned and involved adults can reduce bullying in schools and neighborhoods.

Bullying is when one child picks on another child again and again. Usually children who are being bullied are either weaker or smaller, are shy, and generally feel helpless.

FACTS ABOUT BULLYING

- Both girls and boys can be bullies.
- Bullies target children who cry, get mad, or easily give in to them.
- There are 3 types of bullying.

Physical—hitting, kicking, pushing, choking, punching

Verbal—threatening, taunting, teasing, hate speech

Social—excluding victims from activities or starting rumors about them

Bullying happens:

At school—in the halls, at lunch, or in the bathroom, when teachers are not there to see what is going on.

When adults are not watching—going to and from school, on the playground, or in the neighborhood.

Through e-mail or instant messaging—rumors are spread or nasty notes are sent.

BULLYING IS DIFFERENT FROM FIGHTING OR TEASING

- A bully has power over another child.
- Bullies try to control other children by scaring them.
- Being picked on over and over can make your child a victim.
- Bullying usually happens when other children are watching.

TALK WITH YOUR CHILD ABOUT BULLYING

Even if you don't think your child is bullied, a bully, or a bystander, you will be helping to protect your child just by asking these questions:

- "How are things going at school?"
- "What do you think of the other kids in your class?"
- "Does anyone get picked on or bullied?"

WHEN YOUR CHILD IS BULLIED

Talk with your child about how to stay safe. Bullies always pick on smaller or weaker children. If there is a fight, and the bully "wins," this will only make matters worse for your child.



Help your child learn how to respond.

"Let's talk about what you can do and say if this happens again."

Teach your child how to:

- Look the bully in the eye.
- Stand tall and stay calm in a difficult situation.
- Walk away.

Teach your child how to say in a firm voice:

- If don't like what you are doing."
- "Please do NOT talk to me like that."
- "Why would you say that?"

Just telling your child to do and say these things is not enough. For many children, these skills do not come naturally. It is like learning a new language—lots of practice is needed. Practice so that, in the heat of the moment, these skills will come to your child naturally.

Teach your child when and how to ask for help.

Your child should not be afraid to ask an adult for help when bullying happens. Since some children are embarrassed about being bullied, parents need to let their children know that being bullied is not their fault.

Encourage your child to make friends with other children.

There are many adult-supervised groups, in and out of school, that your child can join. Invite your child's friends over to your home. Children who are loners are more likely to get picked on.

Support activities that interest your child.

By participating in activities such as team sports, music groups, or social clubs, your child will develop new abilities and social skills. When children feel good about how they relate to others, they are less likely to be picked on.

Alert school officials to the problems and work with them on solutions.

- Since bullying often occurs outside the classroom, talk with the principal, guidance counselor, or playground monitors, as well as your child's teachers. When school officials know about bullying, they can help stop it.
- Write down and report all bullying to your child's school. By knowing when and where the bullying occurs, you and your child can better plan what to do if it happens again.

■ Some children who are bullied will fear going to school, have difficulty paying attention at school, or develop symptoms like headaches or stomach pains.

Make sure an adult who knows about the bullying can watch out for your child's safety and well-being when you cannot be there.

WHEN YOUR CHILD IS THE BULLY

If you know that your child is bullying others, take it very seriously. Now is the time when you can change your child's behavior.

In the long run, bullies continue to have problems. These problems often get worse. If the bullying behavior is allowed to continue, then when these children become adults, they are much less successful in their work and family lives and may even get in trouble with the law.

Set firm and consistent limits on your child's aggressive behavior.

Be sure your child knows that bullying is never OK.

Be a positive role model.

Children need to develop new and constructive strategies for getting what they want. Show children that they can get what they want without teasing, threatening, or hurting someone. All children can learn to treat others with respect.

Use effective, nonphysical discipline, such as loss of privileges.

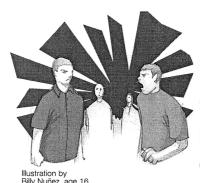
When your child needs discipline, explain why the behavior was wrong and how your child can change it.

Help your child understand how bullying hurts other children.

Give real examples of the good and bad results of your child's actions.

Develop practical solutions with others.

Together with the school principal, teachers, counselors, and parents of the children your child has bullied, find positive ways to stop the bullying.



EVERYBODY GETS MAD: HELPING YOUR CHILD COPE WITH CONFLICT

HELP CHILDREN TO ACT CALM

- Let them know that it takes more courage to walk away from a fight than to stay and fight.
- Teach them that fights don't solve problems—they make new ones.
- Remind them that when they get mad but don't fight, they have really won.

Sometimes, getting along with other kids is hard. Some kids:

- Get into fights when they are angry.
- Get teased a lot.
- Encourage others to fight.

This can make your child feel bad or get in trouble. Teach your child how to deal with anger and stay out of trouble.

EVERYONE GETS MAD

Anger doesn't usually last a long time, but it is a very strong feeling when it happens.

Children get mad when:

- Their feelings are hurt or they can't do what they want.
- Others don't understand them or lie about them.
- They feel left out or others don't act the way they want.

When children are mad, their bodies react:

- Their hearts beat faster and their faces feel hot and sweaty.
- It might be hard to breathe and they can't think clearly.
- They have a lot of energy and want action.

When children are angry, it is:

- Good to put their feelings into words.
- Not good to hit someone, break things, or say things that hurt.

TEACH YOUR CHILD TO ACT CALM

When children get mad, they can ACT: Acknowledge.

- Acknowledge angry feelings.
- Notice changes in their bodies.

Calm down.

- Breathe deeply, count to 10, or walk away.
- Punch a pillow, run, or play music.

Think and talk.

- Think about the problem and ways to fix it. If someone doesn't know what children are trying to say or do, they need to explain themselves.
- Talk with someone about being mad and ways to fix the problem without fighting. If there is nobody to talk to right away, stop and think, "This is why I'm mad and what I need to do is ..."



If someone tries to start a fight, your child can be the one to stay CALM: Calm down.

- Keep a safe distance from the other person.
- Take slow, deep breaths.
- Stay alert and stand tall.

Avoid.

- Avoid name-calling or returning insults. It only makes things worse.
- Avoid other kids who may want to fight. Try to talk in private with the kid who wants to fight.

Listen.

- Calmly listen to what the other kid says.
- Ask, "What does this person really want?"

Move on.

Find ways to solve the problem without fighting.

- Use humor. "I wouldn't want you to catch my cold."
- Give a reason. "We'll both get thrown off the team if we fight."
- Walk away. If nothing else works, it's best to walk away.

Children do what they see others do. You are your child's most important role model.

If your child is still having trouble getting along with other kids, talk with your pediatrician.



Connected Kids are Safe, Strong, and Secure

Graphic design and illustrations by Artists For Humanity,

a non profit arts and entrepreneurship program for Boston teens

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DEDICATED TO THE HEALTH OF ALL CHILDREN™

Supervise your child and help develop individual skills and interests.

Children with too much "time on their hands" are more likely to find themselves in violent or dangerous situations.

Ask for help.

If you find it difficult to change the behavior, reach out to a professional, like a teacher, counselor, or pediatrician.



WHEN YOUR CHILD IS A BYSTANDER

Most children are neither bullied nor bullies they just watch. There are things that your child can do to help stop bullying.

Tell your child not to cheer on or even quietly watch bullying.

This only encourages the bully who is trying to be the center of attention.

Encourage your child to tell a trusted adult about the bullying.

Talking to an adult is not "tattling." Standing up for another child by getting help is an act of courage and safety. To make it easier, suggest taking a friend.

Help your child support other children who may be bullied.

Encourage your child to include these children in activities.

Encourage your child to join with others in telling bullies to stop.

Knowing what to say is important. If your child feels safe, the following statement may help to stop the bully: "Cool it! This isn't going to solve anything."

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DEDICATED TO THE HEALTH OF ALL CHILDREN™



Caring for Your Child's Teeth

Almost 1 in 4 children in America will have a cavity (KA-vuh-dee) before turning 4 years of age! That's why it's very important for parents to know how to care for their children's teeth.

Things You Can Do to Care for Your Child's Teeth

Birth to 1 Year

- After feedings, gently brush your baby's gums and any baby teeth with water and a soft baby toothbrush. Or wipe them with a clean washcloth or gauze.
- After the first tooth comes in, ask your child's doctor if your child is getting enough **fluoride***.
- Your child's doctor will check your baby's mouth at well-child visits. Babies at high risk for decay will be sent to a dentist.

1 Year to 2 Years

- Brush your child's teeth twice a day with water and a soft baby toothbrush. The best times are after breakfast and before bed. Start when your child has any teeth.
- Make sure your child doesn't drink more than a small cup of juice each day. Only drink juice at mealtime, not in between.
- Take your child for a dental checkup if your child has not had one yet.

2 Years to 6 Years

- Brush your child's teeth twice a day. Help your child brush. Or repeat the brushing after your child is done. Children this age need to learn to brush, but they can't really do a good job yet.
- Start using a fluoride toothpaste. Teach your child not to swallow it. Use only a pea-sized amount and smear the paste into the bristles.
 Too much fluoride can make white or brown spots on your child's adult teeth.
- Floss between any teeth that touch each other.
- Take your child for a dental checkup at least once a year.



6 Years and Up

- Have your child brush his or her teeth **twice** a **day** with fluoride toothpaste.
- Teach your child to floss every night after brushing.
- Take your child for a dental checkup at least once a year.

What Else You Can Do

Make sure your child has regular checkups with a dentist. Your child's doctor will also look at your child's teeth and gums during well-child visits and help you find a dentist if the teeth have early tooth decay.

Make sure *you* have healthy teeth and gums.

You can pass germs that cause cavities if you share food or drinks with your child.

Don't share food or drinks with your child. If you do you can pass germs that cause cavities and gum disease. You can also pass germs that cause cavities if you lick your child's spoon or pacifier.

Call the dentist if you are worried about tooth decay and other problems. If you don't have a dentist, call your child's doctor to help you find one. Only a dentist can treat tooth decay.



Words to Know

fluoride (FLOR-eyed)—a natural chemical that helps teeth stay strong and helps prevent tooth decay. It hardens the outer coating on the teeth called enamel. Fluoride also helps repair early damage to teeth.

permanent (PUR-muh-nint)—lasting for a lifetime. Permanent teeth replace baby teeth one by one in your child's mouth. If your child loses a permanent tooth, it *won't* grow back.



What Is a Cavity?

An outer coating called enamel protects teeth. Tooth decay happens when germs in the mouth mix with sugar in foods and drinks. The germs then make acids that break down the enamel. Cavities (KA-vuh-deez) are holes in the enamel caused by tooth decay.

Cavities may look like white or brown spots on the teeth. You might also see white lines on the teeth where they meet the gums.

Tooth decay in your baby's teeth used to be called baby bottle tooth decay, but is now called early childhood caries. Caries (KAIR-eez) is another word for tooth decay.

Eating and Tooth Decay

To help prevent tooth decay in your infant or child:

- Don't put your child to bed with a bottle with anything other than water.
- Don't let your child suck on a bottle or sippy cup with anything other than water except at feeding times.
- Don't let your child eat sweet or sticky foods, like candy, cookies, or fruit roll-ups. There is sugar in foods like crackers and chips too. These are especially bad if your child snacks on them a lot. They should only be eaten at mealtime.
- Don't let your child sip drinks that have sugar and acid, like juices, sports drinks, flavored drinks, soda pop, or flavored teas.

How Does My Child Get Fluoride?

Fluoride can be added to drinking water and toothpaste. Your water department can tell you if your tap water has fluoride. If your water comes from a well, get a fluoride water test. If needed, your dentist or child's doctor will give your child fluoride drops or pills to take every day, or may suggest you buy bottled water with fluoride. Your child may also get fluoride treatments (varnish or gel) at a medical or dental visit.

Do Pacifiers or Thumb and Finger **Sucking Hurt Teeth?**

Sucking a pacifier, thumb, or fingers can affect the shape of the mouth, and how the top and bottom teeth line up. This is called your child's "bite."

It's OK if you give your baby a pacifier, but...

- Wait until your baby is 1 month old if you're breastfeeding.
- Do not dip the pacifier in any sweet liquid.
- Wash and replace the pacifier often.

If your child sucks his or her **thumb or fingers**...

- Your child's bite will most likely be OK if he or she stops sucking by 4 or 5 years of age. That's when the permanent* teeth start coming in.
- Ask your child's dentist or doctor about how to help your child stop his or her sucking habits.

To learn more, visit the American Academy of Pediatrics (AAP) Web site at www.aap.org or visit the American Academy of Pediatric Dentistry Web site at www.aapd.org. Your child's doctor or dentist will tell you to do what's best for your child. This

information should not take the place of talking with your child's doctor or dentist. We hope the resources in this handout are helpful. The AAP is not responsible for the information in these resources. We try to keep the information up to date but it may change at any time.

Adaptation of the AAP information in this handout into plain language

