

2 Years

Glacier Medical Associates

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Normal Activity and Development

2 year olds love rough and tumble play, climbing and running, and alternating quickly between standing, squatting, and sitting. Outside, they can kick balls and throw them, maybe with a bit of help. Parents should play active games with their children to help them develop coordination. Inside, they can look at picture books and can color with crayons on paper. More often now they are able to get what they want by themselves. They usually can successfully undress themselves by now.

They may be interested in other children, but usually play near them rather than with them. In a sandbox, for example, each child probably will play in his/her own corner. Children may play more directly with their brothers and sisters. Ordinarily, little sharing of toys takes place. Although children at this age may be able to combine 2 or 3 words in one sentence, they can't always say what they want. Naturally they become upset because they can't express their needs. Their vocabulary may include 250-300 words and will continue to climb fast.

Children imitate the activities of the parent they spend the most time with. They may show affection quickly. They may make up excuses to delay their bed time to remain with the family. Their memory is good enough to recall what they are looking for or where they put something. They still have a short attention span and are forgetful and easily distracted. Often they seem eager to please.

Diet

Children at this age may continue to have 2-3 cups of milk a day during specific times, like before naps or bed. However in general they should be eating mostly from the family menu which should be a balanced diet. Children this age are often picky eaters and like to feed themselves. Meals should be fun and not a battle zone. Feeding difficulties in the future often result from excessive forced feeding by parents and subsequent anxiety when the child is not

able to meet the parents demand. It may not seem like it, but kids will continue to regulate their own intake in order to provide adequate growth.

Most children by this age no longer need a bottle and can drink all their milk from a cup even before bed time. The bottle can be either gradually withdrawn using fluids which are less well liked or by withdrawing the bottle completely at one point without ever showing it again.

Sleep

Many children this age can get out of their cribs and this may become more of a problem in the months to come. At some point the transition will be made to a small bed, preferably one with a bed rail which will prevent the child from rolling onto the floor. Your child should continue to be sleeping alone without difficulty.

Immunizations

If immunizations have been given on schedule, your baby does not need vaccinations at this visit. If you think your baby is behind schedule, or your baby has had any reactions to past immunizations, please notify your doctor.

CALL YOUR CHILD'S PHYSICIAN IF:

- Your child has a bad reaction to the immunization.
- You have any other concerns about your child.

You can reach a doctor 24 hours a day by calling: **862-2515**

What to expect

In the coming months discipline will continue to be an important issue. Distraction and moving out of the troublesome situation is still the mainstay of discipline at this age, but you can spend more effort explaining things to the child. Decide which issues are important enough to struggle over (like car seats) and which you can simply remove the problem. Don't dwell on misbehavior. Catch them being good, so they don't have to misbehave to get attention.

It's still early at this stage to begin toilet training, but you can begin talking to them about wet and dirty. Most kids will let you know when they are ready. Girls usually are able to control their bowel and bladder function sooner than boys.

Bed time can be a problem at this age. A consistent time and ritual can be very helpful. Getting out of bed at night can be a problem too. It's best to redirect the child to his/her own bed and to be firm with your limits.

Your child will also know many body parts, and he/she will notice the difference between boys and girls. Parents should use correct names for genitals to avoid funny or dirty connotations. You should answer questions correctly and honestly in terms that your child can understand.

Safety tips

- Car seat – Always use it!
- Poison control – Post the phone number by the telephone : 1-800-732-6985
- IPECAC – Have this on hand for accidental poisonings. First call poison control. Be sure all poisons, cleaning products, and medicines are unreachable by infants and children. Use drawer locks.
- Baby proof – Protect your baby from stairs, cabinets, sharp corners on furniture, things they can pull down or over on themselves.
- Baths – Never leave your baby alone.
- Safe toys – no sharp edges or small pieces that come off (like doll's eyes!).
- Water heater – Turn it down to 120F.
- Electrical outlet covers – Install them.
- Choking – You should watch out for several common things which cause accidental choking; hot dogs, nuts, popcorn, candy, buttons, coins, plastic bags, and balloons. Beware of what is lying on the floor or what siblings will give them.
- Streets - Be sure to teach your child to look carefully before crossing and to always hold onto an adult's hand.
- Cigarette smoke – Your child is 4 times more likely to develop colds or ear infections when exposed to cigarette smoke. Keep smokers away from your child and be sure no one smokes in the child's room.

Medications

- Fluoride – 0.25 mg per day
- Tylenol (acetaminophen) – 160 mg
 - 2 droppers of infant drops
 - 1 tsp of elixir
 - 2 chewable tablets

Suggested books

Your Child's Health; Dr. Barton D. Schmitt, Baby Owner's Manual; Dr. E. Christopherson, Infants and Mothers; T. Berry Brazelton, Your Baby and Child: Birth to Age five; P. Leach