

PEDIATRIC ASSOCIATES OF SPRINGFIELD, INC

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SIX TO EIGHT-YEAR CHECK-UPS

DIET: Busy schedules can make finding time when parents and children can share a meal challenging. Setting a goal of three meals together a week may be a great place to start. Research shows that family mealtime is linked with children who have fewer weight concerns, make better food choices, are more successful in school, have better mental health and interact more positively with their families.

Other important nutrition tips include starting the day with breakfast; choosing five plus servings of fruits or vegetables every day; limiting unhealthy snacks (such as candy, soda or chips); and getting three servings of low fat milk or other dairy foods a day. Limit juice intake to four to six ounces daily of 100% no-sugar-added juice. Help your child understand that eating healthy foods will improved his school and sports performance. Websites with more about healthy eating are listed on our website. Encourage your child to be physically active at least 60 minutes most days of the week, if not all days. Limit leisure screen time to 2 hours a day. This includes TV watching, video games, and computer activity (other than homework). Televisions or computers in the bedroom are associated with higher obesity risk.

Children should have an established dental home including regular visits to the dentist at least twice yearly. In our area, fluoride supplementation is necessary if your home has well water or city water that is not supplemented. Some schools offer a fluoride program or we can prescribe a daily tablet for your child. Brushing the teeth twice daily with a pea sized amount of fluoridated toothpaste and flossing once daily with parental help is recommended. If your child is playing sports, a mouth guard is a good idea to protect their teeth.

Remember, when you choose a healthy diet and daily physical activity for yourself, this increases the chance that your child will as well.

DEVELOPMENT: Starting school is a major milestone for a child and his family. A child's progress in school has a significant impact on a child's self-esteem and confidence. Not every child is instantly successful and adjustment difficulties or stressors need be addressed. Good communication with your child's teacher is essential. A child will perform best if there is consistency between expectations of the school and the family regarding educational performance and behavior at school.

Attention and learning issues are often unnoticed until school entry. If you have concerns about your child's mood or behavior, please call to schedule a consult with us.

If your child is not doing well in school, ask the teacher about evaluation for special help or tutoring. Encourage your child to do their best and ask for help when they need it. Bullying is important to identify early. If your child seems anxious about going to school, talk with them in a relaxed setting with open-ended questions. Getting the entire picture of what is happening such as when and where is essential. Contact your child's teacher and principal to seek assistance in dealing with the bullying. Your child should be encouraged to tell the bully to stop in a firm voice and walk away and needs to be sure to communicate what is going on with a trusted adult.

Self-esteem is a key feature of a fulfilling life and influences mental health. As a parent, words of encouragement are vital to your child's sense of self. Giving hugs, participating in activities together, and being available to chat help make a child feel secure. Parents can encourage their child to be responsible by modeling responsibility by keeping promises, showing up on time and completing tasks on time.

At this age, more time is spent with friends and others outside the home and parents should meet these new friends and their families. Rules may vary among families and you may notice your child beginning to test your rules. Consider these "teachable moments", such as when your child tries out a bad word he heard another child use at school. While some rules may be loosened, it is important to maintain others to help promote appropriate behavior, provide emotional support and safety and promote morals. Be a positive role model for your child through your own activities, values and attitude.

It is important to continue family routines. Now is a good time for assigning household chores, such as making the bed every morning. Showing your child affection and respect is important as well as modeling anger management and self-discipline. Communication is important with your child and the ideal way to solve conflict. Encourage your child's competence and independence in all areas by not doing everything for your child, but by supporting them to do things well independently.

Once your child reaches the age of seven or eight they are growing into a stage where she becomes more interactive and involved with friends. As thought process improves and communication skills increase your child is moving toward becoming more independent and self-sufficient. Your child will continue to see

new ideas, beliefs, and activities outside of the home. Moral development progresses as your child compares your family's beliefs to the beliefs and practices of outside influences. These influences may present a challenge to the family. The peer group becomes increasingly important and establishing a strong friendship is an important milestone.

Eight year olds are able to use more advanced logic and focus. They begin to have more questions about how things work and about the world around them. Again, they see that other people may have different viewpoints than their own.

PUBERTY: Your child might start to ask questions about puberty. Answer questions simply and honestly at a level appropriate to your child's understanding. Letting your child know that many changes happen to our bodies during puberty, and some of those changes can be surprising or hard to figure out. Children need to know that it is okay to talk about how their body changing and they don't need to be embarrassed.

SLEEP: Sleep is linked to your child's health as well as their success. Children need a regular time to go to sleep. Nighttime rituals can help your child to sleep. These rituals can include storytelling, reading aloud, conversation, and songs. Try to avoid exciting play and activities before bedtime. Your child needs at least 10 hours of sleep at night.

ILLNESS:

Abdominal pain: Constipation is a common cause of abdominal pain in older children, especially in the lower part of the abdomen. It is important to realize that it is not how often your child has a bowel movement that tells you if they are constipated, but other symptoms such as large, hard, and dry stools; painful to pass stools; episodes of pain relieved by having a bowel movement; blood in or on outside of the stool; and or soiling the underwear between bowel movements. When a child's diet lacks plenty of fluids, fresh fruits and vegetables, and fiber-rich whole grains, bowel problems are more likely to occur. High fiber foods include most fruits with edible peel, high fiber vegetables (peas, beans, broccoli), and whole-grain cereals and bread products. Increasing daily water intake will also help. Other causes of constipation may include your child not wanting to take the time to go to restroom due to a busy schedule or not wanting to go in an unfamiliar place such as at school. Help your child set up a daily toilet routine and also making sure they get daily physical activity will help prevent constipation. If your child is having trouble with constipation, please call the office with any questions.

Emotional upset can also be a cause of abdominal pain. Abdominal pain that has no other associated findings or complaints such as fever, vomiting, bowel changes,

coughing, lethargy or weakness, urinary tract symptoms, sore throat, flulike symptoms or disrupted sleep is more likely due to expression of stress. Find out if something is troubling your child at school or at home and communicate with them. Ensuring they know they have your love and support is important for them in a stressful time.

Appendicitis is more common after the age of five. The first sign is often a complaint of constant stomachache in the center of the abdomen and later the pain moves down and over to the right side. After several hours of pain, vomiting, low grade fever and loss of appetite may occur. If your child has abdominal pain that is worsening, please call us.

Strep throat is a throat infection caused by bacteria called streptococci. The symptoms and signs include a sore throat, fever, and abdominal pain. There may be some vomiting, rash and headache as well. If your child has symptoms as mentioned, they should have their throat swabbed to check for strep bacteria and if positive, treated with an antibiotic. Hoarseness, cough and runny nose even with sore throat are usually indicative of a viral illness.

The **common cold** can be caused by several different respiratory viruses and is often a reason people seek medical care. A sore throat is often the first symptom. The child may also have a runny or congested nose; the nasal discharge may be clear, cloudy, yellow or green; often is associated with fever; sometimes associated with a cough, hoarse voice, watery eyes, and or swollen lymph nodes in the neck. Fever may last up to three days, sore throat may last up to five days, nasal congestion may last up to two weeks, and cough may last up to three or more weeks. A viral cold may sometimes lead to a secondary bacterial infection that would require antibiotics. Nasal saline (non-medicated) sprays every 2 hours while awake are safe and very effective at preventing this complication as well as making your child feel better. If your child develops any of the following symptoms after or during their cold like symptoms you should bring them in for an evaluation: earache or ear discharge; sinus pain not relieved by nasal spray; difficulty breathing or rapid breathing; fever present over three days; fever that goes away for over 24 hours and then returns; sore throat that is present over five days; nasal congestion that is present for over 2 weeks; and or cough that is present over three weeks.

Children get **allergies** from coming into contact with allergens through either inhalation, ingestion, injection (stings/medicine), or skin contact. Some common allergens include pollens from trees, grasses, and weeds; indoor and outdoor molds; dust mites that live in bedding, carpeting, and other items that hold moisture; animal dander from furred animals; some foods and medications; venom

from insect stings. Allergies run in families. If a parent has an allergy then there is a higher chance that their child will also. If both parents have allergies, the risk is higher. Identifying and avoiding the things your child is allergic to is the best way to help them. Keeping the windows closed during pollen season may help, especially dry, windy days when pollen counts are the highest. Keep the house clean and dry to reduce mold and dust mites. Avoid indoor plants. Prevent anyone from smoking anywhere near your child, especially in your home or car.

Symptoms of allergies can include: red, teary, or itchy eyes; puffiness around the eyes; sneezing; runny nose; itchy nose, nose rubbing; post nasal drip; nasal swelling and congestion; itching of ear canals; itching of the mouth and throat; cough or sore throat. Your child may benefit from taking an oral antihistamine such as Claritin or Zyrtec. Also, it may benefit your child to use nasal saline spray for nasal congestion or saline rinses via Neti pot if they tolerate it. If you find you are having difficulty managing your child's allergy symptoms please notify the office.

Your child should learn how to **swallow pills** at this age. You can use candy to let them practice such as the very small decorative cake candy balls, tic tacs, or mini M&M's. If desired, you may begin with the smallest piece of candy, gradually moving up to the larger piece of candy that is safe to swallow whole. Have them place it on the middle of their tongue and then drink a cup of water. Give them praise for success. "Mini" sized medicines such as Advil Aquagel or Zyrtec are about the same size as mini M&M's so they make a good transition step. Ibuprofen doses may be found on the Dosage Chart included at your check-up visit and on this website.

SAFETY: Certain hazards, such as matches, lighters, gas stoves, and fireplaces, often fascinate children. Therefore, it is important to keep matches and lighters out of reach, and remind them that these are not toys.

Parents are encouraged to keep home and vehicles **smoke free**. Exposure to secondhand smoke increases risk of heart and lung disease in your child. Teach your child not to try cigarettes because they are bad for their lungs, heart, skin and teeth.

Most children ride a **bicycle** at this age or may be riding a scooter, skateboard, or have in line skates. Your child should always wear an approved helmet and protective equipment when riding, skateboarding, in line skating, or playing in organized sports.

Swimming is also popular at this age and rules regarding safety should be frequently reviewed. Teach your child to swim, but never let them swim alone.

NEVER let your child swim in any fast moving water. Teach them never to dive into water unless you have checked the depth of the water. When on a boat, be sure your child is wearing an appropriately fitting, US Coast Guard-approved life jacket. Use sunscreen (SPF 30) on your child before going outside to play or swim. Check the expiration date, apply 15 minutes before going out into sun, and reapply every 2 hours.

Encourage your child not to play around cars, cross the street with an adult and look both ways before crossing the street.

Your child should still be in an approved car seat or **booster seat** according to manufacturer instructions. Questions about proper installation should be referred to a Certified Child Passenger Safety technician in the community including the Coxhealth Safety Office listed on this website. Use a belt positioning booster seat with the lap and shoulder safety belt until the lap/shoulder belt fits, which means the lap belt can be worn low and flat on the upper thighs and the shoulder belt can be worn across the shoulder rather than the face or neck and the child can bend at the knees while sitting against the vehicle seat back. This usually happens when your child is between the ages of 8 to 12 and about 4'9" tall. The back seat is the safest place for children younger than 13 to ride.

Child Safety Seat Inspection Station Locator: www.seatcheck.org

Toll-free Number: 866-SEATCHECK

It is important to know your child's friends and families. Children need rules for interacting with and avoiding strangers. Also, it is a good idea to give instructions on telephone numbers to call for help in case of **emergencies**. Talk with your child about a plan for help in an emergency if you are not present, such as feeling unsafe at a friend's house. Make sure there is a backup plan if you are not home when she gets there after school such as knowing emergency phone numbers and knowing what to do if there is a fire. Knowing how to dial 911 is imperative. Teach your child safety rules at home should be followed outside of the home. Your child should have a supervised safe environment before and after school. As your child matures, anticipate providing less direct supervision.

Sexual abuse is a sensitive topic and make sure your child understands it is never okay for an adult to tell a child to keep secrets from parents, to express interest in private parts, or to ask a child for help with his or her private parts. Explain to your child to get away from that person as quickly as possible and tell your parent or another trusted adult right away.

Internet safety is crucial. Younger children should only be online when supervised, and with increasing maturity, limited browsing can be permitted. Your family computer should be in a place where you can easily observe your child's use. Check the Internet history regularly to be sure you approve of your child's Internet choices. Teach your children to never give personal information on a Web site, never to chat online unless their parents know, and that no one should make them feel scared online. Information about safe Internet use and the AAP-Microsoft Family Safety Settings can be found at www.aap.org.

If keeping firearms in your home is necessary, store unloaded and locked with ammunition locked away in a different location. Children simply do not understand how dangerous guns can be, despite your warnings.

IMMUNIZATIONS: At this age your child should be up to date on their vaccinations. Making sure your child's immunizations are up to date is critical to their health. If you are unsure of their vaccination status, please call the office. If your child has had vaccines elsewhere, please fax or bring these records to the office so they may be recorded appropriately. Make sure that your child gets their flu vaccine every fall. If you have any questions regarding vaccines, please visit www.cdc.gov/vaccines/ and other links listed on this website.

OFFICE CALLS: When calling for advice, please have your questions organized with a pencil and paper handy. If the child is ill, please take his temperature before calling (no need to add a degree). Routine calls should be made during regular weekday office hours. Emergency calls may be placed through the office number when we are not in the office. When your child starts school, please consider if you want to add the school nurse (or later, the team trainer) to your Shared Information Form found on this website so that we may talk with them about your child's healthcare. Ask your school nurse at registration, well before school starts, if she needs any instructions from us regarding your child's health needs while at school (eg, asthma, food allergy, ADD).

APPOINTMENTS: Preventive care visits (well child check-ups) are an essential part of your child's health. These are an opportunity to discuss changes and concerns about diet, sleep, developing skills, safety, and immunization issues. After age 5, visits are scheduled every year. Sports and camp physicals, such as Mighty Mites and Scouts, may be combined with well child check-ups with a little planning. Please see the Appointments page of this website for details on scheduling well and sick visits.

IMPORTANT PHONE NUMBERS:

Office (417) 882-1600

After hours (877) 599-8962

Fax (417) 631-0119

Poison Control Center (800) 392-9111