

PEDIATRIC ASSOCIATES OF ORLANDO, P.A.

SIX-MONTH CHECK UP

DATE _____

WEIGHT _____ % HEIGHT _____ % HEAD CIRC _____ %

WELL VISIT IMMUNIZATION SCHEDULE

2 Month	4 Month	6 Month	9 Month	12 Month	15 Month	18 – 24 Months	5 Year	11+ Years
DTaP	DTaP	DTaP			DTaP	Vaccine Review	DTaP	Tdap (tetanus)
IPV	IPV		IPV				IPV	
Prevnar	Prevnar	Prevnar			Prevnar			
Comvax (Hepatitis B & Hib)	Hib	Hib			Hib			Gardasil (for girls)
		Hepatitis B		Hepatitis B	MMR		MMR	Menactra
RotaTeq (oral)	RotaTeq (oral)	RotaTeq (oral)		Chickenpox (Varivax)			Chickenpox (Varivax)	
				Hepatitis A		Hepatitis A		
		Flu (Seasonal)						Catch Up Vaccines

** Please verify your vaccinations with your physician at the time of your visit **

These preventative immunizations can cause your baby to have a fever >100.4, decreased appetite, act fussy or change in normal sleep pattern. The injection site may be red or slightly swollen, or form a knot. If this occurs gently put a cool cloth over the injection site. Please see accompanying vaccine information sheets. Give your baby Infant's Acetaminophen Suspension (80 mg/0.8 ml) or Children's Motrin (50 mg/1.25 ml) the following dosage:

Weight	Dose
6-11 lbs	½ dropperful
12-17 lbs	1 dropperful
18-24 lbs	1 ½ dropperful

You may repeat this dose every four hours for Tylenol, and every 6-8 hours for Motrin for fever/fussiness. Notify your physician if your baby has any adverse side effects such as fever greater than 104 rectal, seizure activity, or hives.

NUTRITION

Continue to introduce one new solid at a time. Do not start smoked meats, bologna, hot dogs and bacon, which are high in fat, cholesterol as well as nitrates. Avoid fish until your child is at least twelve months old since they may be more prone to allergies before this time. When new foods are introduced, such as meats, peas or carrots, they can be seen right away as colored food particles in the stool. Many foods are not completely digested in the beginning, and this is normal. A typical feeding schedule may include: four 8oz formula or breast milk feedings, and meals of solids (one fruit, vegetable, and meat per day), as well as one 4 oz bottle of juice. Your baby is easily distracted and suddenly aware of new sights and sounds and will interfere with smooth feedings. Take this opportunity to play, communicate, and allow your baby to explore. Your baby may be more interested in smearing or playing with food, tapping a spoon in between bites. You may notice your baby pull the breast around, or bottle when distracted by new stimuli. This doesn't mean your child is disinterested in nursing or formula, only he or she has new competing interests. Allow your baby to look around and explore, and offer a toy to handle while nursing or bottle-feeding. Babies often prefer solids at this developmental stage, because the situation for feeding is more complex and they can be actively involved while being fed. Do not give your baby foods that can cause choking, such as peanuts, popcorn, hot dogs, carrots, or celery sticks, whole grapes, raisins, whole beans, hard candy, tough meat, or large pieces of food.

ANTICIPATORY GUIDANCE

Schedule next check up for nine months of age. Your child will again receive a complete physical exam, the third set of IPV immunization if not already given, and a blood test to rule out anemia. Screening for anemia is important since many infants are asymptomatic, and the only way to uncover their problem is with a blood test to determine the proportion of hemoglobin in the blood. Hemoglobin is the protein in red blood cells that performs the important function of distributing oxygen to cells for growth. Iron is the essential building block of hemoglobin and the most common cause of anemia. To help prevent iron deficiency anemia, be sure your baby is on iron-fortified cereal and formula fortified with iron. Do not buy low iron formula.

SAFETY

- A. Buy Syrup of Ipecac, and be sure to childproof your home with safety latches, and electrical outlet covers. Place all medicines and chemicals safely out of reach. Keep small and sharp objects, plastic bags, hot liquids, poisons, and cords out of reach.
- B. Do not leave your baby unattended on any surface above the floor. Never leave infant unattended in bathtub. Take your infant with you if you must answer the phone or door.
- C. Always be sure high chair trays are safely snapped into place. Be sure to secure the safety restraining straps, and fasten the groin strap to prevent him or her from slopping out of the bottom of the chair.
- D. Stop smoking if you still smoke, and never allow anyone to smoke around your baby, or hold your baby while smoking. Keep your home, daycare, and car smoke free.
- E. Do not put your baby in a walker at any age.
- F. Use sunscreen with SPF 15 or greater, sunglasses, loose fitting cotton clothing, and hat while outside.

DEVELOPMENT

Look for your baby to:

- Pull to sit, and sit in a “frog” position. Bear weight on legs when held upright.
- Object if you try to take a toy away, and be able to self feed with a cracker.
- Begin having stranger anxiety and cry when you leave the room. Start teething/drooling.

Provide opportunities for safe exploration and play games, read and talk to your baby.

TEETHING

You may begin to wipe the teeth with a washcloth, finger brush, or small toothbrush once the teeth erupt. You may use Oragel toothpaste (no fluoride added) or a small pea size amount on the brush. If you use fluorinated toothpaste do not supplement with fluoride drops as this may discolor the teeth with white specks from too much fluoride. Do supplement with fluoride drops if you are exclusively breastfeeding or use un-fluorinated water to make bottles.

SLEEP

Continue to establish a consistent daily bedtime routine. Sleep is a highly organized process that is influenced by the care-taking environment. Putting an infant to bed alone and helping your baby sleep through the night are important tasks. Teach your infant to fall asleep unaided without rocking, holding, or feeding. Place your infant in the crib AWAKE after establishing a daily bedtime ritual...feeding, bath, books, prayers, talking, or singing. What your bedtime routine entails is less important than the fact that you are consistent.

WHEN TO CALL YOUR PEDIATRICIAN

Axillary temperature greater than 101 degrees (unless your child received immunizations within the last 2 days and is acting ok otherwise), projectile vomiting, green (bilious) vomiting, seizure, excessive irritability, or lethargy. Our telephone nurse is available during office hours for common pediatric questions, after hours triage nurses are available for questions that cannot wait until morning. Life threatening emergencies, such as difficulty breathing, seizure, and bleeding, should be directed to the emergency room or 911.

Resources: www.aap.org, www.brightfutures.org