

PINK PAPER

The Carithers Pediatric Group

4 year old visit

2121 Park Street • 904-387-6200

10475 Centurion Parkway N. Suite 301 • 904-997-0023

Name: _____ Date: _____ Weight: _____ Height: _____

Diet
Children at this age should be served 3 regular meals and 2 nutritious snacks per day. High-fat and low-nutrient foods and beverages such as candy, chips, and soft drinks should be limited. Your child should be offered nutritious foods and allowed to decide what and how much he/she wants to eat. Make mealtimes pleasant and encourage conversation. Remember to be good role models and allow your child to see his/her parents eating nutritious food as well.

Teeth
Your child should brush their teeth 2x/d but please regularly supervise them. Your child should be taken to a dentist every 6 months.

Developmental Suggestions
Some skills to encourage between age 4 and 5 include letter recognition, phonics (or the sounds that the letters make), drawing stick figures with arms and legs, counting to 20, dressing self, buttoning, improved cutting with scissors and pedaling a bicycle with training wheels.

Safety
Start to teach your child his/her full name, parents' full names, phone number and address. Teach your child about strangers, and let him/her begin to understand the concept of "good touch/bad touch" (Bad touches are anywhere a bathing suit covers). Educate them about which persons would be appropriate to ask for help from if they are lost. Teach them never to get into a stranger's car.
Consider swimming lessons. However, even if your child knows how to swim, an adult should supervise all children whenever they are in and around water. Always put sunscreen on your child before he/she goes out to play or swim. Install a pool fence and alarm.
Ensure that guns are locked up and ammunition is stored separately. A trigger lock is an additional important precaution.
Continue to use a car seat or properly secured booster until your child has outgrown the booster and an adult belt fits correctly. This is when your child is between 8-12 years old and at least 56 inches.
All children should wear a bicycle helmet when riding a tricycle, bicycle or using rollerblades or scooters.
Limit TV watching to an average of 1 hour per day of appropriate programs. Watch the programs together and discuss them. **Poison Control Center: 1-800-222-1222.**

Immunizations
Today your child will receive the following vaccine(s). You may give Children's Tylenol® for any discomfort related to the vaccine.

DTaP (tetanus) MMR (measles) Polio Varivax (chicken pox)

We recommend yearly flu vaccines with the injectible flu vaccine or intranasal flu vaccine. If your child did not receive one today because we are not in the flu season, call us around late September/early October to check on our supply of the vaccine. If we have the vaccine available, please come in to be immunized.

****Next Visit** Please schedule your next well visit in one year.

POLIO VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is polio?

Polio is a disease caused by a virus. It enters a child's (or adult's) body through the mouth. Sometimes it does not cause serious illness. But sometimes it causes *paralysis* (can't move arm or leg). It can kill people who get it, usually by paralyzing the muscles that help them breathe.

Polio used to be very common in the United States. It paralyzed and killed thousands of people a year before we had a vaccine for it.

2 Why get vaccinated?

Inactivated Polio Vaccine (IPV) can prevent polio.

History: A 1916 polio epidemic in the United States killed 6,000 people and paralyzed 27,000 more. In the early 1950's there were more than 20,000 cases of polio each year. **Polio vaccination was begun in 1955.** By 1960 the number of cases had dropped to about 3,000, and by 1979 there were only about 10. The success of polio vaccination in the U.S. and other countries sparked a world-wide effort to eliminate polio.

Today: No wild polio has been reported in the United States for over 20 years. But the disease is still common in some parts of the world. It would only take one case of polio from another country to bring the disease back if we were not protected by vaccine. If the effort to eliminate the disease from the world is successful, some day we won't need polio vaccine. Until then, we need to keep getting our children vaccinated.

Oral Polio Vaccine: No longer recommended

There are two kinds of polio vaccine: **IPV**, which is the shot recommended in the United States today, and a live, oral polio vaccine (**OPV**), which is drops that are swallowed.

Until recently OPV was recommended for most children in the United States. OPV helped us rid the country of polio, and it is still used in many parts of the world.

Both vaccines give immunity to polio, but OPV is better at keeping the disease from spreading to other people. However, for a few people (about one in 2.4 million), OPV actually causes polio. Since the risk of getting polio in the United States is now extremely low, experts believe that using oral polio vaccine is no longer worth the slight risk, except in limited circumstances which your doctor can describe. The polio shot (IPV) does not cause polio. **If you or your child will be getting OPV, ask for a copy of the OPV supplemental Vaccine Information Statement.**

3 Who should get polio vaccine and when?

IPV is a shot, given in the leg or arm, depending on age. Polio vaccine may be given at the same time as other vaccines.

Children

Most people should get polio vaccine when they are children. Children get 4 doses of IPV, at these ages:

- ✓ A dose at 2 months
- ✓ A dose at 4 months
- ✓ A dose at 6-18 months
- ✓ A booster dose at 4-6 years

Adults

Most adults do not need polio vaccine because they were already vaccinated as children. But three groups of adults are at higher risk and *should* consider polio vaccination:

- (1) people traveling to areas of the world where polio is common,
- (2) laboratory workers who might handle polio virus, and
- (3) health care workers treating patients who could have polio.

Adults in these three groups who **have never been vaccinated against polio** should get 3 doses of IPV:

- ✓ The first dose at any time,
- ✓ The second dose 1 to 2 months later,
- ✓ The third dose 6 to 12 months after the second.

Adults in these three groups who **have had 1 or 2 doses** of polio vaccine in the past should get the remaining 1 or 2 doses. It doesn't matter how long it has been since the earlier dose(s).

Adults in these three groups who **have had 3 or more doses** of polio vaccine (either IPV or OPV) in the past may get a booster dose of IPV.

Ask your health care provider for more information.

4

Some people should not get IPV or should wait.

These people should not get IPV:

- Anyone who has ever had a life-threatening allergic reaction to the antibiotics **neomycin**, **streptomycin** or **polymyxin B** should not get the polio shot.
- Anyone who has a severe allergic reaction to a polio shot should not get another one.

These people should wait:

- Anyone who is moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting polio vaccine. People with minor illnesses, such as a cold, *may* be vaccinated.

Ask your health care provider for more information.

5

What are the risks from IPV?

Some people who get IPV get a sore spot where the shot was given. The vaccine used today has never been known to cause any serious problems, and most people don't have any problems at all with it.

However, a vaccine, like any medicine, could cause serious problems, such as a severe allergic reaction. *The risk of a polio shot causing serious harm, or death, is extremely small.*

6

What if there is a serious reaction?

What should I look for?

Look for any unusual condition, such as a serious allergic reaction, high fever, or unusual behavior.

If a serious allergic reaction occurred, it would happen within a few minutes to a few hours after the shot. Signs of a serious allergic reaction can include difficulty breathing, weakness, hoarseness or wheezing, a fast heart beat, hives, dizziness, paleness, or swelling of the throat

What should I do?

- **Call** a doctor, or get the person to a doctor right away.

- **Tell** your doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS website at www.vaers.hhs.gov or by calling 1-800-822-7967.

VAERS does not provide medical advice.

Reporting reactions helps experts learn about possible problems with vaccines.

7

The National Vaccine Injury Compensation Program

In the rare event that you or your child has a serious reaction to a vaccine, there is a federal program that can help pay for the care of those who have been harmed.

For details about the National Vaccine Injury Compensation Program, call **1-800-338-2382** or visit the program's website at www.hrsa.gov/vaccinecompensation

8

How can I learn more?

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department's immunization program.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)**
 - Visit the National Immunization Program's website at <http://www.cdc.gov/vaccines>



U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Disease Control and Prevention