

Ireland Pediatric Care Clinic 4 – 5 Year Old Well Baby/Child Visit

Today your child is being seen for his/her well child visit. We thank you for using Ireland Pediatric Care. Our providers are dedicated to the health and well-being of you and your children. Today your child will be seen by:

_____.

Today, your child is _____ lbs _____ oz (_____ kg)
_____ inches tall (_____ cm), and has a head size of
_____ inches (_____ cm)

Your child's next immunizations today: Varicella; Polio; Diphtheria, Tetanus & Pertussis (Dtap); Measles, Mumps and Rubella (MMR).

The following phone numbers may also be useful to you:

TRICARE Office: (Healthnet)	1-877-874-2273
TRICARE Appointments: (IACH)	1-800-493-9602
Ireland Emergency Department	502-624-9000
Pediatric Nurses Line	502-624-9267
	(answered between hours M-F 0800-1600)
Poison Control	1-800-222-1222

Thank you again for using Ireland Primary Care. We look forward to seeing your child back at his/her next well child visit.

REACH OUT AND READ (ROR) is a national, nonprofit organization endorsed by the American Academy of Pediatrics. It was started in 1989 through a group of pediatricians and early childhood educators. The program encourages early literacy skills so children enter school prepared for success in reading. A developmentally suitable book will be given to your child between the ages of 6 months to 5 years at each well visit to take home and keep.

MAKE SURE YOUR CHILD RECEIVES HIS OR HERS TODAY!



Ireland Army Community Hospital Immunization Schedule



Birth:

Hepatitis B

2 Months:

Pneumococcal (Pevnar)
ActHib (Hib)
Pediarix (Dtap, Hep B & IPV)
Rotavirus*

4 Months:

Pneumococcal (Pevnar)
Pedvax (Hib)
Pediarix (Dtap, Hep B, & IPV)
Rotavirus*

6 Months:

Pneumococcal (Pevnar)
Pediarix (Dtap, Hep B, & IPV)
Rotavirus*
ActHib

12 Months:

Measles, Mumps, & Rubella
Varicella**
Pedvax (Hib)
Hepatitis A***

18 Months:

Diphtheria, Tetanus, & Pertussis
Pevnar, if available
Hepatitis A #2

4-6 Years:

Varicella #2**
Polio
Diphtheria, Tetanus, & Pertussis
Measles, Mumps, & Rubella

11-12 Years:

Tetanus & Diphtheria
Menactra****

11-16 Years:****

Hepatitis B
Measles, Mumps, & Rubella
Varicella
Tetanus & Diphtheria

11-26 Years:

HPV (Females only)

PPD Given only if positive answers to questionnaire or if no PPD given by age 4

Rotavirus only given at age 2, 4, and 6 months according to CDC guidelines after 2 months vaccine can't be given

** Varicella required for children 12 months to 7 years unless history of chicken pox. A second dose of Varicella is now recommended at age 4

***Hepatitis A is required for all DOD schools and daycare starting at age 12 months. This vaccine is not required for off post schools but is optional

****Menactra is required for all DOD schools at age 11. This vaccine is not required for off post schools but is optional

*****These vaccines will be given at this age only if they were not given at an earlier age

After the Shots ...

What to do if your child has discomfort



*Vaccinations may hurt a little . . .
but disease can hurt a lot!*

Check your child's temperature with a rectal thermometer if he/she is younger than 3 years of age to find out if they have a fever.

If your child is 4 or 5 years of age, you may prefer taking a temperature by mouth with an oral digital thermometer. You can also take an underarm (axillary) temperature, if your child is older than 3 months.

- If your child's temperature is greater than 104°F _____ or if temperature is 101.4 or higher that last more than 72 hours; call your clinic or healthcare provider!

Acetaminophen Dosing Information (Tylenol® or another brand)

Give every 4-6 hours, as needed, no more than 5 times in 24 hours (unless directed to do otherwise by your health care provider).

Acetaminophen Dosing Information (Tylenol® or another brand)

Give every 4-6 hours, as needed, no more than 5 times in 24 hours (unless directed to do otherwise by your health care provider).

Weight of child	Age of child	Infant drops  0.8 mL = 80 mg	Children's liquid or suspension  1 tsp (5 mL) = 160 mg	Children's tablets 1 tablet = 80 mg	Junior strength 1 tablet = 160 mg
6-11 lbs (2.7-5 kg)	0-3 mos	Advised dose*: <u>0.4</u>			
12-17 lbs (5.5-7.7 kg)	4-11 mos	Advised dose*: <u>0.8</u>	Advised dose*: <u>1/2 TSP</u>		
18-23 lbs (8.2-10.5 kg)	12-23 mos	Advised dose*: <u>1.2</u>	Advised dose*: <u>3/4 TSP</u>		
24-35 lbs (10.9-15.9 kg)	2-3 yrs	1.6 mL	1 teaspoon (160 mg)	2 tablets	
36-47 lbs (16.4-21.4 kg)	4-5 yrs		1½ teaspoons (240 mg)	3 tablets	
48-59 lbs (21.8-26.8 kg)	6-8 yrs		2 teaspoons (320 mg)	4 tablets	2 tablets
60-71 lbs (27.3-32.3 kg)	9-10 yrs		2½ teaspoons (400 mg)	5 tablets	2½ tablets
72-95 lbs (32.7-43.2 kg)	11 yrs		3 teaspoons (480 mg)	6 tablets	3 tablets

*Ask your health care provider

Ibuprofen Dosing Information (Advil®, Motrin® or another brand)

Give every 6-8 hours, as needed, no more than 4 times in 24 hours (unless directed to do otherwise by your health care provider).

Weight of child	Age of child	Infant drops  1.25 mL = 50 mg	Children's liquid or suspension  1 tsp (5 mL) = 100 mg	Children's tablets 1 tablet = 50 mg	Junior strength 1 tablet = 100 mg
12-17 lbs (5.5-7.7 kg)	6-11 mos	1.25 mL			
18-23 lbs (8.2-10.5 kg)	12-23 mos	1.875 mL			
24-35 lbs (10.9-15.9 kg)	2-3 yrs		1 teaspoon (100 mg)	2 tablets	
36-47 lbs (16.4-21.4 kg)	4-5 yrs		1½ teaspoons (150 mg)	3 tablets	
48-59 lbs (21.8-26.8 kg)	6-8 yrs		2 teaspoons (200 mg)	4 tablets	2 tablets
60-71 lbs (27.3-32.3 kg)	9-10 yrs		2½ teaspoons (250 mg)	5 tablets	2½ tablets
72-95 lbs (32.7-43.2 kg)	11 yrs		3 teaspoons (300 mg)	6 tablets	3 tablets

FACTS ABOUT NOT VACCINATING

*** Your child can infect others without immunizations ***

- When your children are not vaccinated, they can pass diseases onto babies who are young, to be fully immunized.
- Also these children who are not immunized can infect the small percentage of children whose immunizations did not “take”.
- These unvaccinated children pose a threat to adults and children who can't be immunized like people with immune system problems like cancer, HIV / AIDS, or receiving chemotherapy/radiation therapy or large doses of corticosteroids.

***Without immunizations your child may have to be excluded at times from school or daycare.

Age Specific Safety Sheet

4 - 5 Years Old

Are you aware that you can prevent most major injuries which threaten your child's life and well being?

At this age, children are learning to do many things that can cause serious harm, such as riding a bike or crossing the street. Although your child is learning quickly, he/she cannot determine what is safe and what is not safe. You can help protect your child by taking a few simple steps to prevent well known major injuries.

BIKE SAFETY

A helmet can save your child's life by preventing head injuries. Make sure your child always wears a helmet when riding a bike.



Make sure the bike is the right size for your child. He/she should be able to put both feet flat on the ground while sitting on the seat and holding onto the handle bars.

Since some children at this age cannot use hand brakes the correct way, make sure your child's first bike has coaster brakes.

You should **NEVER** allow your child to ride a bike in the street. He/she is too young to do so safely.

SAFETY IN THE STREETS

It is unsafe for children to play near streets. If your child runs into the street, he/she risks being hit by a car. Instead, take your child to a park or playground to play. Teach your child to never cross the street without an adult.



FIRE SAFETY

Household fires are a threat to everyone, including your child. Make sure to install smoke detectors in every level of your home, especially in areas where people sleep and where furnaces are stored.

You should test the smoke detector once a month. Smoke detectors that use long life batteries are best to use, but if you do not use them, make sure to change the batteries at least once a year.

Many fires that occur in the home are a result of a lit cigarette that has not been put out completely. You should teach your child not to play with lighters or matches. To help keep your child safe, keep matches and lighters out of reach.

The Danger of Second Hand Smoke

****What is Second Hand Smoke?**

Second hand smoke is the smoke that comes from a cigarette or other tobacco that someone other than yourself is smoking.

****Secondhand Smoke and Children:**

Children who breathe in secondhand smoke are at risk for many serious health problems including the following:

- Upper respiratory infection
- Ear infections and hearing problems
- Bronchitis and pneumonia
- Asthma

Exposure to secondhand smoke as few as 10 cigarettes per day raises – a child's chances of getting asthma even if the child has never had any symptoms.

****Secondhand smoke can cause problems for children later in life including:**

- Lung Cancer
- Heart Disease
- Cataracts (Eye disease)

****Protect your Family:**

- Make your home and car smoke free
- Family, friends, and visitors should never smoke inside
- Smoke only outside

****Remember:**

Keeping a smoke-free home can help improve your child's health, improve your health and your community

SEAT BELT

For Children who are at least 4' 6" tall and 80 pounds.

- Lap portion of the belt must go over the thighs.
- Shoulder portion of the belt must go over the shoulder, never the face or neck.
- Shoulder and lap belt adjusters are never recommended.



**All Children age
12 and under
should ride in the
back seat**

To find a Child Safety Seat Inspection Station near you go to:

- <http://www.nhtsa.dot.gov/cps/cpsfitting/index.cfm>

Your local stations are:

Kentucky State Police Post 4 1055 N Mulberry Elizabethtown, KY 42701 Located in Hardin county Phone: 502-629-7337	Kosair Children's Hospital/Child Advocacy 315 E Broadway Street Louisville, KY 40202 Located in Jefferson county Phone: 502-629-7337
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This, and additional information, can be found at:

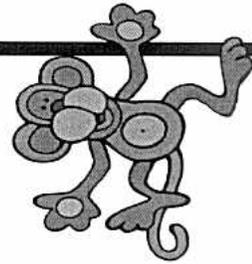
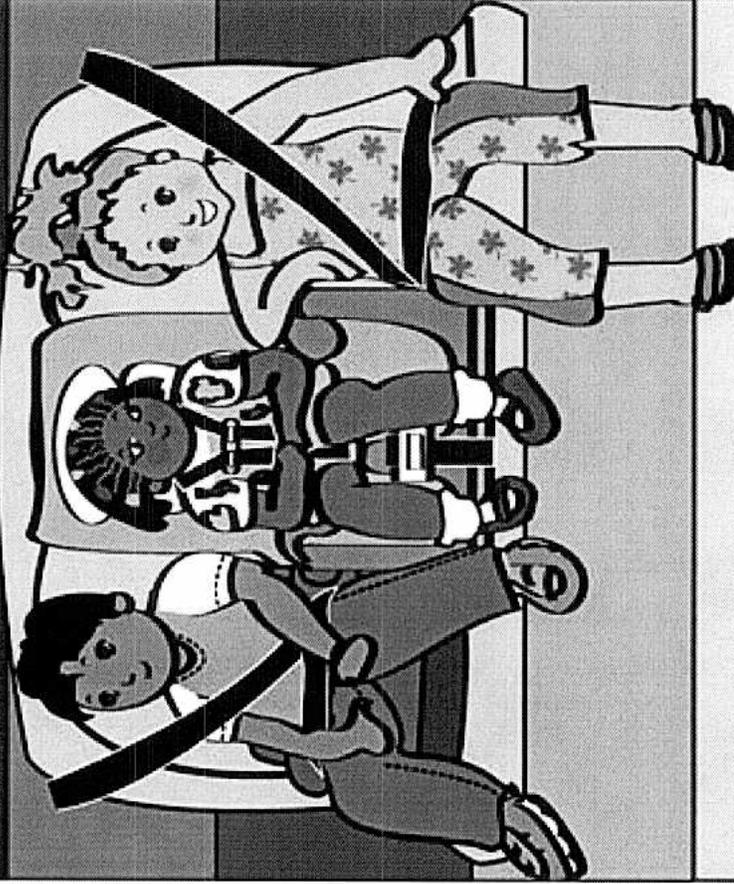
- http://www.kentuckystatepolice.org/hsp/child_safety.htm
- <http://www.nhtsa.dot.gov/portal/site/nhtsa/menuitem>
- <http://www.boosterseat.gov/4StepsFlyer.pdf>

The following site offers an English—Spanish translation:

- <http://www.nhtsa.dot.gov/people/injury/childps/CPS-Translation/images/Glossary.pdf>

Parents-are your children riding safely?

Play It Safe!



PEDIATRIC CARE CLINIC
IRELAND ARMY COMMUNITY HOSPITAL
FORT KNOX, KY 40121
(800) 493-9602

INFANT SEAT REAR-FACING CONVERTIBLE

These can be used for babies from birth to 20-22 pounds and less than 26 inches (check your car seat rating).

- **NEVER** place a rear-facing car seat in front of an air bag.
- Seat must face the rear of the vehicle.
- Harness straps should come through the slots in the back of the seat just below the level of your baby's shoulders.
- The seat should be reclined no more than a 45-degree angle. A rolled up towel may be used to help adjust the seat to the proper angle.
- Make sure the carrying handle is locked in the down position while in the car.
- Always keep harness straps snug so no more than one finger fits under it at the child's shoulder and fasten harness clip at the armpit level.

INFANT SEAT REAR-FACING CONVERTIBLE

These should be used for babies rear-facing who are 20 or more pounds and one year of age and under.

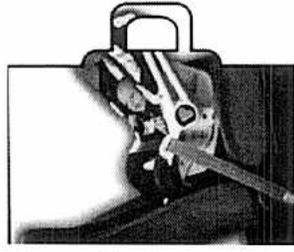
- If your child reaches 20 pounds before turning one year old, you must make sure the car seat is rated up to 30-35 pounds when rear facing.
- Do **NOT** place your child in a forward seat until at least 20 pounds and one year of age. A child younger than one does not have neck muscles strong enough to withstand a crash in a forward-facing seat.
- Keep harness straps snug and below shoulder level.

Check the label on your car seat to see its weight rating for your child now and for later growth.

CONVERTIBLE

These seats can be adjusted to be used by infants or toddlers. See previous for children under one year and 20 pounds.

- Use this seat forward-facing and upright for toddlers over age one and from 20-40 pounds.
- Harness straps should be snug and come through the uppermost slots in the back of the seat.
- Adjust car seat to upright position



These seats are forward-facing only and are for children over one year and 20 pounds. They can be used up to 80 pounds.

Up to 40 pounds:

- Use the harness until your child is 40 pounds.
- Harness straps should be snug and come through the back of the seat above the shoulder.
- Booster seats with shields are never recommended.

Remove the shield and follow the manufacturer's directions.

Over 40 pounds:

One of the most common mistakes made is to place a child in a vehicle seat belt too early. Your child needs a booster seat if:

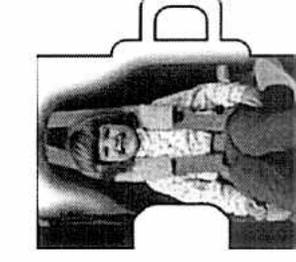
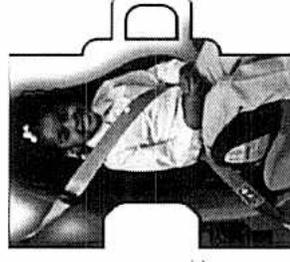
- The shoulder belt crosses your child's face or neck.
- If the lap belt rides up your child's stomach (this can cause serious stomach and spinal injuries in the event of a crash).
- If your child's legs do not bend over the seat naturally at the knee. (If your child's legs are not long enough for him or her to sit naturally, he or she may slouch down to be more comfortable. This can cause the lap belt to ride up the stomach.) Booster seat raise your child to a safe level so the lap and shoulder belt fits correctly.

Using a booster seat:

- Harness should be removed and the seat should be used as a belt-positioning booster with the lap/shoulder belt.
- Booster seats with shields are never recommended. Remove the shield and follow the manufacturer's directions.

LAP BELT

- If your car only has a lap belt in the back seat, you will need an 86-Y harness, available by calling E-Z On Products Inc., (800) 323-6598 or visit www.ezonpro.com on the internet.





CPR STEPS

1 Check the Scene

- Make sure it is safe for you to help.
- Don't become another victim.

2 Check the Victim

- tap and shout to get response.

3 Call for Help



- Tell someone to call 9-1-1.

If you are alone, perform 5 cycles of CPR **First**, then call 9-1-1.

Call 9-1-1 for any unconscious victim, including an infant that is breathing.

A Airway

- tilt head back, lift chin up to open airway.

B Breathing

- Take a normal breath, cover victims's mouth and nose with your mouth, and give a gentle breath until the chest rises.
- Give a second breath. Take about 1 second per breath.
If chest doesn't rise, open airway again.

C Circulation

- pump the chest 30 times.

Place **two fingertips of one hand** in the center of the chest.

Press chest down **1/3 the depth of the chest** at a rate of 100 per minute (16 in 10 seconds).

Repeat A - B - C

until help arrives or the victim begins breathing.

If there are two rescuers, one does the breathing and one does the compressions – CPR step and ratios remain the same.

POISON TREATMENT

SWALLOWED POISON

Your child may have been poisoned if you found him or her with an open or empty container of a toxic substance. You must stay calmly and act quickly.

Get the poison away from your child first. Check your child's mouth if there is still some poison in; remove it with your fingers or have him spit it out. Do not throw the material or poison away since that might help determine what was swallowed.

Check for signs and symptoms of swallowed poisoning:

- difficulty breathing
- nausea and vomiting
- severe pain in throat
- unexplained changes in behavior such as jumping, sleeping
- burns or sores on your child's lips or mouth
- odd odors in your child's breath or drooling
- unconsciousness or convulsion
- stains on your child's clothing

Call 9-1-1 immediately if your child has any of these signs. Do not throw poison containers away. Take it with you to determine what was swallowed.

Call your Regional Poison Center at (1-800-222-1222) or your child's pediatrician if your child does not have any of the above symptoms.



Have the following information available when you call.

- Your name and phone number
- Your child's name, age and weight
- List of your child's medications
- Child's medical history
- Ingredients of substance listed on the label
- Describe what the spill looks like
- The amount of poison you think was swallowed and the time your child swallowed the poison

**The American Academy of Pediatrics and the Poison control Center NO LONGER recommend giving syrup + Ipecac for poisoning.

*PEDIATRIC CARE CLINIC, Bldg 851 Ireland Loop, Ft. Knox, KY 40121,
(502)624-9267*

SKIN POISONING

If your child should spill a dangerous chemical on his/her body, take his clothes off and rinse skin with lukewarm water. If there is any signs of burns on the skin, continue rinsing for at least 15 minutes. Do not use ointment or grease, call the poison center for further advice.

EYE POISONING

Holding the eye lid open, flush your child's eye by pairing a steady stream of lukewarm water into the inner corner. Continue to flush the eye for 15 minutes. Do not use an eye cup, eye drops or ointment. Call the poison center for further instructions.

FUMES POISONING

Poisonous fumes can come from:

- Leaky gas vents
- Running car in a closed garage
- Stoves that are not working properly (e.g. kerosene, wood and charcoal)

Get your child into fresh air right away if he/she has been exposed to fumes or gases. If your child is not breathing, start CPR and have someone call all right away. Wait until your child is breathing if you are alone, then call 9-1-1.

POISON CONTROL CENTER NUMBER:

(1-800-222-1222)

Post the number by every phone in your home

ACTIVATED CHARCOAL

You should have activated charcoal available in your home in case of poisoning. You should always call the poison control number before giving activated charcoal to your child, and only give if you are instructed to do so by the poison control representative.

Directions:

- 1) Read directions and warnings as soon as you purchase.
- 2) Insert emergency numbers in spaces provided on package.
- 3) Call Poison Control before giving child this product.
- 4) Fill bottle of water or soda pop to fill line on label.
- 5) Shake vigorously for at least 30 seconds.
- 6) Drink entire contents as quick as possible or as directed by health profession or poison control.
- 7) If you are unsuccessful to contact Poison Control, Emergency Medical Facility, or health professional continue trying to contact them first.
- 8) Save container poison was in. Keep patient active and moving.

Do Not USE

- 1) Unless directed by a health professional
- 2) If Ipecac Syrup has been given
- 3) Until after patient has vomited unless directed to by poison control or healthcare professional.
- 4) If person is not fully conscious.
- 5) If turpentine, solvents such as alkalis (lye) and strong acids, or petroleum distillates such as kerosene, gasoline, paint thinner, cleaning fluids or furniture polish have been ingested.

KEEP OUT OF THE REACH OF CHILDREN
RECONSTITUED products should not be stored

**The American Academy of Pediatrics and the Poison Control Center NO LONGER recommends giving syrup of Ipecac for poisoning

POISON PREVENTION

The below listed tips which should be followed daily to prevent poisoning.

- All medications, whether prescription or over-the-counter, should have child-proof caps and be kept out of reach of children. If possible, put a lock or safety latch on your medicine cabinet.
- Prescription medications aren't the only thing in your bathroom that can be harmful to your children. Hair and skin products can also be dangerous if swallowed or inhaled. Keep them out of small children's reach.
- The medicine cabinet isn't the only place children find drugs. Many kids get them from their mother's purses. If you carry medications in your purse, make sure they have child-resistant closures.
- Never transfer prescription medications to other containers. You may forget what they are and the prescribed dosage. Keep all prescription medicines in original containers.
- Does your desk at home have glue, correction fluid or rubber cement in it? These could be harmful if swallowed. If you have small children, keep office products in locked storage.
- Not all poisons come in bottles. Plants can be poisonous too. Keep house plants out of small children's reach.
- When making your home safe from accidental poisonings, don't forget your garage. Keep automobile products, paints and paint solvents, and pesticides under lock and key and away from children.
- You say you don't have children? Do grandchildren or other kids sometimes come to visit your house? What about pets? Poison-proofing can save lives, even if you don't have small children.

Good Housekeeping Tips Prevent Accidental Poisonings

The Cincinnati Drug and Poison Information Center recommends these "good housekeeping rules" to prevent poisonings:

- Keep household chemical products and medicines out of youngsters' sight and locked up when not in use
- Store medicines separately from household products
- Store household cleaning products away from food products
- Keep items in their original containers
- Leave the original labels on all products and read the label before using
- Refer to medicine as "medicine" -- not "candy".
- Avoid taking medicines in front of children, since youngsters tend to imitate grown-ups

Poison-Proof Your Home

- Begin before your baby starts to crawl; get down on a child's level and crawl around your house, making sure all hazards are removed
- There is no such thing as a *child-proof* container; safety containers are only *child-resistant*, making them somewhat difficult to open but not impossible
- Store all potential poisons out of the reach and sight of children; keep products like insecticides, drain cleaners and medicines in a locked cabinet
- Children can open drawers as easily as cupboards; remove cosmetics, medication and other such items from bedside tables and low drawers
- Never let children be the first to open arriving mail or shopping containers
- Never leave purses that contain medicines and other potentially dangerous items unattended

- Never store food and household cleaning products together
- Never transfer products like kerosene, gasoline or household cleaning agents to another container, such as a soft drink bottle, cup or bowl that would attract a child or pet
- When discarding household products, rinse out the container and dispose of it in a covered trash can
- Always store medicines in their original containers, and discard medicines that are no longer used; rinse out empty containers

Poison-Proof Yourself

- Make sure you set a good example and establish good habits in the home and on the job.
- *Never* tell children medicine tastes like candy or that it is candy.
- Never take medicine when children are present. Children are imitators.
- Don't leave a child and a poison alone even "for a second".
- Don't take medicine in the dark or without reading the label.
- Don't leave purses unattended or available to curious children
- Don't mix household cleaning solutions, such as bleach and ammonia.
- Give medicine only to the person for whom it has been prescribed.
- Follow directions carefully when handling chemicals.
- Always be sure a teenage baby sitter has an adult to contact for help when parents are not available.
- Share this poison information with older siblings, baby sitters and relatives. Everyone has a part in preventing childhood poisonings.

Help for Parents:

- Being a parent is one of the hardest jobs in the world. It can be overwhelming at times.
- Most parents want to do a good job of raising their children. But unlike other jobs where you get special training, most parents are left to do the best they can, with what they know from their own experience. There's no need to feel that you are all alone or that no one cares. The Childhelp National Child Abuse Hotline is always there to help you.

- The Hotline is staffed by degreed, professional counselors who are available 24 hours a day, every day of the year. All calls are anonymous and toll-free.
- CALL 1-800-4-A-CHILD (1-800-422-4453) Then Push 1 to Talk to a Hotline Counselor OR Push 2 to Have Information Mailed to You

WHAT TO DO IF YOU SUSPECT CHILD ABUSE

Suggestions from the Child Welfare League of America

If it is an emergency, call your local police department: **On post**, that is 624-2111. They can ensure the immediate safety of a child and get medical attention if needed. If not an immediate life threatening situation, but help is needed, call you local child abuse hotline. **FORT KNOX** Family Advocacy is: 624-0255. Other local area numbers are: **BULLITT** County Protection and Permanency: 502-543-7051. **HARDIN** County Protection and Permanency: 270-766-5099. **JEFFERSON** County Child Protection Hotline: 502-595-4090. **MEADE** County Child Protection and Permanency: 270-422-3974.

REMEMBER...

- Suspicion of abuse is all that is necessary to file a report
- Your information can be given anonymously
- You will be asked to describe your concerns about the child and it will be helpful if you can provide the following: The child's name, age, address, gender, school attended (if possible), and names of parents.

Sources:

- Prevent Child Abuse America: Current Trends in Child Abuse Reporting & Fatalities: The 2000 Fifty State Survey
- National Center on Child Abuse Prevention Research: Prevent Child Abuse America; Current Trends in Child Abuse Reporting and Fatalities: The Results of the 1997 Annual Fifty State Survey
- Lung, C. & Daro D. (1996) Current Trends in Child Abuse Reporting and Fatalities: The Results of the 1995 Annual Fifty State Survey. Chicago: National Committee to Prevent Child Abuse. <http://www.childabuse.com/fs9.htm>
- US Department of Health & Human Services Administration for Children & Families. Child Maltreatment 2003: Summary of Key Findings
- US Department of Justice

ABUSE AND PREVENTION INFORMATION

Do your part to help
stop child abuse now!

Safe Children and
Healthy Families are
a shared responsibility

“
Child abuse casts a shadow
the length of a lifetime.
”

—Herbert Ward

THE PEDIATRIC
CARE CLINIC
IRELAND ARMY
COMMUNITY HOSPITAL

Keep Kids
Safe!

WHAT IS CHILD ABUSE?

Any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse, or exploitation, or an act or failure to act which presents an imminent risk of serious harm.

The four types of child abuse:

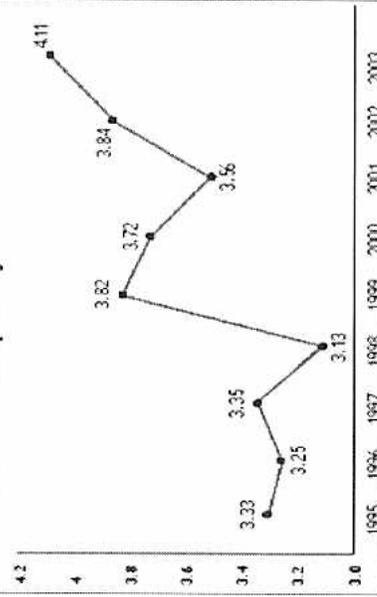
- Child Neglect
- Sexual Abuse
- Physical Abuse
- Emotional Abuse

WHAT CAN WE DO?

- Remember** - that children are the future
- Recognize** - prevention is a shared responsibility
- Raise** - the issue of prevention
- Reach Out** - to kids & parents
- Recommend** - ideas that your community can use



Number of deaths per day



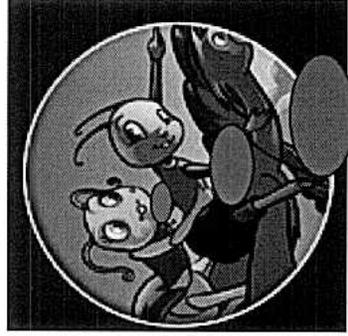
STATISTICS:

- 4 children die every day as a result of child abuse and three out of four of these victims are under the age of 4.
- A report of child abuse is made every 10 seconds.
- Of the reported rapes of children under 12 years old, 90% of the victims knew the perpetrator.
- Child abuse occurs at every socio-economic level, across ethnic and cultural lines, within all religions and at all levels of education.
- 36.7% of all women in prison and 14.4% of all men in prison in the United States were abused as children.
- Children who have been sexually abused are 2.5 times more likely to abuse alcohol and 3.8 times more likely to become addicted to drugs.
- One third of abused and neglected children will later abuse their own

FOR KIDS

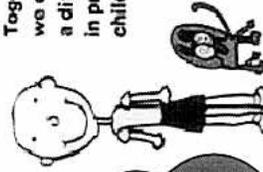
YOU SHOULD KNOW

- ◆ No one has the right to abuse you.
- ◆ You don't deserve to be abused.
- ◆ If you are being abused, you are a victim.
- ◆ It's not your fault that you are being treated this way.
- ◆ It is wrong that you are suffering this pain, fear or sadness.
- ◆ You are not alone. Other kids suffer abuse too.
- ◆ Sometimes abusers scare or threaten kids so they won't tell.
- ◆ There are people who care about you and want to help you.
- ◆ If you are being abused, please tell a safe person—that's someone you trust like a teacher, counselor, school nurse, neighbor or parent. You can also talk to a Childhelp USA hotline counselor



CALL 1-800-4-A-CHILD (1-800-422-4453) then push 1 to talk to a counselor. The Childhelp National Child Abuse Hotline is open 24 hours a day, 7 days a week. The hotline counselors work with translators who speak 140 different languages to help people who call and speak something other than English. All calls are anonymous (The hotline counselors don't know who you are and you don't have to tell them)

Together,
we can make
a difference
in preventing
child abuse!



CHILD ABUSE... IS A CRIME!
The reporting point of contact
for child and spouse abuse on
Fort Knox is the Military Police
at 624-2111.

WATER SAFETY

Water is a hazard for everyone, but especially for children. Water can be fun, but it is dangerous no matter where it is (i.e. bucket, tub, pool, toilet-bowl, lake, puddle, hot tub, etc). Allow your children to have safe fun, but do not take your eye off of them even for 1 second.

Children can drown in less than 1 inch of water. That places them at a higher risk of drowning in anywhere water may accumulate. (ie, buckets, diaper pails, toilets, etc). There have been deaths reported by drowning in buckets with water or other liquids, such as those used for mopping and other household chores. It can happen before you realize what is going on. Drownings are usually silent and quick. A child can lose consciousness within 2 minutes of being underwater, with irreversible brain damage occurring within 4-6 minutes.

From 2005 – 2007 an average of 283 fatal drowning for children under 5 years of age occurred, also 2100 children were treated in the emergency room for underwater related injuries.

SAFETY TIPS (in general)

- Empty all containers, buckets, & pools after using them. Store them upside down and in an area where children cannot reach.
- Keep toilet lid closed and use locks on the toilet lid.
- Never leave a child in a tub or body of water unattended; even if they do know how to swim.
- Watch children in bath seats and rings every second.
- Have children take approved swimming lessons and make sure family members know how to swim.
- Always check water first if you can't find your child. Time is of the essence with a drowning victim.
- NEVER SWIM ALONE!!!!!!!

BATH TUB SAFETY

- Place a rubber suction mat in bottom of tub.
- Only fill tub with no more than 3-4 inches of warm water.
- If your child cannot sit up securely on their own, support their back.
- Do not allow them to put their eyes or head under water, and do not let them drink water.
- Keep the lid down on the toilet preferably with a lid lock, and the bathroom door closed.

- If you have to leave the room grab a towel to wrap around the child and take them with you (answering phone, etc).

POOL SAFETY

- Babies under 6 months old should not be underwater. They naturally hold their breath underwater, but they continue to swallow.
- You should take an infant/child CPR course.
- All wading pools should be drained and turned upside down or stored upright.
- If you have a pool that is permanent, enclose it with a fence at least 4 feet high. Lock the gate after using the pool each time.
- Take any toys from the deck and pool area and store them.
- Make sure rescue equipment is available.
- Have a telephone with you instead of leaving the pool area to go get one during an emergency.

Going to Public Pool

- Swim where there is a lifeguard or where there is a marked swimming area with buoys.
- Avoid distractions when supervising your child.
- Supervision is the most important part to avoid drowning. No matter how well your child can swim or whether there is a lifeguard on duty.
- Lifeguards have too much area to watch especially if there are a lot of people swimming.

Personal or Public Pool

- One of the top hidden home hazards was reported to be pool drains. Missing drain covers was usually the problem. The suction can be strong enough to even hold an adult underwater by pulling on hair or on the body to form a seal.
- Make sure water is 84 – 87 degrees.
- Water should be safe for wading and be unpolluted. Also pools should be chlorinated properly.
- Do not dive in water less than 9 feet deep.

HOT TUB SAFETY

- Same rules apply. Never leave child alone.
- Avoid distractions.
- Stay away from drains. Tie hair up if the child has long hair.

River, Ocean, Lake, & Boat Safety

- Wear a U.S. Coast Guard approved life jacket when in or near an open body of water, boat, or in water sports.
- Never leave child alone. Watch every second.
- Teach child to swim after age 4. Teach them to tread water, float, and swim cross-current.
- Only swim in designated areas & with a buddy always.
- Do Not dive in river, lake, or ocean.
- Do Not let child drive jet skis.
- No alcohol while boating.
- Take a boating education course.
- Participate in a safety check program for vessels.
- Put a carbon monoxide detector on your boat.

What should I do if my child slips under the surface in a tub, pool, or other body of water?

When your child is in the water, it's extremely important not to leave him unattended, even for a second. If he slips under water for a moment during bath time or while playing in the pool, it's likely he'll come up coughing and sputtering. If he's been under water for longer, you'll need to move calmly and quickly. Follow these steps:

- Lift your child out of the water
- Carry him with his head lower than his chest
- Remove any wet clothing and wrap him a dry, warm towel or blanket
- Call 911 or our local rescue squad or bring your child to the nearest emergency room immediately. (Even if he appears fully recovered, he may have inhaled water, which could cause lung damage).
- If he's unconscious, assess his condition, breathing, and pulse. If he's not breathing, open his airway and begin mouth-to-mouth and nose resuscitation. If he has no pulse or breathing, begin infant/child CPR.

** Although chances are you'll never need to do CPR on your child, it's wise to learn the method, just in case. For more information, see our illustrated guides to infant and toddler first aid for choking and CPR.

HEALTHY CHILDREN

Physical activity plays a big role in having a healthy child. Parents can join their children by participating in fun activities that promote active play. (Ex: riding bikes, swimming, jump rope, etc).

Start the day off with a good breakfast. Children who do not eat breakfast do not have enough energy to play or concentrate.

Kids like to help make their own lunch and are more likely to eat it if they help make it. Remember to keep cold foods cold, and hot foods hot foods hot to keep food from spoiling. You can use insulated containers for hot food, or place ice pack in lunch bag for cold foods.

When you are making the lunches keep in mind that most deli meat is very high in fat. Instead of regular chips choose baked chips or pretzels to decrease the intake of fat in our child's diet. Try to choose foods that are low in fat.

If you are going out to eat or order fast food you still have choices available that are low in fat. It is best not to choose fast food very often.

Microwave ovens can cook foods in a healthy way; it helps keep the nutrients in vegetables, and meat can be cooked with little or no extra fat added. Keep in mind that food can cook unevenly in a microwave and should be stirred well. Wait before eating so it will not burn their mouth. Use pot holders to remove food from microwaves. * Your child is too young to use a microwave if they cannot read or follow written instructions.

Feeding Challenge:

Food Jags: Eats 1 and only 1 food, meal after meal

Feeding Strategy:

Allow the child to eat what he or she wants if the "jag" food is wholesome. Offer other foods at each meal. After a few days, the child likely will try other foods. Don't remove the jag food, but offer it as long as the child wants it. Food jags rarely last long enough to cause any harm.

Feeding Challenge:

Food Strikes: Refuses to eat what's served, which can lead to "short-order cook syndrome".

Feeding Strategy:

Have bread, rolls or fruit available at each meal, so there are usually choices that the child likes. Be supportive, set limits and do not be afraid to let the child go hungry if he or she will not eat what is served. Which is worse, an occasional missed meal or a parent who is a perpetual short-order cook?

Feeding Challenge:

"The TV habit": Wants to watch TV at mealtime

Feeding Strategy:

Turn off the television. Mealtime TV is a distraction that prevents family interaction and interferes with a child's eating. Value the time spent together while eating. Often it is the only time during the day that families can be together. An occasional meal with TV that the whole family can enjoy is fine.

Feeding Challenge:

The Complainer: Whines or complains about the food served.

Feeding Strategy:

First ask the child to eat other foods offered at the meal. If the child cannot behave properly, have the child go to his or her room or sit quietly away from the table until the meal is finished. Do not let him or her take food along, return for dessert or eat until the next planned meal or snack time.

Feeding Challenge:

"The Great American White Food Diet": Eats only bread, potatoes, macaroni and milk

Feeding Strategy:

Avoid pressuring the child to eat other foods. Giving more attention to finicky eating habits only reinforces a child's demands to limit foods. Continue to offer a variety of food-group foods. Encourage a taste of red, orange or green foods. Eventually the child will move on to other foods.

Feeding Challenge:

Fear of New Foods: Refuses to try new foods

Feeding Strategy:

Continue to introduce and reinforce new foods over time. It may take many tries before a child is ready to taste a new food.....and a lot of tastes before a child likes it. Do not force children to try new foods.

Mealtime: Not a Battleground

"Clean your plate", "No dessert until you eat your vegetables", "If you behave, you can have a piece of candy".

To parents and Caregivers, these phrases probably sound familiar. However, food should be used as nourishment, not as a reward or punishment. In the long run, food bribery usually creates more problems than it solves.

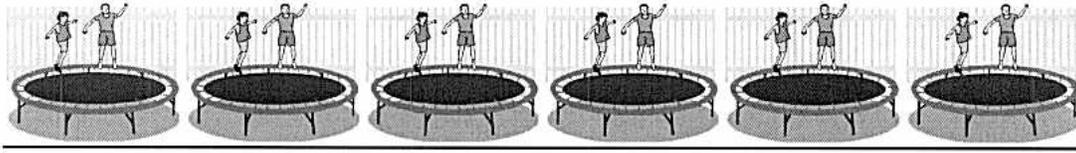
Sibling Relationships

The majority of children have a sibling to grow up with. Sibling rivalry can and does occur because each child is different and they have different personalities. Their birth order, gender, and their age difference can also affect how siblings interact.

All children are individuals and should be treated according to their needs. Each age has its own issues as well. Younger children may want the freedom of the older children and older children may think the younger child gets special treatment.

What you can do as a parent:

1. respect each child's privacy
2. do not compare your children in front of them
3. be fair to all children
4. stay out of their arguments, unless they are causing harm to themselves or others
5. have family time where everyone can share their feelings
6. PRAISE your Children!!!!!!!!!!!!



TRAMPOLINE SAFETY

Trampolines are good for exercise and are fun to play on. Unfortunately, they have caused many injuries such as; neck/spine, broken bones, head injuries, etc. Most injuries happen before you know it and usually because they have collided with someone else, landed wrong, landed on the springs, fallen off, or doing stunts.

Children should always be supervised while they are on a trampoline. Trampolines are not recommended to be used on the playground, in the home, or in gym classes. They are only recommended for competitive sports, gymnastics, or diving and only when supervised by a professional.

RESISTING VIOLENCE

Aggressive and violent behavior is usually learned early in life. As a parent, you play a big role in your child's life. You should lead by example in how you deal with others and how you react when dealing with violence and aggressiveness. Talking with your child is the most important action you can take to positively influence them. Discuss with your child options that can be used instead of violence/aggressiveness.

Punishment using spanking, slapping, or hitting sends the wrong message to your child. It implies that it is okay to punish other people in the same way and that hitting is okay. Time out, grounding and taking away things your child likes are good options for disciplining your child, when used consistently. Consistency is important. Parents should enforce rules they have set, otherwise it confuses the child.

Teach your children that guns do not solve problems. If you have guns store them separately from bullets and keep them locked up securely. Your home should be a "safe" place for your child, free from violence and aggression. This includes television programs. Monitor what your child watches, limit their time watching television and talk with your child about the programs they watch.

Talk to your child about ways to avoid becoming a victim. Discuss with them safety issues, reporting violence/aggression, reporting to an adult and do not talk or open the door to strangers. Also, talk with your child about accepting others of different backgrounds. Teach them that bullying, threats, violence, nor aggression is acceptable.

You, as a parent, should always be aware and involve yourself in your community.

WARNING SIGNS

Parents whose children show the signs listed below should discuss their concerns with a professional, who will help them understand their children and suggest ways to prevent violent behavior.

Warning Signs in the Toddler and Preschool Child:

- * Has many temper tantrums in a single day or several lasting more than 15 minutes and often cannot be calmed by parents, family members, or other caregivers.
- * Has many aggressive outbursts, often for no reason.
- * Is extremely active, impulsive and fearless.
- * Consistently refuses to follow directions and listen to adults.
- * Does not seem attached to parents, for example, does not touch, look for, or return to parents in strange places.
- * Frequently watches violence on television, engages in play that has violent themes, or is cruel toward other children.

Warning Signs in the School-Aged Child:

- * Has trouble paying attention and concentrating.
- * Often disrupts classroom activities.
- * Does poorly in school.
- * Frequently gets into fights with other children in school.
- * Reacts to disappointments, criticism, or teasing with extreme and intense anger, blame, or revenge.
- * Watches many violent television shows and movies or plays a lot of violent video games.
- * Has few friends and is often rejected by other children because of his or her behavior.
- * Makes friends with other children known to be unruly or aggressive.
- * Consistently does not listen to adults.
- * Is not sensitive to the feeling of others.
- * Is cruel or violent toward pets or to other animals.
- * Is easily frustrated.

Warning Signs in the Preteen or Teenaged Adolescent:

- * Consistently does not listen to authority figures.
- * Pays no attention to the feeling or rights of others.
- * Mistreats people and seems to rely on physical violence or threats of violence to solve problems.
- * Often expresses the feeling that life has treated him or her unfairly.
- * Does poorly in school and often skips class.
- * Misses school frequently for no identifiable reason.
- * Gets suspended from or drops out of school.
- * Joins a gang, gets involved in fighting, stealing or destroying property.
- * Drinks alcohol and/or uses inhalants or drugs.

SCHOOL YEAR SAFETY TIPS

With the start of a new school year just around the corner, fall is a busy time of year and can also be dangerous. There are fewer daylight hours which can make it harder for motorists to see these young pedestrians. Many children rely on catching a bus, walking or riding a bicycle to and from school.

Teach your children some of these simple safety rules

Riding the School Bus

- * Wait in a safe place away from the street and traffic.
- * Wait for the bus to come to a complete stop, for the doors to open and for the bus driver to say it's okay to step onto the bus.
- * You should look both ways before crossing or stepping in the street to make sure there are no cars passing the bus.
- * The handrail should be used while entering or exiting the bus.
- * Never walk behind the bus.

Ten feet in front, behind and on each side of the bus are the most dangerous areas around the bus. Children are at the greatest risk of not being seen by the bus driver in these areas. Throughout the school year, children need to be taught and reminded about how to get on and off the bus safely, to avoid getting hurt, especially at the beginning of the school year.

Riding in a Car

- * Everyone should wear a seatbelt at all times when in a vehicle.
- * Make sure infants and children are in an appropriate child safety seats or child booster seats.
- * Children under 13 years of age should ride in the rear seat of vehicle.
- * Children should be dropped off and picked up as close to the school as possible.

It is a great time to encourage and practice safe habits during the back-to-school season. School safety begins before children arrive at school and does not end until they arrive safely at home. While traveling to and from school, to avoid potential dangers, encourage your children to make safe habits a priority.

Walking and/or Bicycling to School

- * Always wear a safety helmet if bicycling.
- * You should ride on the right side of the road in the same directions as auto traffic.
- * When crossing the street, walk your bike across in a crosswalk.
- * When walking to school, if possible, walk with one or more classmates and friends.
- * Your child should be taught to recognize and obey all traffic signals and markings.

Children may not be ready to ride a two-wheeled bicycle until 5 or 6 years of age. Along with physical skills, your child must demonstrate self control and mental readiness for understanding and obeying safety rules.

BACKPACK SAFETY TIPS

Examine Shoulder Straps

Wide, padded straps that hold the backpack close to the body and within inches above the waist will provide a comfortable fit and help prevent back injuries as opposed to narrow straps that can dig into shoulders and restrict circulation.

Use Both Shoulder Straps

Wear both shoulder straps to distribute the weight of the backpack evenly. Using only one shoulder strap can strain muscles and hurt the spine.

Pad Your Back

A padded back helps protect against sharp edges on objects inside the backpack and increase comfort.

Fasten The Waist Strap

Using the waist strap can distribute the weight of a heavy load more evenly.

Pack Lightly

A backpack should not weigh more than 10-20% of the child's weight. For example, if your child weighs 100 pounds, their backpack should not weigh more than 20 pounds.

Organize The Contents

Heavier items should be packed to the center of the backpack. Use compartments to distribute weight evenly.

Bend with Care

Use both knees to squat down. Do not bend over at the waist when wearing or lifting a heavy backpack.

Ask Your Child

Ask your child if he or she is experiencing any pain or discomfort from wearing their backpack.

Consider Duplicates

If possible, keep one set of textbooks at home for your child to use and leave a second set of books at school.

Talk To Your Doctor

Ask your doctor for advice regarding backpack safety.