

**Rourke Baby Record: EVIDENCE BASED INFANT / CHILD HEALTH MAINTENANCE GUIDE II**

NAME \_\_\_\_\_

| DATE /AGE  | 9 mos   |            |                  | 12 - 13 mos   |                        |                                 | 18 mos  |            | 2 - 3 yrs  |                        | 4 - 5 yrs   |            |
|--|---|------------|------------------|---|------------------------|---------------------------------|---|------------|--|------------------------|---|------------|
| GROWTH   | <i>Ht.</i>  | <i>Wt.</i> | <i>Hd. Circ.</i> | <i>Ht.</i>  | <i>Wt.</i><br>(x 3 BW) | <i>Hd. Circ.</i><br>(av. 47 cm) | <i>Ht.</i>  | <i>Wt.</i> | <i>Ht.</i>   | <i>Wt.</i><br>(x 4 BW) | <i>Ht.</i>  | <i>Wt.</i> |
| <b>PARENTAL CONCERNS</b>   |   |            |                  |   |                        |                                 |   |            |  |                        |   |            |
| <b>NUTRITION</b>   | <input type="checkbox"/> <b>Breast feeding*</b><br><input type="checkbox"/> Formula feeding (Iron fortified)<br><input type="checkbox"/> No bottles in bed<br><input type="checkbox"/> Meats<br><input type="checkbox"/> No egg white; no citrus<br><input type="checkbox"/> Choking/safe food* |            |                  | <input type="checkbox"/> <b>Fluoride (if needed)*</b><br><input type="checkbox"/> Homo milk<br><input type="checkbox"/> Egg white & yolk, citrus<br><input type="checkbox"/> Appetite reduced |                        |                                 | <input type="checkbox"/> No bottles in bed  |            | <input type="checkbox"/> <b>Fluoride (if needed)*</b><br><input type="checkbox"/> Homo or 2% milk<br><input type="checkbox"/> Canada's Food Guide  |                        | <input type="checkbox"/> <b>Fluoride (if needed)*</b><br><input type="checkbox"/> 2% milk<br><input type="checkbox"/> Canada's Food Guide   |            |
| <b>E<br/>D<br/>U<br/>C<br/>A<br/>T<br/>I<br/>O<br/>N<br/>&amp;<br/>A<br/>D<br/>V<br/>I<br/>C<br/>E</b> | <b>Safety</b>   |            |                  | <input type="checkbox"/> <i>Smoke detectors*</i><br><input type="checkbox"/> <i>Non-inflam. sleepwear*</i><br><input type="checkbox"/> <i>Hot water &lt; 54° C*</i>                           |                        |                                 |   |            | <input type="checkbox"/> <i>Bike helmets*</i><br><input type="checkbox"/> Matches  |                        | <input type="checkbox"/> <i>Bike helmets*</i><br><input type="checkbox"/> Matches<br><input type="checkbox"/> Water Safety*   |            |
|  | <b>Behaviour</b>  |            |                  |   |                        |                                 | <input type="checkbox"/> Discipline   |            |  |                        |   |            |
|  | <b>High risk</b>  |            |                  |   |                        |                                 |   |            | <input type="checkbox"/> Assess day care & preschool need*   |                        |   |            |
|  | <b>Other</b>  |            |                  | <input type="checkbox"/> Teething*  |                        |                                 | <input type="checkbox"/> <b>Dental Care*</b><br><input type="checkbox"/> Toilet training  |            | <input type="checkbox"/> <b>Dental Care*</b><br><input type="checkbox"/> Toilet training   |                        | <input type="checkbox"/> <b>Dental Care*</b>  |            |
| <b>DEVELOPMENT</b>   | <input type="checkbox"/> <i>Non-specific "Dadamama"</i><br><input type="checkbox"/> Peek-a-boo<br><input type="checkbox"/> Stands - holding<br><input type="checkbox"/> Pulls to a stand<br><input type="checkbox"/> Gets to sitting position<br><input type="checkbox"/> Opposes thumb & index |            |                  | <input type="checkbox"/> <i>First word</i><br><input type="checkbox"/> <i>Stands for a moment</i><br><input type="checkbox"/> <i>Walks with support</i>                                       |                        |                                 | <input type="checkbox"/> <i>10-20 words</i><br><input type="checkbox"/> <i>Points &amp; asks</i><br><input type="checkbox"/> <i>Follows commands</i><br><input type="checkbox"/> <i>Walks backward</i><br><input type="checkbox"/> <i>Uses spoon well</i><br><input type="checkbox"/> <i>Piles 2-3 blocks</i> |            | <input type="checkbox"/> <i>50 words</i><br><input type="checkbox"/> <i>2-word sentences</i><br><input type="checkbox"/> <i>Walks up steps</i><br><input type="checkbox"/> <i>Kicks/throw ball</i> |                        | <input type="checkbox"/> <i>Complete sentences</i><br><input type="checkbox"/> <i>Asks "Wh..." questions</i><br><input type="checkbox"/> <i>Balances on 1 foot</i><br><input type="checkbox"/> <i>Hops on 1 foot</i><br><input type="checkbox"/> <i>Walks heel-to-toe</i> |            |
| <b>PHYSICAL</b>  |   |            |                  | <input type="checkbox"/> <b>Cover/uncover test &amp; inquiry*</b><br><input type="checkbox"/> <b>Clap test &amp; inquiry</b><br><input type="checkbox"/> <b>Hips</b>                          |                        |                                 | <input type="checkbox"/> <b>Cover/uncover test &amp; inquiry*</b><br><input type="checkbox"/> <b>Clap test &amp; inquiry</b>  |            | <input type="checkbox"/> <i>Visual acuity</i><br><input type="checkbox"/> Cover/uncover test*<br><input type="checkbox"/> Hearing inquiry  |                        | <input type="checkbox"/> <i>Visual acuity</i><br><input type="checkbox"/> Cover/uncover test*<br><input type="checkbox"/> Hearing inquiry   |            |
| <b>PROBLEMS &amp; PLANS</b>  | <input type="checkbox"/> <b>Anti-HBs &amp; HBsAg*</b><br>(If HBsAg pos mother)<br><input type="checkbox"/> <i>Hgb. (If at risk)*</i>  |            |                  | <input type="checkbox"/> <i>Hgb. (If at risk)*</i><br><input type="checkbox"/> <i>Serum Pb. (If at risk)*</i>   |                        |                                 |   |            | <input type="checkbox"/> <i>Serum Pb (If at risk)*</i>   |                        |   |            |
| <b>IMMUNIZATION</b><br>Guidelines may vary by province.  | <input type="checkbox"/> TB skin test ? *   |            |                  | <input type="checkbox"/> MMR  |                        |                                 | <input type="checkbox"/> Act HIB<br><input type="checkbox"/> cPDTpolio  |            |  |                        | <input type="checkbox"/> MMR<br><input type="checkbox"/> cPDTpolio  |            |
| Signature  |   |            |                  |   |                        |                                 |   |            |  |                        |   |            |

Grade of evidence: (A) **Bold type** – Good evidence; (B) *Italic* – Fair evidence; (C) Plain – Optional  
(\*) see *Infant Health Maintenance: Selected Guidelines*.



## INFANT HEALTH MAINTENANCE: SELECTED GUIDELINES

### NUTRITION

#### • Breastfeeding:

Breastfeeding reduces gastrointestinal and respiratory infections. Counselling (both ante- and post partum) increases breastfeeding and prolongs its duration. Early and frequent mother-infant contact, rooming in, and banning handouts of free infant formula increase breastfeeding rates. Routine vit. D supplementation is controversial.

#### • Fluoride:

- > The Canadian Paediatric Society Nutrition Committee recommends the fluoridation of municipal water supplies as a safe, economical and effective means of preventing dental caries in all age groups.
- > Fluoride supplements are recommended where ingestion from all sources is low.
- > Sources include all home and child-care water sources and the reduction in fluoride by home water filtration devices.
- > Dosage is based on age and fluoride in the water supply.
- > Chewable tablets or lozenges are preferred.

THE CANADIAN PAEDIATRIC SOCIETY RECOMMENDATIONS FOR FLUORIDE SUPPLEMENTATION

| AGE            | DOSE SCHEDULE FOR DIETARY FLUORIDE SUPPLEMENTS (mg/day)         |           |       |
|----------------|---|-----------|-------|
|                | Fluoride concentration in principal drinking water source (ppm) |           |       |
|                | < 0.3   | 0.3 - 0.6 | > 0.6 |
| 6 mths - 3 yrs | 0.25  | 0         | 0     |
| 3 - 6 yrs      | 0.5   | 0.25      | 0     |
| 6 - 16 yrs     | 1.0   | 0.5       | 0     |

ref: Canadian Paediatric Society Statement - *Paediatric Child Health* vol. 2 Fall 1996

\*\*The Canadian Dental Association does not recommend starting fluoride supplements until 3 years of age.

### SAFETY

#### Accidents:

In Canada childhood injuries cause 4 times more deaths than does disease. Between the ages 1 - 24 months, 63% of deaths are from injuries.

#### The leading causes are:

1. motor vehicle accidents
2. drownings
3. burns
4. choking
5. falls

#### Preventive measures:

##### 1. Motor vehicle accidents:

###### • Car seats - infant/toddler:

Use infant (rear facing) car seat until baby weighs 20 lbs. (9 Kg). Ensure proper installation of toddler (forward-facing) car seat, using tether straps to secure car seat to the car frame. Do not place a car seat, or a child under 12 years of age, in a front passenger seat which has an airbag.

##### 2. Drownings:

###### • Bath safety:

Never leave a child younger than 3 years alone in the bath tub.

###### • Water safety:

Encourage swimming lessons, diving safety and boating safety to reduce the risk of drowning.

##### 3. Burns:

Installs **smoke detectors** in the home.

Use **non-inflammable sleepwear**.

Use hot water at a temperature < 54° C.

##### 4. Choking:

###### • Use safe toys and safe food

- Assess home for hazards e.g. Table for changing baby; **do not use baby walkers** (used in 80-90% homes); use **window and stair guards**; wear **bike helmets**.

##### 6. Poisons:

- > have **Poison Control Centre Phone number** handy.
- > **safety proof cupboards & drawers** containing medicines, cleaners & solvents.
- > have **ipeccac** and be aware of its appropriate use.

### BEHAVIOUR

#### • Night crying:

Night crying will occur in 20% of infants and toddlers who do not require night feeding. Counselling around systematic ignoring and scheduled awakenings has been shown to reduce the prevalence of night crying.

#### • Resources:

The Canadian Task Force on the Periodic Health Examination, *The Canadian Guide to Clinical Preventive Care*, Minister of Supply and Services Canada, 1994.  
Rourke L L, Rourke J T B, Well baby assessment revisited. 1994 Update of the Rourke Baby Record Flow Charts. *Canadian Family Physician* 1994;40:1796-1803.  
Rourke J T B, Rourke L L, Well baby visits: Screening and health promotion. *Canadian Family Physician* 1985;31:997-1002.

### HIGH RISK INFANTS

#### • Day care:

Specialized day care or preschool is beneficial for children living in poverty (family income at or below Statistics Canada low income cut-off). These disadvantaged children are at an increased risk of mortality and morbidity, including physical, emotional, social and educational deficits.

#### • Home visits:

Regular home visiting has been shown to prevent physical abuse and neglect.

##### Risk factors for physical abuse:

- > low SES
- > young maternal age
- > single parent family
- > parental experiences of own physical abuse in childhood
- > spousal violence
- > lack of social support
- > unplanned pregnancy or negative parental attitude towards pregnancy

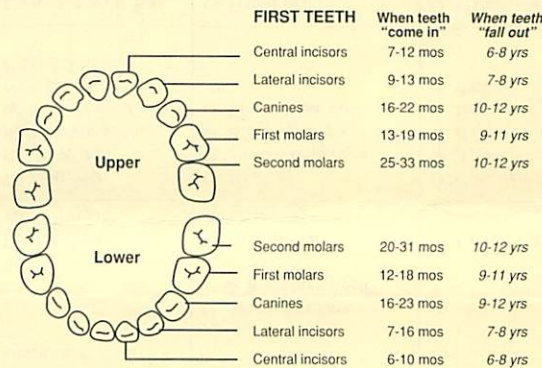
##### Risk factors for sexual abuse:

- > living in a family without a natural parent
- > growing up in a family with poor marital relations between parents
- > presence of a stepfather
- > poor child-parent relationships
- > unhappy family life.

### OTHER

#### • Dental Care:

Teeth brushing is recommended for children. Flossing should also be encouraged, to develop the habit. (Flossing is an 'A' recommendation for adults.)



#### • Second hand smoke exposure:

Second hand smoke contributes to childhood illnesses such as URTI, bronchitis, pneumonia, middle ear effusion, asthma, and SIDS.

#### • Sleep position & SIDS:

Healthy infants should be positioned on their backs, or on their sides for sleep. Counsel parents on the dangers of such contributory causes of SIDS as overheating and second hand smoke.

### PHYSICAL

#### • Cover/uncover test for strabismus:

With the child focusing on a light source, the light reflexes should be symmetrical. Each eye is then covered, in turn, for 2-3 seconds, and then quickly uncovered. The covered eye "wanders" and when uncovered moves inwards, or outwards to focus or "fix" on the light source.

### PROBLEMS & PLANS (SCREENING)

#### • Hemoglobin screening:

All infants, from high risk groups for iron deficiency anemia, require Hgb. determination between 6 -12 mos. of age, e.g. Lower SES; Asian; First Nation children; low birth weight infants, and infants fed whole cow's milk during their first year of life.

#### • Hemoglobinopathy screening:

Screen all neonates from high risk groups: e.g. Asian, African, Mediterranean.

#### • Lead Screening is recommended for children:

- > who live, or regularly visit homes built before 1950, with peeling paint or recent renovation;
- > who have a sibling, housemate, or playmate exposed to lead;
- > who live with an adult who (from work or hobby) is exposed to lead;
- > who live near lead industries or busy highways.

### IMMUNIZATION:

#### • Hep B Ig & Immunization:

Neonates of HBsAg-pos mothers require Hep B Ig at birth and Hep B vaccine at birth, at 1 month, and 6 months of age. Anti-HBs and HBsAg should be done at 9-10 months of age.

#### • TB Skin testing:

TB skin testing should be done if the infant is living with anyone being investigated or treated for TB.