Health Tips for Your Baby and Young Child

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- A Healthy Smile for Your Young Child: Tips to Keep Your Child Healthy
- Flu: A Guide for Parents
- Pregnant? You Need a Flu Shot
- The Salty Six for Kids
- 10 School Planning Tips When Your Child Has Food Allergies

This resource is meant to provide useful, educational materials to daycare providers and parents of young children. Visit GetHealthyCT.org for more information.

September 2021
Get Dental Care for Your Baby

- Check your baby’s gums and teeth once a month. Look for white spots. If you see white spots, take your baby to a dentist right away.
- Take your baby to the dentist by the time she is 1 year old to have her teeth and gums checked.

Keep Your Own Mouth Healthy

- Brush your teeth with a soft toothbrush and toothpaste with fluoride, twice a day, after breakfast and before bed.
- Floss once a day before bedtime.
- Eat healthy foods, like whole-grain products, dairy products, fruits, vegetables, meat, fish, chicken, eggs, beans, and nuts.
- Eat fewer sweets like candy, cookies, or cake. Drink fewer sugary drinks like fruit-flavored drinks or pop (soda). Eat sweets or drink sugary drinks at mealtimes only.
- Get dental care.

Resources

Finding a Dentist
- http://www.aapd.org/finddentist
- https://finddentist.ada.org
- http://www.knowyourteeth.com/findadentist

Finding Low-Cost Dental Care
- http://www.nidcr.nih.gov/FindingDentalCare/ReducedCost/FLCDC.htm

Finding Dental Insurance Coverage
- https://www.insurekidsnow.gov

Tip: Taking care of your baby’s gums and teeth is important. Clean your baby’s gums or brush your baby’s teeth, give your baby healthy foods, and take your baby to the dentist by the time he is 1 year old. If you take care of your teeth, it will help your baby’s teeth stay healthy, too.
Children need healthy teeth. Healthy teeth help them to chew and to speak clearly. Baby teeth also make space for adult teeth. Babies need to have their teeth brushed. Before they have teeth, you should clean their gums.

Give your baby a healthy start! Here are tips to keep your baby’s gums and teeth healthy.

**Take Care of Your Baby’s Mouth**

- Clean your baby’s gums after every feeding even before her first teeth come in. Use a clean, damp washcloth or a toothbrush with soft bristles and a small head made for babies.
- When your baby gets her first tooth (usually around 6 to 10 months), begin brushing her teeth with toothpaste with fluoride (floor-ide) twice a day. Use a small smear of toothpaste.
- Brush the front and back of your baby’s teeth. Lift her lips to brush at the gum line of her front teeth.
- If your baby has sore gums from a tooth coming in, give her a cold teething ring, cool spoon, or cold wet washcloth. Or you can rub your baby’s gums with a clean finger.
- Germs can pass from your mouth to your baby’s mouth. Do not test a bottle with your mouth to see if it is too hot. Use a different spoon to taste your baby’s food. If your baby’s bottle nipple or pacifier falls on the floor, clean it with water.
- Do not dip pacifiers in sweet foods like sugar, honey, or syrup.

**Give Your Baby Healthy Foods**

- Breast milk is best! Breastfeed your baby for 6 months or longer if you can. If you feed your baby formula, use formula with iron. Wait until your baby is 1 year old before feeding him cow’s milk.
- Hold your baby while feeding him breast milk or formula in a bottle.
- Do not put your baby to sleep with a bottle filled with breast milk, formula, juice, or sugary drinks like fruit-flavored drinks or pop (soda).
- Wait until your baby is 1 year old before giving him juice.
- When your baby is around 4 to 6 months old, start giving him solid foods. Do not give your baby solid foods before he is ready. One way to tell if your baby is ready is if he can sit by himself without holding on to anything.
- As your baby begins to eat more solid foods and drink from a cup, you can wean him from the bottle. Begin to wean your baby from the bottle slowly, at about age 9 to 10 months. By age 12 to 14 months, most babies can drink from a cup.
- Do not give your baby sweets, like candy, cookies, or cake, or sugary drinks.
Get Dental Care for Your Child

- Check your child’s teeth and gums once a month. Look for white spots. If you see white spots, take your child to a dentist right away.
- If your child has not been to the dentist, make an appointment.
- Continue to visit the dentist to have your child’s teeth and gums checked. The dentist will tell you when you need to come back.

Keep Your Own Mouth Healthy

- Brush your teeth with a soft toothbrush and toothpaste with fluoride, twice a day, after breakfast and before bed.
- Floss once a day before bedtime.
- Eat healthy foods, like whole-grain products, dairy products, fruits, vegetables, meat, fish, chicken, eggs, beans, and nuts.
- Eat fewer sweets like candy, cookies, or cake. Drink fewer sugary drinks like fruit-flavored drinks or pop (soda). Eat sweets or drink sugary drinks at mealtimes only.
- Get dental care.

Resources

Finding a Dentist
- http://www.aapd.org/finddentist
- https://finddentist.ada.org
- http://www.knowyourteeth.com/findadentist

Finding Low-Cost Dental Care
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National Maternal and Child Oral Health Resource Center
Georgetown University
Phone: (202) 784-9771
E-mail: OHRCinfo@georgetown.edu
Website: http://www.mchoralhealth.org

Taking care of your young child’s teeth and gums is important. Brush your child’s teeth, give your child healthy foods, and take your child to the dentist. If you take care of your teeth, it will help your child’s teeth stay healthy, too.
Children need healthy teeth. Healthy teeth help them to chew and to speak clearly. Baby teeth also make space for adult teeth. Young children want to brush their own teeth, but they need help. Until your child is about 7 or 8, you should brush her teeth.

Give your child a healthy start! Here are tips to keep your child’s teeth and gums healthy.

**Take Care of Your Child’s Mouth**

- Brush your child’s teeth with toothpaste with fluoride (floor-ide) twice a day, after breakfast and before bed. Use a soft toothbrush made for young children.
- For children under age 3, use a small smear of toothpaste. For children ages 3 to 6, use toothpaste the size of a pea.
- Brush the front and back of your child’s teeth. Lift his lips to brush at the gum line of his front teeth.
- Make sure your child spits out the toothpaste after brushing. Do not have your child rinse with water. The toothpaste that stays in your child’s mouth is good for his teeth.
- Floss your child’s teeth if they touch each other. Ask dental office staff for help.
- If your child has sore gums from a tooth coming in, give him a cold teething ring, cool spoon, or cold wet washcloth. Or you can rub your child’s gums with a clean finger.
- Germs can pass from your mouth to your child’s mouth. Use a different spoon to taste your child’s food. If your child’s pacifier falls on the floor, clean it with water.
- Do not dip pacifiers in sweet foods like sugar, honey, or syrup.

**Give Your Child Healthy Foods**

- Give your child healthy foods. Give her foods like fruits, vegetables, whole-grain products like bread or crackers, and dairy products like milk, yogurt, or cheese. Lean meats, fish, chicken, eggs, and beans are also good for your child.
- Wean your child from a bottle to a cup by age 12 to 14 months.
- Do not put your child to sleep with a bottle filled with milk, juice, or sugary drinks like fruit-flavored drinks or pop (soda).
- Serve juice in a cup with no lid, not a bottle. For children ages 1 to 3, offer no more than 4 ounces of juice each day. For children ages 4 to 6, offer no more than 4 to 6 ounces of juice each day. Give your child 100-percent fruit juice only. It is even better to give your child fruit instead of juice.
- Give your child water several times a day. The water should have fluoride.
- Give your child fewer sweets like candy, cookies, or cake. And give your child fewer sugary drinks. If you give your child sweets or sugary drinks, give them at mealtimes only.
- Reward your child with a big smile or a hug, not with food.
Influenza (flu) is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. Flu is different from a cold, and usually comes on suddenly. Each year flu causes millions of illnesses, hundreds of thousands of hospitalizations, and tens of thousands of deaths in the United States.

Flu can be very dangerous for children. CDC estimates that since 2010, between 6,000 and 26,000 children younger than 5 years old have been hospitalized from flu each year in the U.S. Flu vaccine is safe and helps protect children from flu.

What parents should know

How serious is flu?
While flu illness can vary from mild to severe, children often need medical care because of flu. Children younger than 5 years old and children of any age with certain long-term health problems are at high risk of flu complications like pneumonia, bronchitis, sinus and ear infections. Some health problems that are known to make children more vulnerable to flu include asthma, diabetes and disorders of the brain or nervous system.

How does flu spread?
Flu viruses are thought to spread mainly by droplets made when someone with flu coughs, sneezes or talks. These droplets can land in the mouths or noses of people nearby. A person also can get flu by touching something that has flu virus on it and then touching their mouth, eyes, or nose.

What are flu symptoms?
Flu symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, feeling tired and sometimes vomiting and diarrhea (more common in children than adults). Some people with the flu will not have a fever.

Protect your child

How can I protect my child from flu?
The first and best way to protect against flu is to get a yearly flu vaccine for yourself and your child.

- Flu vaccination is recommended for everyone 6 months and older every year. Flu shots and nasal spray flu vaccines are both options for vaccination.
- It’s especially important that young children and children with certain long-term health problems get vaccinated.
- Caregivers of children at high risk of flu complications should get a flu vaccine. (Babies younger than 6 months are at high risk for serious flu complications, but too young to get a flu vaccine.)
- Pregnant women should get a flu vaccine to protect themselves and their baby from flu. Research shows that flu vaccination during pregnancy protects the baby from flu for several months after birth.
- Flu viruses are constantly changing and so flu vaccines are updated often to protect against the flu viruses that research indicates are most likely to cause illness during the upcoming flu season.

Are flu vaccines safe?
Flu vaccines are made using strict safety and production measures. Millions of people have safely received flu vaccines for decades. Flu shots and nasal spray flu vaccines are both options for vaccination. Different types of flu vaccines are licensed for different ages. Each person should get one that is appropriate for their age. CDC and the American Academy of Pediatrics recommend an annual flu vaccine for all children 6 months and older.

What are the benefits of getting a flu vaccine?
- A flu vaccine can keep you and your child from getting sick. When vaccine viruses and circulating viruses are matched, flu vaccination has been shown to reduce risk of getting sick with flu by about 40 to 60%.
- Flu vaccines can keep your child from being hospitalized from flu. One recent study showed that flu vaccine reduced children’s risk of flu-related pediatric intensive care unit admission by 74%.
- Flu vaccine can be life saving in children. A study using data from recent flu seasons found that flu vaccine reduced the risk of flu-associated death by half among children with high risk medical conditions.
and by nearly two-thirds among children without medical conditions.

- Flu vaccination also may make your illness milder if you do get sick.
- Getting yourself and your child vaccinated also can protect others who may be more vulnerable to serious flu illness, like babies and young children, older people, and people with certain long-term health problems.

What are some other ways I can protect my child against flu?

In addition to getting a flu vaccine, you and your child should take everyday actions to help prevent the spread of germs.

Stay away from people who are sick as much as possible to keep from getting sick yourself. If you or your child are sick, avoid others as much as possible to keep from infecting them. Also, remember to regularly cover your coughs and sneezes, wash your hands often, avoid touching your eyes, nose and mouth, and clean surfaces that may be contaminated with flu viruses. These everyday actions can help reduce your chances of getting sick and prevent the spread of germs to others if you are sick. However, a yearly flu vaccine is the best way to prevent flu illness.

If your child is sick

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child’s illness.

Make sure your child gets plenty of rest and drinks enough fluids.

If your child is 5 years or older and does not have a long-term health problem and gets flu symptoms, including a fever and/or cough, consult your doctor as needed.

Children younger than 5 years old — especially those younger than 2 years — and children with certain long-term health problems (including asthma, diabetes, and disorders of the brain or nervous system), are at high risk of serious flu complications. Call your doctor or take your child to the doctor right away if they develop flu symptoms.

What if my child seems very sick?

Even healthy children can get very sick from flu. If your child is experiencing the following emergency warning signs, you should go to the emergency room:

- Fast breathing or trouble breathing
- Bluish lips or face
- Ribs pulling in with each breath
- Chest pain

- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children less than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions

This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Is there a medicine to treat flu?

Yes. Antiviral drugs are prescription medicines that can be used to treat flu illness. They can shorten your illness and make it milder, and they can prevent serious complications that could result in a hospital stay. Antivirals work best when started during the first 2 days of illness. Antiviral drugs are recommended to treat flu in people who are very sick (for example, people who are in the hospital) or people who are at high risk of serious flu complications who get flu symptoms. Antivirals can be given to children and pregnant women.

How long can a sick person spread flu to others?

People with flu may be able to infect others from 1 day before getting sick to up to 5 to 7 days after. Severely ill people or young children may be able to spread the flu longer, especially if they still have symptoms.

Can my child go to school, day care, or camp if he or she is sick?

No. Your child should stay home to rest and to avoid spreading flu to other children or caregivers.

When can my child go back to school after having flu?

Keep your child home from school, day care, or camp for at least 24 hours after their fever is gone. (The fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F (37.8°C)* or higher.

*Many authorities use either 100 (37.8 degrees Celsius) or 100.4°F (38.0 degrees Celsius) as a cut-off for fever, but this number can vary depending on factors such as the method of measurement and the age of the person.

For more information, visit www.cdc.gov/flu/protect/children.htm or call 800-CDC-INFO
Pregnant? You Need a Flu Shot!

Information for pregnant woman

Flu can be a serious illness, especially when you are pregnant.

Getting flu can cause serious problems when you are pregnant. Even if you are generally healthy, changes in immune, heart, and lung functions during pregnancy make you more likely to get severely ill from flu. Pregnant women (and women up to two weeks postpartum) who get flu are at high risk of developing serious illness, including being hospitalized.

Flu shots are the best available protection for you – and your baby.

When you get your flu shot, your body starts to make antibodies that help protect you against flu. Antibodies are also passed on to your developing baby, and help protect them for several months after birth. This is important because babies younger than 6 months old are too young to get a flu vaccine. If you breastfeed your infant, antibodies also can be passed through breast milk. It takes about two weeks for your body to make antibodies after getting a flu vaccine. Talk to your doctor, nurse, or clinic about getting vaccinated by the end of October.

Flu shots are safe for pregnant and breastfeeding women.

You can get a flu shot at any time, during any trimester, while you are pregnant. Millions of pregnant women have gotten flu shots. Flu shots have a good safety record. There is a lot of evidence that flu vaccines can be given safely during pregnancy, though these data are limited for the first trimester.

If you deliver your baby before getting your flu shot, you should still get vaccinated. Flu is spread from person to person. You, or others who care for your baby, may get sick with flu, and spread it to your baby. It is important that everyone who cares for your baby get a flu vaccine, including other household members, relatives, and babysitters.

Common side effects of a flu vaccine are mild.

After getting your flu shot, you may experience some mild side effects. The most common side effects include soreness, tenderness, redness and/or swelling where the shot was given. Sometimes you might have a headache, muscle aches, fever, and nausea or feel tired. The flu is a serious illness, especially when you are pregnant.

Because you are pregnant CDC and your ob-gyn or midwife recommend you get a flu shot to protect yourself and your baby from flu.

You should get vaccinated by the end of October, if possible. This timing can help ensure that you are protected before flu activity begins to increase. Talk to your ob-gyn or midwife about getting a flu shot.
If you have flu symptoms, call your doctor immediately.

If you get flu symptoms (e.g., fever, cough, body aches headache, etc.) – even if you have already had a flu shot – call your doctor, nurse, or clinic right away. Doctors can prescribe influenza antiviral medicine to treat flu. Antiviral drugs can shorten your flu illness, make it milder and lessen the chance of developing serious complications. Because pregnant women are at high risk of developing serious flu complications, CDC recommends that they be treated quickly with antiviral drugs if they get flu symptoms. Oral oseltamivir is the preferred treatment for pregnant women because it has the most data available to suggest that it is safe and beneficial. These medicines work best when started early.

Fever is often a symptom of flu. Having a fever early in pregnancy increases the chances of having a baby with birth defects or other problems. Acetaminophen (Tylenol® or brand store equivalent) can reduce a fever, but you should still call your doctor or nurse and tell them about your illness.

If you have any of the following signs, call 911 and seek emergency medical care right away:

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest or abdomen
- Persistent dizziness, or confusion, or drowsiness.
- Severe or constant vomiting
  - Seizures
  - Not urinating
  - Severe muscle pain
  - Severe weakness or unsteadiness
  - Fever or cough that improves, but then returns or worsens
- Decreased or no movement of your baby
- High fever that is not responding to Acetaminophen (Tylenol® or brand store equivalent).

For more information about the flu or the vaccine, call: 1-800-CDC-INFO or visit: www.cdc.gov/flu/.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
• About 90% of kids eat too much sodium.
• Kids’ preferences for salty-tasting foods are shaped early in life.
• Parents and caregivers can help lower sodium by influencing how foods are produced, purchased, prepared and served.

The sodium kids eat comes from every meal and snack:
- 15% at breakfast
- 30% at lunch
- 16% at snack time
- 39% at dinner

Most of the sodium kids eat is already in the foods they get from:

- GROCERY STORES
- RESTAURANTS
- SCHOOL CAFETERIAS

... and not from the salt shaker

Learn more at heart.org/sodium

Source: http://www.cdc.gov/vitalsigns/children-sodium/

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10 SCHOOL PLANNING TIPS
When Your Child Has Food Allergies

Most children with food allergies are happy and attend school safely every day. That safety and happiness is the result of planning and persistence. A key to success is to work cooperatively with the school to form a partnership that will support your child along the way.

Start by asking a lot of questions before your child begins school or attends a new school.

Communicate with the school:
• Start early, if possible, in the spring before the next school year
• Find out if your school or school district has a school nurse
• Write to the principal and school nurse – tell them about your child’s food allergies and specific needs
• Request a meeting with key people to start the planning process
• Ask if the school/school district has any food allergy management policies in place
• Inquire about staff training
• Get copies of the forms you will need to have filled out before school starts:
  • Medication Authorization forms – these state if your child can self-carry and/or self-administer medicines at school and are required even if the medicine will be stored and administered by school staff
  • Special Dietary Meals Accommodation form – you will need this if your child will be eating meals provided by school
  • Emergency Action Plan (EAP) form – this tells caregivers what to do in case of an allergic emergency
  • Work with the school to create a written plan – this is typically either an Individualized Health Plan (IHP) or a 504 plan

Visit your child’s doctor before school starts to get the following:
• Required prescriptions for emergency medicine (epinephrine auto-injectors)
• Doctor signatures on the forms:
  • Medication Authorization
  • Special Dietary Needs Accommodation
  • Emergency Action Plan

Meet with the school nurse or representative before school starts to find out:
• When is the school nurse at your child’s school? (Full-time, part-time, available by phone, etc.)
• If the nurse is not at your school, who takes care of students during the school day if they are sick? How does the health room operate during a typical school day?
• Where will your child’s emergency medicine be kept unlocked during the school day?
• What experience has the school had with food-related emergencies?
• What are the procedures for shelter-in-place and evacuations? How are food and medicines handled during emergencies?
• How are food allergies managed on school buses and during after-school activities?
• How does the school deal with bullying about food allergies? Is there a zero-tolerance policy? Does the school educate students about food allergies?
• Does the school nurse train school staff on managing food allergies? Who and when?
Meet with the food services director to find out:
- How the school manages meals in the cafeteria, lunch area or classroom for students with food allergies
- How students with life-threatening food allergies will request meals with safe substitutions once you submit the signed Special Dietary Needs Accommodations form

Turn in all completed and signed forms and prescriptions before the first day of school:
- Medication Authorization forms
- Emergency Action Plan (EAP)
- Special Dietary Needs Accommodations Form – if your child will be eating meals provided by the school
- Epinephrine auto-injectors – must be in original package and labeled with your child’s name; be sure these will not expire during the school year

Make an appointment with the teacher to discuss classroom management of food allergies:
- Allergen control strategies in the classroom and during “specials” such as music or art
- Ingredient label reading
- Safe snacks (encourage fresh fruits and vegetables)
- Classroom celebrations (encourage non-food items)
- “No food sharing” rules
- Field trips (Who carries medicine? Can parents attend?, etc.)
- Cleanup after eating or anytime food is brought into the classroom
- Food in classroom activities (encourage non-food curriculum)
- Hand-washing practices before and after eating, or use of hand wipes (not hand sanitizer)
- Alerting substitute teachers about children with food allergies

Teach and encourage your child to build age-appropriate skills to manage food allergies:
- Reading food labels, avoiding foods without labels, not sharing food
- Hand-washing or hand wipes (no use of hand sanitizer)
- Self-carrying and how to use an epinephrine auto-injector (discuss readiness to self-carry with your child’s doctor)
- Knowing what their body might do if they were to have a reaction
- Telling a grownup if they start to have an allergic reaction at school
- Reporting any bullying or harassment by staff or students
- Sitting with their classmates in the cafeteria
- Riding the bus and/or going on field trips

Periodically check in with your child to ask how they feel at school.

Other items your child may need to store at school:
- Hand wipes
- Non-perishable foods for disasters or shelter-in-place situations
- Special snacks or a non-perishable lunch for occasions your child may need them
- Allergy-friendly school supplies

Work together to form a partnership with your child’s school:
- Document meetings and interactions via email summaries with key staff
- Choose your battles wisely and volunteer when possible
- Offer solutions whenever possible and collaborate with your child’s school
- Keep in mind that a friendly approach will help you get a positive result if conflicts start to happen
- Check in periodically with school staff to make sure the plan is working and your child is adjusting

Visit kidswithfoodallergies.org for more information about managing food allergies at school.