

# ***PSBH North***

## **2 ½ Year Exam**

### **Developmental Overview**

**Motor Skills:** Most children are walking with speed and agility. They are running and climbing. They can go up and down stairs alone. They are eager to explore every aspect of their environment. Safety remains an important issue, especially with respect to stairs climbing and objects within his/her reach. Please review childproofing to ensure it is adequate for your child's new skills. Hand-eye coordination can be enhanced with simple puzzles. Provide a variety of tactile experiences for your child – different textures, weights and shapes. Many children can use a cup and spoon well. Give your child a crayon or pen so he/she can scribble. As your child's control over his/her movement improves they will begin imitating increasingly complex maneuvers. Sit-on push toys and tricycles are great at this stage.

**Cognitive Skills:** Stranger and separation anxiety may persist. Temper tantrums may escalate as your child discovers his/her own will and becomes more expressive of likes/dislikes. Respond by ignoring them. Discipline should be prompt and consistent. Set firm limits and stick to them. Continue to use brief time out in a pack and play or other area that you can safely, briefly place your child and then walk away. Reinforce the concept of consequences by giving your child choices with respect to behavior by requesting that they stop the undesired behavior, then state "If you continue to do that, Mommy will put you in time out." Your child is observing you constantly --watch what you say and do. Allow opportunities to play with same age peers.

**Language Skills:** Receptive (understanding) skills are much more developed than expressive (speaking) skills at this age, but most children have a large "naming" vocabulary by now. If your child is not talking at all yet, further evaluation is warranted. At age two children begin to combine two words into phrases. By age three, they can use three word sentences. Reading aloud will help them build their language skills. Pacifiers should be eliminated.

### **Feeding**

Children will often experience "toddler appetite slump" as their metabolic needs decrease and activity increases. It is not unusual for toddlers to eat less than babies, even though they are bigger. Children may begin to show food preferences, often liking one food one day and refusing it the next. Be patient, keep mealtimes pleasant and offer small amounts of a variety of foods. Shift to "grazing" if your child is too busy to sit through family mealtime. Finger foods are best. Offer only high quality, healthy foods. Avoid the chicken nugget/french fry trap many parents fall into in their efforts to coax their picky eaters to eat. No juice. Offer whole or 2% milk or water. Your child should be off the bottle by now. Some children need fluoride supplements.

### **Safety**

Be aware of choking hazards. Crib mattress should be at lowest setting. Keep medications and other hazardous products well out of reach. Post poison control number by phones – 1-800-222-1222. Be aware of water safety – never leave child unattended in bath or near water. Protect against falls with gates and close observation. Avoid scald burns; keep hot water heater set at 120 degrees or less. Limit television exposure. Sunscreen/bug repellent. First dental visit should be at 3 years.

### **Immunizations**

Please review the vaccine information provided at the visit and contact our office with any concerns.  
*Next visit is at 3 years.*