



PATIENT EDUCATION

Caring for Your Five- to Seven-Year-Old

MAYO CLINIC CHILDREN'S CENTER



BARBARA WOODWARD LIPS
PATIENT EDUCATION CENTER

Mayo Clinic Children's Center

For more than 100 years, teams of physicians have cared for children at Mayo Clinic.

T. DENNY SANFORD PEDIATRIC CENTER MAYO EUGENIO LITTA CHILDREN'S HOSPITAL

Pediatric Sub-Specialties in the following areas:

Allergy and Immunology	General Pediatric and	Plastic and Reconstructive Surgery
Anesthesiology	Adolescent Medicine	Psychiatry and Psychology
Cardiology	Gynecology, Adolescent	Pulmonology
Cardiovascular Surgery	Hematology and Oncology	Radiation Oncology
Child and Family	Infectious Diseases	Radiology
Advocacy Program	Medical Genetics	Regional (Health System)
Community Pediatrics and	Neonatal Medicine	Pediatrics
Adolescent Medicine	Nephrology	Research
Critical Care	Neurology	Rheumatology
Dermatology	Neurosurgery	Sleep Medicine Center
Developmental and	Ophthalmology	Speech Pathology
Behavioral Pediatrics	Oral and Maxillofacial Surgery	Surgery
Emergency Medicine	Orthopedic Surgery	Urology
Endocrinology and Metabolism	Otorhinolaryngology (ENT)	
Gastroenterology and Hepatology	Physical Medicine and Rehabilitation	

Pediatric Specialty Clinics:

Adrenoleukodystrophy Clinic	Dana Child Developmental and	Metabolic Bone Clinic
Aerodigestive Clinic	Learning Disorders Program	Mood Disorders Clinic
Anxiety Disorders Clinic and	Dermatology Genetics Clinic	Neonatal Follow-Up Clinic
Intensive Therapy Program	Diabetes Clinic	Neuromuscular Clinic
Arrhythmia and Device	Eating Disorders Clinic	Pain Clinic
Placement Clinic	Eosinophilic Esophagitis Clinic	Pain Rehabilitation Center
Asthma Center	Epilepsy Clinic	Pediatric Diagnostic Referral Clinic
Attention Deficit Hyperactivity	Erythromelalgia Clinic	Pediatric Level 1 Trauma Center
Disorders (ADHD) Clinic	Facial Paralysis and	Plagiocephaly Program
Bariatric Surgery Clinic	Reanimation Clinic	Pulmonary Hypertension Program
Brain Injury Program	Feeding Program	Renal Stone Clinic
Brain Tumor Clinic	Fertility Preservation	Spina Bifida Clinic
Cerebral Palsy Clinic	Fetal Surgery Program	Spinal Deformities Clinic
Chemotherapy/Radiation	Friedreich's Ataxia Clinic	Sports Medicine Center
Long-Term Effects Clinic	Functional Movement	Thyroid Nodule/Cancer Clinic
Child and Adolescent Intensive	Disorder Program	Transgender Clinic
Mood Program (CAIMP)	Heart Failure Clinic	Transitions Program
Childhood Sarcoma Clinic	Hemophilia/Coagulopathy Clinic	Transplant Center
ComPASS (Palliative Care and	Hyperlipidemia Program	Travel Clinic
Integrative Medicine)	Immunodeficiency Disorders Clinic	Vascular Malformations
Congenital Heart Clinic	Inflammatory Bowel Disease Clinic	Velo-Pharyngeal
Constraint Induced Movement	Learning Disorders	Insufficiency Clinic
Therapy Program	Assessment Clinic	Voiding Clinic
Craniofacial Clinic	Long QT Syndrome Clinic	Weight Management Clinic
Cystic Fibrosis Center	Marfan Syndrome Clinic	

What's Inside

Introduction	2
Developmental Milestones	3
Mental and physical development.....	3
Social and emotional development	5
Teaching responsibility	6
Starting school.....	8
Teasing and bullying.....	8
Growth	9
Fitness.....	10
Nutrition	11
Feeding basics	11
Meal time	11
Snacks.....	12
Food allergy.....	12
Juice.....	13
Vitamin D and supplements	13
“5210 Every Day”	14
Health	15
Preventing illness	15
Immunizations.....	15
Cough and cold medicine.....	15
Fever	16
Taking your child’s temperature.....	16
Teeth	17
Sleep.....	18
Safety Concerns	19
Child safety seats.....	19
Preventing falls and injuries	21
Preventing burns	22
Preventing drowning	23
Preventing suffocation, choking, and poisoning.....	24
Preventing lead poisoning.....	25
Firearm hazards.....	26
Radon	26
Insects.....	26
Personal safety	27
Interacting With Your Child	28
Behavior management	29
A Final Word	30

Introduction

Between ages 5 and 7, children continue to develop a sense of who they are and what they are able to do. Talk to your child about how to make positive choices. Give your child opportunities to develop and test new skills. Offer patience and encouragement as your child builds self-confidence and becomes more independent.

Continue to set boundaries and guidelines for mealtime, bedtime, daily household chores, and anything else you feel strongly about. As your child continues to grow, learn, and discover, you will face new challenges.

The move from home to school is probably the biggest life-changing event for a young child. Fortunately, most schools have programs designed to help children make smooth adjustments from home to school. Also, many children have attended day care or pre-school, which may help them as they enter elementary school.

Use the following information as a resource during the next several years of your child's life. If you have questions about this information or your child, talk with your child's health care provider.



Developmental Milestones

Developmental milestones are skills or tasks that most children are able to do once they reach a certain age. However, each child is different. Each develops at a different rate. The time a child actually reaches each milestone can vary by quite a bit.

Talk with your child's health care provider about any concerns you may have about your child's development. Getting your questions answered can help you feel more confident about your role as a parent.

Mental and physical development

By age 5, a child usually is able to dress and undress without help. By about age 6, your child likely will learn to tie shoes.

Children at this age like to take their time when doing things. They may need to take time to plan and think through the steps that are part of a task. Or they may just like to do things at their own pace.

Physical skills vary greatly among 5- to 7-year-olds. Active play is important to maintain health and fitness. Active play also improves physical coordination and skills such as bouncing, throwing, and catching balls. The goal of active play at this young age is to have fun and develop basic skills. Don't focus on winning and losing.

Watching TV

Watching television contributes little to the language development of young children. It is linked to childhood obesity.

Limit screen time to no more than one to two hours a day. Find activities other than watching TV that you can do with your child. Reading, pursuing hobbies, and physical activities are good alternatives to TV watching.

If you choose to let your child watch TV:

- Watch TV with your child and talk about the shows.
- Don't let your child watch shows with violence or sexual behaviors.
- Never place a TV in your child's bedroom.

Learning disorders

Learning disorders aren't the same as mental or physical disabilities. Learning disorders do not reflect a child's intelligence. Instead, they affect a child's ability to complete a task or use certain skills, particularly in school.

Learning disorders can make it hard for a child to read, write, or do simple math.

Many children who have learning disorders struggle for a long time before they get help. This can affect a child's self-esteem and motivation.

There are many resources for children with learning disorders. Early diagnosis can help your child. Talk to your child's teacher and your health care provider if you have concerns.

Toilet readiness

By age 5, children should be fully toilet trained during the day. If your 5-year-old is wetting during the day, talk with your child's health care provider about your concerns.

Some nighttime wetting is still common at age 5. Nothing specific needs to be done to correct nighttime wetting at this age unless parents have concerns or wetting occurs frequently.

The "normal" number of bowel movements for a 5-year-old can vary from a few each day to a few a week. Soiling of underpants is common. However, if soiling happens because of large, infrequent bowel movements, discuss this with your child's health care provider. Providing additional fiber (fruits, vegetables, and whole grains) and fluids can help this problem. Encouraging toileting times (5 to 10 minutes after a meal), can also help this problem.

Social and emotional development

Five- to 7-year-olds continue to strive for independence. It is normal for them to test rules. Follow these guidelines as you set limits for your child:

- Use rules that are fair and reasonable. Don't punish your child for behavior that is part of normal development such as occasionally wetting the bed.
- Be gentle but firm. Use words your child understands. Briefly state the rule that was broken.
- Praise behavior that is positive and appropriate. Try especially hard to notice times when your child is being good. Give your child more positive responses than negative responses.

Children at this age are highly imaginative and get along well with friends their own age. It may seem your child has endless energy at this age.

You will be presented with many opportunities to enrich your child's life with sports, music, clubs, and activities. Be selective. Choose activities that are most appropriate for your child. Take care not to over-schedule your child. Carefully balance active and quiet time. All children need unscheduled, unstructured time to play and relax.

Group activities and playing with other children will help your child develop social skills such as taking turns, sharing, and following rules within a group.

As your child interacts with family and friends, be sure to praise your child for being cooperative and sharing.

Your child may begin to be curious about where babies come from and how boys and girls are different from each other. These are normal curiosities. Answer questions honestly and simply, using correct terms for body parts.



Sibling rivalry

Sibling rivalry is a normal, healthy part of childhood. Typically, younger children and those closer in age experience the most rivalry. Some of the following strategies may help you prevent or reduce sibling rivalry when it occurs:

- Avoid situations that encourage rivalry between children.
- Treat children as individuals. Emphasize each child's unique traits and accomplishments. Do not compare one child to another.
- Praise cooperative behaviors.
- Set specific getting-along rules.
- Teach alternatives to fighting. Encourage discussion.
- Give children responsibility for resolving conflicts. Allow them to work out solutions on their own.
- Do not overreact to sibling disputes or take sides.

When children learn to handle rivalry, they learn how to cooperate, problem-solve, and negotiate. These are important life skills for them to learn as they mature and grow.

Teaching responsibility

Adults play important roles in the lives of young children. Children develop close relationships with teachers, coaches, and other important adults in their lives. For this reason, a child may be upset when adults who are loved go through difficult times or changes.

Because children continue to look to and mimic adults, be mindful of your behavior. Think about what your child learns from watching you. Model the behaviors you want your child to learn. Treat your spouse or significant other with kindness and respect.

Because children at this age are so easily influenced, this is a good time to teach the value of compassion for others. Take your child along when your visit with residents at a senior citizen center. Invite your child to help make a meal or to rake leaves for someone in need. Encourage your child to donate outgrown toys and clothes to other children who might enjoy them. Build a sense of caring in your child. Look for ways you and your child can volunteer and help others in the community.

Consider giving an allowance on a regular basis. Discuss how much to save, spend, and donate.

Household chores

Children can help with age-appropriate household chores. Relax your standards to match the abilities of your child. Provide opportunities for success.

Before you help, give your child a chance to problem-solve and figure out how to do things independently. Children develop responsibility when they have meaningful ways to contribute to the family. Generously praise your child for responsible behavior.

The American Academy of Pediatrics advises that spanking a child is not an effective or recommended method of discipline.

Effective means of discipline include:

- **Time-out.** A child may, on occasion, need to be separated from an activity when their behavior is not acceptable. An appropriate length of time for a child to remain in “time-out” is about one minute for each year of age. That’s about 5 minutes for a 5-year-old. When the time-out is over, remind your child of the behavior that caused the time-out.
- **Logical consequences.** Consequences for a child’s behavior should relate to the behavior itself. For example, if a child is not kind to a playmate or sibling, the child will not be permitted to play with the playmate or sibling for a period of time and will need to play alone.
- **Loss of privileges.** You can take away toys that are not used correctly. You can turn off the TV if siblings begin to quarrel while they watch. These are examples of losing a privilege.



Starting school

Starting school can be an exciting time for the entire family, especially for your child who is learning new facts and skills. Predictors of school readiness include letter recognition skills as well as verbal skills. Help your child develop language skills that are important for success in school. Read to and with your child each day.

By age 5, many children are able to tell about their day in simple story format. Minor speech difficulties (such as correct pronunciation of “s” and “t”) are common. They are not a major concern at this age.

By age 6, children often recognize and can name letters of the alphabet and their sounds. Early reading begins with blending letter sounds to make words. Ability to read 15 or more common words and write letters and words is typical at this age. Most children are reading by age 8. If you or your child’s teachers have concerns about your child’s reading, learning, or development, talk with your health care provider.

Teasing and bullying

At some point, almost all children experience being teased or bullied. Your child first may experience this in school. For many children, being teased or bullied is temporary and can be handled without much difficulty. For others, it is more frequent. Some children are more vulnerable than others. Physical appearance or actions that are different from peers can make a child a target for bullies.

Teach your child that it is not acceptable to tease or bully others.

If your child tells you about being bullied, take action. For example:

- Record the details. Write down the date, who was involved, and what happened. Save screenshots, emails, and texts.
- Contact authorities. Seek help from your child’s principal, teacher, or the school guidance counselor.
- Calmly explain your concerns. Ask for help to solve the bullying problem. Keep notes on these meetings. Keep in contact with school officials. If the bullying continues, keep making contact.
- Ask for a copy of the school’s policy on bullying. Find out how bullying is addressed in your child’s school. Find out how teachers and staff members are required to respond to bullying.
- If your child has been physically attacked or otherwise threatened with harm, talk to school officials and call the police.

Tips to help your child develop a strong sense of self-esteem

- Spend time with your child. Talk about friends, accomplishments, and challenges.
- Be involved with your child's school. Go to school events. Meet your child's teachers.
- Meet the families of your child's friends.
- Encourage your child to join school and community groups.
- Help your child develop a sense of right and wrong. Talk about the pressure friends might bring to do risky things. There may be pressure to do dangerous physical dares. Or there may be pressure to act in a way that would hurt someone's feelings.
- Talk with your child about respecting others. Encourage your child to help those in need.
- Be affectionate and honest with your child.
- Do things together as a family.

Growth

Your child's health care provider continues to monitor growth to ensure your child is thriving and growing well.

Children between ages 5 and 7 continue to grow at a slow but steady rate. Speak with your child's health care provider if your child has a rapid gain in weight or has not gained weight for more than four months.

Fitness

Adding physical activity into your child's daily routine sets the foundation for a lifetime of fitness and good health.

School-age children need at least an hour a day of physical activity. Most of the hour should be either moderate or vigorous aerobic activity. Encourage active free play such as jumping rope, shooting baskets, or just running around outside.

Video games that involve high-intensity dancing, virtual sports, or other types of movement can be an option especially when outdoor fun may not be possible.

Get creative as you search for activities your child enjoys. Go on a nature hike, take family bike rides, and visit indoor climbing walls. Walk to the library, or turn on your child's favorite music and dance in the living room.

Exercise with your child to better your own health while you model good exercise habits.

Adding physical activity to your child's daily routine sets the foundation for a lifetime of fitness and good health.

Screen time

The American Academy of Pediatrics recommends limiting older children's recreational screen time to no more than two hours a day.

Too much screen time has been linked to obesity, sleep issues, and behavioral problems. It is also linked to lowered academic performance and less time for active play.

How to limit screen time

Start checking on screen time. Talk to your child about the importance of sitting less and moving more. Also, explain screen-time rules. Tell your child what will happen if they are broken.

Take simple steps to reduce screen time:

- Eliminate background TV.
- Keep TVs and computers out of your child's bedroom.
- Don't eat in front of the TV.
- Set school-day rules.
- Set a good example yourself. Be a good role model by limiting the time you spend "plugged in."

Nutrition

Feeding basics

Unless your child's health care provider gives you other instructions, give your child fat-free or low-fat milk.

Meal time

- Make mealtime enjoyable.
- Serve your child the food the rest of your family is eating.
- Eat with your child whenever possible. Mealtime is a wonderful time for your child to tell you about what happened that day. Ask your child about interests, concerns, and worries. Give your child plenty of opportunities to take part in the discussion.
- Appropriate table manners take time and practice. Model good table manners for your child.
- Avoid struggles about what and how much your child eats. Do not insist that your child eat some of each food served at a meal. Instead, provide healthy choices and help your child build decision-making skills.
- Do not insist that your child finish everything on the plate. Instead, provide small portions and offer seconds if your child is still hungry.
- Do not use food as a reward.



Snacks

Nutritious snacks can be an important part of your child's diet. Since children have smaller stomachs than adults, serve three child-sized meals on child-sized plates with a healthy snack between meals to meet your child's energy and nutrient needs.

Avoid offering snacks too close to mealtime. Offer snacks when your child is hungry between meals. Do not offer snacks when your child is bored or simply craving a particular food.

Although an occasional less nutritious snack is acceptable, snacks low in fat, sugar, and sodium are best. Suggestions for snacks include:

- Milk, cheese, and yogurt (regular or frozen).
- Pudding.
- Soft peeled fruit, canned fruit, or fruit cups.
- Soft, cooked vegetables.
- Muffins.
- Toasted whole-grain bread with peanut butter, jelly, or lean meat such as turkey
- Dry, whole-grain cereals and cereal mixes (Cheerios™, Honey Nut Cheerios™, Chex™, Kix™, cereal mixes).
- Pretzels.
- Whole grain crackers.

Food allergy

Food allergy reactions can range from mild to severe. They happen when the body reacts against proteins found in foods. Usually, this happens shortly after a food is eaten. The following foods cause most food allergies.

- Cow's milk
- Eggs
- Peanuts
- Soy
- Wheat
- Nuts from trees
- Fish
- Shellfish

As you start new foods, watch for signs of a food allergy or intolerance such as:

- Tingling or itching in the mouth
- Face, tongue, or lip swelling
- Wheezing
- Hoarse breathing
- Flushed skin or rash
- Hives or welts
- Diarrhea
- Vomiting

If any of these signs happen after you give your child a new food, stop giving the food. Tell your child's health care provider about the possible reaction. You may wish to keep a diary of new foods and any reactions.

Seek immediate medical attention if your child has difficulty breathing or loses consciousness.

Juice

Juice has little nutritional value for children.

Although juice contains some nutrients, it is high in calories and sugar, even when unsweetened. Children who drink juice are at increased risk for dental cavities. Children who drink juice are also at higher risk for obesity.

Eating the whole fruit is always a good choice.

Vitamin D and supplements

Vitamin D helps develop strong bones. Talk to your child's health care provider about giving your child a daily vitamin D supplement. Follow the instructions that come with the liquid supplement to give the correct dose.

Usually no other vitamin or mineral supplements are needed for children, unless you are told otherwise by your child's health care provider.

If you choose to give your child vitamins or supplements, talk about it with your child's health care provider. Treat vitamins and supplements as medication. Never refer to them as candy in front of your child. Make sure the vitamin or supplement given is right for your child's age and weight.

5210 Every Day

All children benefit from a healthy, balanced diet and regular physical activity.

The “5210 Every Day” campaign is part of a national health promotion campaign to increase healthy eating and active living.

It’s simple and easy to remember.

5

Eat 5 fruits and vegetables every day

- Fruits and vegetables provide vitamins and minerals that are important for growth and development in children.
- Try new fruits and vegetables multiple times.

2

Keep recreational screen time to 2 hours or less every day

- Too much screen time has been linked to obesity, lower reading scores, and attention problems.
- Keep TVs and computers out of your child’s bedroom.
- Turn the TV off during mealtime.

1

Include at least 1 hour or more of active play every day

- Regular exercise is an important part of a healthy life.
- Have fun outside.
- Take a family walk or bike ride.
- Take part in an organized sport such as youth baseball, soccer, or swimming.

0

Sugar-sweetened drinks

- Cut out sugar-sweetened drinks.
- Choose non-fat milk products.
- Drink more water every day.

Health

Preventing illness

School age children are at greater risk for illness than older children and adults. It is not unusual for children to get five or six colds a year. Each lasts about an average of 7 to 10 days. Colds are caused by viruses. Antibiotics do not help colds. To lower your child's exposure to illness:

- Teach your child to wash hands often, especially before eating and after using the toilet.
- Create a smoke-free environment. Children breathe in smoke whenever someone around them smokes cigarettes, pipes, or cigars. Secondhand smoke causes children to be at higher risk for serious health problems. These include ear infections, asthma, and upper respiratory infections. They also include other respiratory problems such as pneumonia.

Immunizations

Immunizations, also called vaccinations, are an important part of your child's care. They save lives and protect against the spread of disease. Not having your child immunized puts your child at risk to catch a dangerous or deadly disease.

Go to all scheduled well-child appointments. Keep your child's immunizations up to date. Read the information that you get at the well-child appointments.

If you have questions about immunizations, talk with your child's health care provider. All children should get a yearly influenza (flu) vaccination. This helps to prevent the flu and flu-related complications that may develop. Those who have close contact with your child also should get a yearly flu vaccination to help prevent passing this illness.

Cough and cold medicine

Over-the-counter cough and cold medicines are not recommended or safe for children younger than six years old. These medications have not been studied in children. Talk to your child's health care provider about the benefits of cough and cold medicine for children older than six years.

Other treatment options include honey, nasal suction, and saline rinse. They also include cool humidified air, drinking plenty of fluids, and taking ibuprofen or acetaminophen for pain.

If you are thinking of using natural remedies to soothe your child, talk with your child's health care provider first. Many natural remedies are thought to be safe but may in fact harm your child.

Fever

A fever occurs when the body temperature rises above normal – above 100.4 degrees Fahrenheit (F) or 38 degrees Celsius (C).

A fever is a symptom, not an illness by itself. Fevers can have many causes. The most common cause of fever in children is viral illness. Fevers related to viral illness usually last about two to three days.

Fevers can be a sign of a more serious illness. Follow these guidelines for when to contact your child's health care provider. But remember, these are general guidelines. If you are worried about how your child looks or acts, call your child's health care provider.

Call your child's health care provider during regular office hours if your child has:

- A fever for more than 48 to 72 hours without a known cause.
- A fever that returns after having gone away for 24 or more hours.
- Burning or pain with urination.
- Ear pain or ear pulling.

Call your child's health care provider right away or take your child to an emergency care facility if your child has:

- Difficulty breathing.
- Disorientation or confusion, or is not responsive or difficult to awaken.
- Stiff neck.
- Seizure.
- Signs of significant dehydration such as a dry mouth, sunken eyes, or minimal urination for 8 to 12 hours.
- Intense abdominal pain.
- Extreme irritability and is difficult to comfort or calm for more than one hour.
- Acts very sick.

Taking your child's temperature

You have several options for taking your child's temperature. When choosing a thermometer, consider the following options.

- **Digital thermometers.** These thermometers use electronic heat sensors to record body temperature. They can be used in the rectum (rectal), mouth (oral) or armpit (axillary). Armpit temperatures are typically the least accurate of the three.
- **Digital ear thermometers.** These thermometers use an infrared ray to measure the temperature inside the ear canal. Keep in mind that earwax or a small, curved ear canal can interfere with the accuracy of an ear thermometer temperature.
- **Temporal artery thermometers.** These thermometers use an infrared scanner to measure the temperature of the temporal artery in the forehead. This type of thermometer can be used even while a child is asleep.

Digital pacifier thermometers and fever strips are not recommended.

Safety tips

Carefully read the instructions that come with the thermometer. Before and after each use, clean the tip of the thermometer. Use rubbing alcohol or soap and lukewarm water and then rinse with cool water. If you plan to use a digital thermometer to take a rectal temperature, then also get another digital thermometer to use by mouth. Mark each thermometer, and don't use the same thermometer in both places.

For safety — and to make sure the thermometer stays in place — never leave your child alone while you take their temperature.

- **Oral temperature.** If your child has been eating or drinking, wait 15 minutes before you take a temperature by mouth. Turn on the digital thermometer. Place the tip of the thermometer under your child's tongue toward the back of the mouth. Ask your child to keep their lips closed. When the thermometer signals that it is done, remove it and read the number.
- **Armpit temperature.** Turn on the digital thermometer. When you place the thermometer under your child's armpit, make sure it touches skin — not clothing. Hold the thermometer tightly in place until the thermometer signals that it is done. Remove the thermometer and read the number.
- **Ear temperature.** Turn on the thermometer. Gently place the thermometer in your child's ear. Follow the directions that come with the thermometer to be sure you insert the thermometer the proper distance into the ear canal. Hold the thermometer tightly in place until the thermometer signals that it is done. Remove the thermometer and read the number.
- **Temporal artery temperature.** Turn on the thermometer. Gently sweep the thermometer across your child's forehead. Remove the thermometer and read the number.

When you report a temperature to your child's health care provider, give the reading and explain how you took the temperature.

Teeth

Help your child to brush their teeth at least twice daily.

Toothpaste with fluoride is recommended for all children. Teach your child to use only a very small amount, about the size of a pea.

Over-the-counter fluoride rinse is not recommended for children younger than six years. Children younger than six years may swallow high levels of fluoride. Talk to your child's dentist about the benefits of fluoride rinse for children older than six years.

Talk to your child's health care provider about fluoride supplements if your child does not drink water that contains fluoride.

Limit sugary foods and drinks in your child's diet. To help prevent tooth decay and cavities, do not give your child soda pop. Do not let your child carry around a cup of milk or juice. Constant sipping adds to the time teeth are in contact with these fluids. This increases the risk for tooth decay.

Dental visits

Talk to your child's health care provider and your dentist about when to schedule dental visits. Recommendations may vary depending on practice.

Sleep

Sleep is important for a growing child, especially on school nights.

- Aim for 9 to 11 hours of sleep each night.
- Keep a regular bedtime routine.
- Plan a quiet time of at least 30 minutes before bedtime.
- Children in this age range take about 15 to 30 minutes to fall asleep.

Nightmares are common among school-age children. They are characterized by unpleasant or frightening dreams that take place during REM or dreaming sleep. When a child awakens from a nightmare, they are likely to be frightened. Usually a child is able to recall the dream but may have difficulty distinguishing between the dream and reality.



Safety Concerns

Child safety seats

Your child must be in an approved car seat at all times when in a vehicle.

In a vehicle, the safest place for your child is in the back seat, in the middle if possible. Never put your child in the front seat. It is even more dangerous if your car has airbags. Airbags can cause serious harm or death to children.

Children who weigh 40 pounds or less are best protected in a child passenger safety seat with a full harness. Do not switch a child to a booster seat until your child reaches the upper weight and height limits for the safety seat as set by the manufacturer. When your child outgrows these weight and height limits, use an approved booster seat.

Children this age should not ride in a car using a seat belt alone. Children should be secured in booster seats until they are 4'9" tall and between 8 and 12 years of age. Taking your child out of a car seat or booster seat too early greatly increases the risk of injury or death in a motor vehicle accident. Children younger than 13 years should ride properly restrained in the back seat.

- Always read and follow the manufacturer's instructions for your car seat. If you do not have instructions, contact the manufacturer. The address and phone number are on a label on the seat.
- Follow the instructions in your vehicle owner's manual about using car seats. Some manufacturers' instructions may be available on their web sites.
- Do not use child safety seats that have been in a crash or that you do not know the history of.
- Most car seats expire after 6 years from the date of manufacture. An expiration date should be printed somewhere on the seat. When in doubt, call the manufacturer and ask for this date.
- Secure the harness straps when your child is in the car seat.

Car seat instructions can be confusing. On average, four out of five car seats are not installed correctly. If you have questions or would like more information about the use of your child's car seat, ask your child's health care provider. Find out who you can contact in your community to get more information. Look for a public agency in your area that inspects child safety seats. You also can attend a child passenger safety class.

Never put a child safety seat in the front seat.

Never leave your child alone in a vehicle.

Be a good role model and always wear your seatbelt.



Preventing falls and injuries

Injuries that come from accidents or abuse are the leading cause of death in children. Most injuries can be prevented. Often injuries happen because parents are not aware of what their children can do. Observe your child and think about what might get your child into trouble. Remove potential dangers.

- Make sure windows are closed or have screens that cannot be pushed out.
- Always walk behind your car before you back out of your driveway to be sure your child is not there. You may not see your child behind your car in the rearview mirror or camera.
- Never leave a child of this age home alone.
- Supervise your child while crossing the street. Streets are a major safety hazard for 5- to 7-year-olds. Practice safe street crossing together and set a good example. If your child walks to school, it's best if they walk with an older child or adult. Teach your child to follow the directions of school crossing guards.
- If your child takes a school bus, make sure you or an adult remain with your child at the school bus stop for safety. Your child could be hit by the school bus or a passing vehicle. Children should cross in front of the school bus and follow the bus driver's directions. Teach children to watch out for cars that pass the bus illegally.
- Talk with your child about how to dial 9-1-1 for emergency assistance.
- To prepare for kindergarten, teach your child your home phone number and address.
- If you choose to keep a gun, keep it unloaded and in a locked place. Keep it separate from ammunition. Ask if the homes where your child visits or is cared for have guns. Ask how they are stored.
- Teach your child to stay away from unfamiliar animals and to tell you if a strange animal is nearby. Teach children to respect animals and never to tease or startle them. Animals that are eating, sleeping, caring for their young, or startled may bite.

Bike helmets

If your child rides anything with wheels, put a helmet on your child. This includes tricycles, bicycles, scooters, skateboards, roller blades, and wagons. It also includes riding in a pull-behind cart or in a seat that is attached to a bike. The helmet should meet the bicycle helmet safety standards of the Consumer Product Safety Commission (CPSC).

The helmet should be worn squarely on top of the head. It should cover the top of the forehead. If it is tipped back, it does not protect the forehead. The helmet fits well if it does not move around on the head or slide down over the eyes when it is pushed or pulled. The chinstrap should be adjusted to fit snugly.

Preventing burns

Burns are a leading cause of childhood injury. Follow these precautions to protect your child:

- Set your home water heater at or below 120 degrees Fahrenheit or 48.8 degrees Celsius.
- Teach your child about safety in the kitchen. Practice kitchen safety when cooking with your child. Hot liquids, foods, and grease can spill on your child and cause serious burns.
- Use the back burners on the stove with pan handles turned inward whenever possible.
- Keep your child away from hot parts on lawn mowers and motorcycles.
- Teach your child that matches and lighters are dangerous. Keep them out of reach.
- Carefully supervise your child when near a fireplace, outdoor campfire, or grill.

If your child gets burned, run cold water right away over the burned area for 10 minutes. Then loosely cover the burn with a bandage or clean cloth. Call your child's health care provider right away for all burns.

Frequently check that your smoke and carbon monoxide detectors are working. Change the batteries at least once a year on a date you will remember. For example, change the batteries when daylight saving time begins or on your child's birthday. Have a working fire extinguisher in your home.

Make sure your child's sleepwear is not flammable, which means it cannot easily catch fire. Practice a fire escape plan.



Sun safety

Protect your child from sunburn with clothing and a hat.

At least 30 minutes before sun exposure, apply sunscreen to your child's face, ears, neck, backs of hands, tops of feet and any other areas not covered by clothing or a hat.

Use a broad-spectrum sunscreen with a sun protection factor (SPF) of at least 15 or higher. Rub it in well. Reapply every 2 hours and after swimming. Apply lip balm that contains sunscreen to lips.

It is best to avoid sun exposure between 10 a.m. and 2 p.m.

Preventing drowning

A child can drown in less than two inches of water. Never leave your child alone in or near a lake, pond, or swimming pool.

If you have a swimming pool, put a fence that is at least four feet high on all sides of the pool. Be sure each gate latches by itself. Most children drown when they wander out of the house and fall into a pool that is not fenced off from the house. It only takes a few minutes for a child to get out of the house and fall into a pool.

If your family enjoys boating and spending time near water, make sure you and your child wear life jackets. Children should wear life jackets at all times when on a boat or near a body of water. Check the label on the life jacket to be sure it meets U.S. Coast Guard or state regulations. The life jacket should be comfortable and the right size for your child. It should always be worn as instructed with all straps belted. However, wearing a life jacket does not take the place of adult supervision.

Blow-up water wings, toys, rafts, and air mattresses should not be used as life jackets. You may consider swimming lessons for your child, but an adult should always supervise children while swimming.

Preventing suffocation, choking, and poisoning

Children have small airways and can easily choke. To prevent suffocation and choking:

- Insist that your child stay seated when eating.
- Follow the age recommendations on toy packages.

Cords from window blinds and draperies can strangle your child. Tie cords high and out of reach. Do not knot cords together.

What should I do if my child chokes?

To be prepared in case of an emergency, take a class on cardiopulmonary resuscitation (CPR) and choking first aid for children. Encourage everyone who cares for your child to do the same.

If your child is able to cough, cry, or make noises with force, do not interfere. Keep watching your child closely and be ready to help if needed. Alert someone that your child is choking.

If your child is choking and can't breathe:

1. Position yourself so that you stand behind your child's body.
2. Make a fist with one hand and place your fist so that the thumb of your fist is in the middle of your child's tummy, just above the belly button. Use your other hand to grasp your fist.
3. Press your fist into your child's tummy with a quick upward motion (abdominal thrust). Repeat this motion until your child is able to breathe.
4. If your child becomes unconscious (not able to respond), begin CPR or call 911.
5. If doing CPR, look into your child's mouth each time before you give a breath. If you see an object, use your finger to carefully remove it to avoid pushing the object into the throat. Do not put anything into your child's throat or mouth unless an object can be seen and carefully removed. Continue doing CPR until your child starts coughing, crying, or speaking. **Call 911 after 2 minutes of CPR if someone has not already called.** Then continue doing CPR.

To prevent poisoning

Many ordinary things in your house can poison your child.

- Keep household products, such as detergent pods, bleach, cleaners, chemicals, and medicines, completely out of sight and reach of your child.
- Install safety latches on drawers and cupboards.
- Be aware that some household plants are poisonous. Keep all plants out of your child's reach.

If you think your child has swallowed something poisonous, call the Poison Control Center right away. Post the Poison Control Center phone number where your entire family can find it: 1 (800) 222-1222.

Preventing lead poisoning

Lead poisoning happens when too much lead builds up in the body. It can cause learning, behavior, and health problems in children.

Your child's health care provider may give you a questionnaire to review your child's risk factors for lead poisoning. If exposure to lead is suspected or your child is thought to be at higher risk for lead exposure, your child will have a blood test.

Children less than six years who spend time in homes built before 1978 are at greatest risk for lead poisoning. These homes may have chipping or peeling paint or are being renovated. Lead was allowed in household paint until 1978. The older your home is, the more likely it contains lead-based paint. Paints containing up to 50 percent lead were used on the inside and outside of homes through the 1950s.

Lead also can be found in soil around homes and apartment buildings. Children may come in contact with the lead by playing in the dirt.

Some toys put children at risk for exposure to lead. Older or antique toys and collectibles passed down through generations may have lead paint. This can put children at risk for lead exposure. Watch for peeling or chipped paint on toys. Do not allow your child to play with toys that have peeling or chipped paint.

Talk to your child's health care provider if you have concerns about lead in your home.

Firearm hazards

Children in homes where guns are present are in more danger of shooting themselves or being shot by friends or family members than of being injured by an intruder.

It is best to keep all guns out of the home. If you choose to keep a gun, make sure it is not loaded. Keep it in a locked place. Keep it separate from the ammunition. Ask if the homes where your child visits or is cared for have guns. If so, find out how they are stored.

Radon

Radon is a gas that happens naturally from the breakdown of uranium in soil, rock, and water. It has no odor or color. Radon can enter homes through cracks or openings in walls or foundations and become part of the air you breathe. It is the leading cause of lung cancer among nonsmokers.

The only way to know whether your home has high levels of radon is to test. Test kits can be found at city and county health departments, home improvement stores, and hardware stores.

If you have unsafe levels of radon in your home, there are ways to lower the risk.

To find out about radon testing or what you can do if you have radon in your home, contact your local department of public health or a local chapter of the American Lung Association.

Insects

Keep your child out of areas where there are mosquitoes. If that is not possible, use screens and clothing to protect your child. If that is not possible, insect repellent can be applied to children.

DEET is a chemical used in insect repellents. Choose an insect repellent that contains 10-30% DEET. Use just enough repellent to cover your child's clothing and exposed skin. Do not put insect repellent on your child's face or hands. Wash your child's skin with soap and water to remove repellent after you return indoors.

Personal safety

Many parents worry about their child being abducted. Five- to 7-year-olds can be very trusting and eager to please, which makes them vulnerable.

Teach your child never to go anywhere with a stranger. Teach your child not to go with someone they may know unless arrangements have been made ahead of time. Consider adopting a family password for personal safety. The password can be a word or phrase that you and your child agree on. The word can help children determine who they have permission to go with and who might be likely to deceive, exploit, or injure them. A password can be any word or phrase. Whatever the password, your child should never go with someone who does not know the password.

Teach children early about good and bad touches. Do so in a calm manner. It is important to teach your child the proper name for body parts. This gives your child the language to ask questions and express concerns.

Children should be taught that some body parts are private. Private parts of the body are those that a bathing suit covers. No one has the right to look at or touch a child's private parts or to make a child look at or touch another person's private parts. Tell your child to say "no" to such requests and to tell you or another trusted adult if this happens.

Emphasize that touching private parts is never a secret. Sometimes, however, people such as health care providers or parents do need to look at or touch private parts.



Interacting With Your Child

Engage with your child as they learn and grow:

- Provide meaningful ways your child can contribute to the family and participate in family activities such as helping to plan and prepare dinner.
- Establish routines, rituals and family traditions.
- Visit the library regularly.
- Continue to read and sing with your child.
- Encourage storytelling and imaginative play.

Build positive communication with your child:

- Be available.
- Listen attentively and show empathy. Be a “good sender.” In other words, make sure what you say, your tone of voice, and what you do all send the same message.
- Use feeling words to praise your child’s behavior. These are words that tell your child how their behavior affects you or others.
- Use “I” statements to tell your child what displeases you about a behavior.
- Be a good role model. Children will copy your manner of communicating. Use feeling words rather than shouting, name-calling, or doing something hurtful to model for your child how to use words to communicate strong feelings.

Behavior management

Behavior management teaches your child limits through loving care. Establish rules and limits your child needs to stay safe and keep others safe, and then consistently enforce them. All of your child's caregivers should use the same set of rules.

It is easy to set up a negative relationship without meaning to. Then parents feel that all they do is correct their child. Praise your child for good behaviors. Let your child know you want those behaviors to continue. Be careful not to tell your child they are "good" or "bad." It is what your child is doing that you like or do not like, not your child.

The word "no" can lose its effectiveness if you use it too often. Limit the use of "no" to the most important times such as when your child may get hurt or is hurting others. Allow no hitting, biting, or aggressive behavior.

Praise your child for being so special to you. Continue to hold and cuddle your child. Help your child express joy, anger, sadness, fear, and frustration. Help your child develop self-quieting behavior.

Set a good example

Your child learns by watching you, even when you do not realize it. Your child will copy your behaviors. Therefore, be a good example for your child:

- Get regular activity and exercise.
- Select and eat healthy foods.
- Respond calmly when faced with challenging situations.
- Don't smoke.
- Wear a seat belt.
- Wear a helmet when biking.

A Final Word

Enjoy your child during this time. Give your child your time, attention, and unconditional love.

Follow the schedule your child's health care provider suggests for well-child exams.

Well-child exams or regular checkups focus on your child's growth and development. They let you get to know your child's health care provider. Write down any questions or concerns you may have as you get ready for each well-child exam. Talk with your health care provider about any concerns you may have.

Your child will receive immunizations as scheduled by their health care provider. Unless your child has special needs or concerns, lab tests aren't needed at most well-child exams.

If you have any questions or concerns about this information or anything that concerns your child, contact your child's health care provider. Together, you will help your child thrive and be healthy.

Notes



BARBARA WOODWARD LIPS PATIENT EDUCATION CENTER

Mrs. Lips, a resident of San Antonio, Texas, was a loyal Mayo Clinic patient of more than 40 years and a self-made business leader who significantly expanded her family's activities in oil, gas and ranching. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo honors her generosity, her love of learning, her belief in patient empowerment and her dedication to high-quality care.

This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.

MAYO CLINIC | 200 First Street SW | Rochester, MN 55905 | mayoclinic.org

©2017 Mayo Foundation for Medical Education and Research. All rights reserved. MAYO, MAYO CLINIC and the triple-shield Mayo logo are trademarks and service marks of MFMER.

MC5354-09rev0917