

# 11-12 Year Check Up



**Cedar Park Pediatric  
& Family Medicine**  
Complete Medical Care for your Family  
[www.cedarparkdoctors.com](http://www.cedarparkdoctors.com)

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ BLOOD PRESSURE \_\_\_\_\_

## RECOMMENDATIONS FOR TODAY

### Immunizations

The following vaccinations will be provided today as long as your child is up-to-date on their vaccines:

- TDaP
- Gardasil
- Menactra
- Influenza (during flu season)

It is common for children to experience some discomfort from today's vaccines.

The following are **NORMAL** side effects:

- Soreness, redness, swelling, tenderness where shot is given
- Fever (usually low grade)

For **relief**, you may apply ice for the first 24 hours and give Tylenol or Motrin.

### Should your child experience:

Streaking at the site of injection, difficulty breathing, hoarseness, wheezing, swelling of the throat, weakness, fast heartbeat, dizziness, or hives **CONTACT THIS OFFICE IMMEDIATELY 512-336-2777.**

### Information about Menactra and Gardasil:

**Menactra** is a vaccine that is for meningitis. Meningitis is a serious illness that is often caused by bacteria. Even though these meningococcal infections can be treated by drugs, many adolescents may suffer permanent consequences or even death. The Menactra vaccine is recommended for all teens ages 11-12.

**Gardasil** is the Human Papillomavirus (HPV) vaccine which is recommended for all children 11-12. Gardasil protects against 9 major types of HPV. HPV is the most common sexually transmitted virus in the United States. While most HPV infections do not cause symptoms, some strains **may cause genital warts, cervical cancer, throat cancer, and penile cancer.** This vaccine is recommended at age 11 because it is important for the child to become vaccinated **BEFORE** their 1<sup>st</sup> sexual encounter (before they have been exposed to the virus). While your child will probably wait many years before engaging in their 1st sexual contact, their partner may not have. By giving the vaccine now your child will only need two doses. If you wait until your child is over 15 years, they will require 3 doses. For more information, please visit [www.cdc.gov](http://www.cdc.gov)

### Other Recommendations

- TB screening
- Vision screen
- Hearing screen (12 year)
- Adolescent Risk Questionnaire (12 year)

# NUTRITION

Nutrition is very important to your adolescent’s growth development, and health. Your child is moving into a period of dramatic growth and change. He needs to eat well during this time. It is a parent’s duty to provide nutritious foods and to set a good example in their own eating habits.

## DIETARY GUIDELINES

The USDA 2015-2020 Dietary Guidelines recommend a shift to a healthy diet that includes:

1. Nutrient dense foods such as a variety of fruits, vegetables, whole grains, & fat-free or low-fat milk and milk products.
2. Lean meats, poultry, fish, beans, and eggs.
3. Decreased intake of saturated fat, trans fats, cholesterol, salt & added sugar.
4. Half of grains offered should be whole grains.
5. Drink water instead of sweetened drinks or juice, and switch to fat free (skim) or 1% milk.

This report also emphasizes the need for **daily exercise**. All children and adolescents should spend at least an hour a day in moderately vigorous exercise.

The U.S Department of Agriculture publishes dietary guidelines of foods important for a healthy, balanced daily diet. The following is a modification of the 2015-2020 USDA dietary guidelines for a child aged 11-12 years.

Food Groups	Daily Recommendation	Tips
<b>Grains:</b> (at least 1/2 should be whole grain)	Males: 5-9 oz Females: 5-7 oz	One ounce is considered: <ul style="list-style-type: none"> <li>▪ A slice of bread or</li> <li>▪ A cup of dry cereal or</li> <li>▪ Half a cup of cooked rice, pasta, or cereal</li> </ul>
<b>Vegetables:</b> (eat more dark green and orange vegetables)	Males: 2-3 cups Females: 1.5-3 cups	One cup is considered: <ul style="list-style-type: none"> <li>▪ A cup of cooked/raw vegetables or</li> <li>▪ A cup of vegetable juice or</li> <li>▪ 2 cups of green leafy vegetables</li> <li>▪ 1 cup of cooked dry beans or peas</li> </ul>
<b>Fruits:</b> (eat a variety of fruits, go easy on fruit juices)	Males and Females: 1.5-2 cups	One cup is considered: <ul style="list-style-type: none"> <li>▪ A cup of fruit (fresh, frozen or canned) or</li> <li>▪ One half cup of dried fruit or</li> <li>▪ A cup of 100% fruit juice (limit to 6oz/day)</li> </ul>
<b>Milk and Milk Products:</b> (preferably low-fat)	Males and Females: 3 cups	One cup is considered: <ul style="list-style-type: none"> <li>▪ A cup of milk or yogurt or</li> <li>▪ 1 ½ ounces of natural cheese or</li> <li>▪ 2 ounces of processed cheese</li> </ul>
<b>Meat and Beans</b>	Males: 5-7 oz Females: 4-6 oz	One ounce is considered: <ul style="list-style-type: none"> <li>▪ An ounce of meat, poultry or fish (4 oz is about the size of a deck of cards)</li> <li>▪ ¼ cup of cooked dry beans or</li> <li>▪ One egg or</li> <li>▪ A tablespoon of peanut butter or</li> <li>▪ ½ ounce of nuts or seeds</li> </ul>

## **Bone Health**

The childhood & teen years are a critical time for bone formation. Between 11 & 18 years, 40% of a person's bone mass is accumulated. Scientists are finding that if bones are not developed well during these growth years, catch-up later in adult life is NOT possible. If your child does not have adequate calcium intake at this age, he will be at risk for osteoporosis (weak bones) as an adult and he may even be at a higher risk for fractures now.

The recommended daily intake of calcium for children 9 to 18 is 1300 mg. Make sure that your child's diet provides this amount of calcium. Current surveys indicate that calcium intake has been steadily decreasing in our children over the past 2 decades. Most adolescents only get 400-800 mg of calcium a day, with girls consuming the least. Milk & milk products are the best sources of calcium. Calcium in green leafy vegetables is poorly absorbed.

If your child does not consume enough calcium in his diet, you may consider a calcium supplement. There are different types of calcium supplements. Supplements in the form of calcium lactate (not recommended for lactose intolerant people) or calcium carbonate are well absorbed. Avoid supplements made with dolomite or bone meal because they may contain lead & other trace elements that are not good for your child. If you are giving your child more than 500 mg calcium a day, split the dose. More than 500 mg of calcium supplements at a time is not well absorbed by the body. Weight-bearing exercise such as most sports (not swimming), weight training, and running are also important for developing and maintaining strong bones. Foods that are high in sodium, such as most fast foods, chips and most prepared foods, increase calcium loss and are detrimental to bone development.

<b>Food</b>	<b>Amount</b>	<b>Calcium (mg)</b>
<b>Dairy Products</b>		
Milk	1 cup	300
Yogurt	1 cup	300
Cheese, natural or processed	1 ounce	200
Cottage Cheese	¼ cup	60
Cream Cheese	1 Tbsp	10
Ice Cream	½ cup	110
<b>Meat and Other Proteins</b>		
Meat, poultry, fish	3 ounces	20-20
Canned fish with bones	3 ounces	250
Egg	1	30
Cooked dry beans	½ cup	70
Nuts and seeds	2 Tbsp (1 oz)	20-40
<b>Grains</b>		
Bread	1 slice	25
Calcium Fortified Bread	1 slice	160-200
Cereal, dry	1 cup	15
Pasta	½ cup	15
<b>Vegetables and fruit</b>		
Cooked vegetables	½ cup	20-40
Green leafy vegetables	1 cup	100
Fruits	½ cup	20-40
Orange juice w/ added calcium	1 cup	300

## Is my child overweight/obese?

Childhood obesity is increasing at an alarming rate in the United States. Obesity is associated not only with significant health problems during childhood, but is also a risk factor for medical problems in your child's adult life. Medical problems that can be seen in obese children include high cholesterol, high blood pressure, diabetes, obstructive sleep apnea, depression, and low self-esteem.

Body mass index (BMI) is widely used to help define overweight & obese children. It is the most effective tool to assess overweight & obese children because it correlates with body fat. It is a ratio of weight to the square of height and varies for age & gender. A BMI between the 85<sup>th</sup> and 95<sup>th</sup> percentile for age & sex is considered overweight, and a BMI above the 95<sup>th</sup> percentile is considered obese. BMI will be calculated at your child's well visit. Please discuss any concerns with your provider.

### **TIPS FOR HEALTHY EATING**

#### **Five-A-Day Rule**

Your child (and you) should have at least 5 servings of fruits & vegetables a day. Think of this "rule" every day as you plan your family's meals and snacks. Make sure every meal has one or both of these food types.

Tips include:

- Make a big salad at the beginning of the week and serve salad with every evening meal
- Serve at least 1, preferably 2 vegetables at every evening meal.
- Have fruit available and in view in your kitchen at all times.

Following the "Five-A-Day Rule" is the best way to teach your child how to eat for life & prevent major medical problems such as obesity, heart disease, high blood pressure, and some cancers.

#### **Eliminate Soft Drinks (liquid candy) from your home.**

Soft drinks are empty calories & the nutritional equivalent of candy. Do not have soft drinks in your home. Sport drinks are nutritionally equivalent to soft drinks. Offer your child water or low-fat milk (skim or 1%) between meals & with snacks.

#### **Healthy Snacks**

With their busy schedules many middle & high school children have erratic eating habits. Help your child maintain good eating habits. Have snacks readily available that are low in fat & sugar and are high in vitamins, fiber, and protein. Select fresh and dried fruits, 100% fruit juices, raw vegetables, nuts, cheese, whole grain crackers, and yogurt. Limit poor quality food such as candy, chips, cookies and soft drinks.

- Do not skip meals & be sure that your child eats a large nutritious breakfast to help her start the day.

## **Prevention of Eating Disorders**

Through the media we are inundated with unrealistic images and messages that stress extreme thinness as good and desirable. This pressure to be ultra-thin can lead to unhealthy and destructive behaviors and even eating disorders. Despite these pressures from the media, eating disorders can be prevented and parents can play a key role in this process. The following are some ways to create a healthy environment for the growth of your child's self-esteem and prevent negative self-destructive behavior:

- Give your family the gift of a healthy role model. Get comfortable with your own body no matter what size or shape it is. Never criticize your appearance or for that matter anyone else's appearance. This only teaches kids to be overly concerned about externals and critical of their own bodies.
- Emphasize the importance of fit and healthy bodies, not thin bodies.
- Praise children for who they are, their personal qualities and achievements – not how they look.
- NEVER DIET. The three most powerful risk factors for the development of eating disorders are (1) a parent who diets, (2) a sister who diets and (3) a friend who diets. Dieting does not work and sends a dangerous and unrealistic message to kids about quick-fix solutions. Instead focus on nutritious eating and fitness.
- Talk to your child about normal body changes with puberty. In particular, womanly curves are necessary for healthy childbearing in the future.
- Make mealtime enjoyable and relaxing. Don't forbid certain foods or become obsessed with too much attention on calorie counting.
- Talk to your child about unrealistic images they see in magazines and on TV. Inform them that some models have to resort to plastic surgery and eating disorders to achieve their "look".
- For more information go to [www.anred.com/prev.html](http://www.anred.com/prev.html)

If you have concerns that your son or daughter may be experiencing some early signs of an eating disorder, please schedule an appointment with your medical provider. Early detection and intervention is vital in promoting recovery.

## **DEVELOPMENT**

### **Puberty and Sexual Development**

#### **Females:**

For most girls in the US, breast development begins between 9 & 11 years. As the breasts grow, pubic hair will begin to appear. The 1<sup>st</sup> menstrual period occurs about 2 years after breast development begins, but periods may be irregular for the first 1-2 years. There is a broad range of normal timing for puberty. Consult your child's provider if your teenage girl has not started breast development by age 13 or has not had her 1st menstrual period by age 16.

#### **Males:**

For most boys, puberty begins with enlargement of the scrotum & the lengthening of the penis, usually between 10-12 years old. Pubic hair appears as the penis and scrotum enlarge. There is a broad range of normal timing for puberty. Consult your son's provider if puberty changes do not start by age 14.

Your teen may have many questions about his body changes, but he may be embarrassed to discuss these questions with you. Unfortunately, many teens gain information from their friends and most of what they learn from them may be inaccurate or wrong. Therefore, it is important for you to ensure that your teen learns correct information from you & that he/she feels comfortable approaching you with questions.

Bring up the subject with your child & discuss changes in an open manner. Using books & other educational materials may be helpful. Telling your child that puberty changes are normal can be very reassuring. Discuss issues of sexuality with your teenager openly and honestly. Birth control, sexually transmitted disease prevention, AIDS information, & handling peer pressure regarding sexual activity are areas which your teen needs more information.

You must spend time talking about these subjects with your teenager. Let them know your feelings and values. Identify any misinformation your teenager may have & answer her questions. Even if you have already discussed these subjects, do not stop now. Keep the lines of communications open. Discussing sex with your child is not a one-time event, but rather, it needs to be an ongoing dialogue

### **Physical Growth**

During this period, your child will grow more quickly than any time since the 1<sup>st</sup> year of life.

**Boys:** In the year of greatest growth, a boy will gain up to 4 or 5 inches in height. By the time his growth spurt is over, he would have grown about 8 or more inches. Boys may gain 40 pounds, (mostly muscle). The voice box (larynx) in boys becomes larger causing the voice to “crack.” Hair begins to grow in the armpits & legs.

**Girls:** The average height gain in females during their peak year is approximately 3 inches. After menstruation begins, the growth rate for girls slows down & most girls stop growing in height about 2 years after their 1<sup>st</sup> period. Girls may gain 25 pounds by the end of puberty. Hair begins to grow in the armpits & legs.

Many human organs (such as the heart, liver, kidneys, & digestive tract) become larger. At the same time, many glands are changing- some increasing their activity, others becoming less important. Sweat glands change. Teenagers begin to need deodorant daily & will need to pay more attention to their body hygiene.

### **School, Sports, Peer Relationships**

Middle school is an important transition period. Your teenager will be expected to take more responsibility for his own work, demonstrate maturing organizational skills, and be challenged by a variety of subjects. Continue to be involved in your teenager’s education. Meet the teachers & find out their expectations for your child’s work and classroom behavior. If you feel that your child is having difficulties, discuss your concerns with your teenager and his teacher. If you are concerned about a learning disability, ask the teacher (or school counselor) to have your child tested to see if he is eligible for special education services. It is a good idea for your child to have a complete check-up to assess for any medical problems that could be affecting your child’s learning.

Encourage your teenager to exercise & be active daily. Your adolescent may be interested in an organized sports program or may find an individual sport or activity that she enjoys. Since your teenager is growing & developing quickly, the type of exercise your adolescent participates in may vary with her strength, weight, muscle development, & coordination. Be involved with your child to find what sport or physical activity best suits her personality.

Your teenager’s relationship with his peers will be very important over the next few years. Your child needs friends to test his ideas, actions, & roles. He probably worries about himself & whether he is normal. Most importantly, he just wants to be accepted. Although your teenager will be selecting friends from a variety of people (some you will like & some you will not), these choices are an important part of his development. If your teen’s friends start experimenting with alcohol, drugs, or smoking, increase your attention. These friendships place your teen at higher risk for these behaviors. Your support and guidance is invaluable.

## **Emotional Development**

The teenage years are a complex, challenging time for your adolescent as well as for the rest of your family. Your teenager is making an important transition from being a child to being an adult. He is becoming more independent & is learning to look at the world in new ways, comparing his ideas & values with those of others.

He may question things- including your household rules, your beliefs, & your authority. This is normal & is part of the maturing process, but keep in mind it is your responsibility to set appropriate limits. As he passes into middle adolescence, he is more likely to just ignore you, spend more time with peers, & even experimenting with new ideas. This can be a frightening time for a parent, especially if your teen starts experimenting with sex, alcohol, and/or drugs. As your teenager is changing, changes in the family will also occur. However, even during the most stressful times, remember these basic ideas:

- Continue to listen to each other, even if you are on different sides of the fence.
- Do not confuse the thing you are unhappy about with the person who is doing it. At times, you may have strong feelings about your teenager's behavior, but this is not a sign that you have stopped loving your child.
- Avoid constant criticism. Pick the important battles and let the unimportant ones take care of themselves.
- Show interest in what he is doing. When there are disagreements, try to find a common ground or area of compromise. If nothing else, agree to disagree and be clear about where each of you stands and why.
- Do not preach & do not nag. Try to keep your conversations rational & respectful of your teenager's feelings.

If you feel that you have lost control because your teenager's behavior is so impulsive, antisocial, or self-destructive; seek help from your child's provider. A referral to an experienced counselor can be very helpful. An adolescent who will not listen to his parents will usually open up to someone outside the family who can take the time to develop a relationship with him & help him work through some of the problems that are leading to the inappropriate behaviors. Getting help for your family by using a counselor, psychologist, or psychiatrist is not a sign that you have failed as a parent. This shows a positive approach to improving a negative situation. If you are not comfortable with a particular professional, discuss this with your teen's provider and request a referral to another person. You need a therapist who can work best with your family, your teenager, and the specific problems you may be having.

The good news is that by late adolescence, most teenagers will feel much more comfortable spending time with you. If you have treated him fairly & consistently, you have given him room to grow. If you have continued to give him love (even during the most difficult times), he will probably enter adulthood with a strong, healthy attitude.

## **Getting the Sleep Your Child Needs**

Pre-teens & teenagers need about 9 hours of sleep a night. Sleep is important in enabling the brain to encode new information (learn), to regulate emotions, and to make decisions. Adequate sleep also enhances immune functions and growth. Growth hormone is released during sleep hours.

## ELECTRONICS AND MEDIA IN YOUR HOME

Helping children develop healthy media use habits early on is important. The American Academy of Pediatrics recommends the following guidelines:

- For all children older than 2 years, limit screen use to no more than 1 hour per day of high quality programming. Co-viewing with your child is recommended.
- All children and teens need adequate sleep, physical activity, and time away from media. Designate media-free times to be together as a family and media-free zones. **Children should not sleep with electronic devices in their bedrooms, including TVs, computers, ipads and smartphones.**
- Parents are encouraged to develop personalized media use plans for their children taking into account each child's age, health, personality and developmental age. Plans should be communicated with caregivers and grandparents so that media rules are followed consistently.

### Alcohol and Drugs

Our teenagers are exposed to an ever changing & ever expanding world of illegal drug use. Illegal drugs are more dangerous & more easily accessible than ever before. Most teenagers will find themselves in a situation where friends are tempting them to try recreational drugs or alcohol. They will have to decide for themselves whether to join in or not. Although you cannot make the decision for them, you need to make sure they know in advance the dangers of experimenting with mood-altering drugs. It's important for you to get involved before a drug problem develops:

- Talk with him frequently about subjects relevant to his life, including drugs & how they play a role in his relationships to his peers. Give him the facts about the danger of drugs. Teach him to make independent judgments, no matter what his friends are doing or saying. Let him know how you feel about drugs.
- Remind him there are other ways to handle his feelings or problems without drugs. Most of all, let him know you will always be there to help with his problems.
- Build his self-esteem, praise his accomplishments.
- Encourage him to participate in enjoyable activities, which could help him from using drugs out of boredom.
- Let your teenager know that if he used drugs, you will take away valued privileges.
- Make sure your teenager knows the legal consequences of taking drugs.

Set a good example by limiting your own use of alcohol & medications. If you drink at home, keep it at moderate levels and make it clear to your teenager that you do not use alcohol to cope with your problems. Never drink under unsafe conditions (such as when driving) or make light of excessive drinking.

If you discover that your teenager is abusing drugs or alcohol, early counseling &/or treatment is vital. Instead of lecturing, try to find out why your adolescent is using drugs. Ask your child's provider for guidance.

For resources on talking to your teen about drugs/alcohol, please review the "Teens" section at [www.cedarparkdoctors.com](http://www.cedarparkdoctors.com)



## **Smoking**

The use of cigarettes, vaping, and smokeless tobacco is not uncommon even in younger teenagers. Teenagers may know about the risks of tobacco, but they may not realize how addictive smoking can be. Discuss the risks honestly with your teenager. If you smoke, show your teenager that quitting is a good idea. Children of smokers are more likely to smoke. Parents can make a difference in the choice their teenager makes.

## **Car & Bicycle Safety**

Do not start the car until everyone is buckled in safely. Set a good example for your teenager by always wearing your seat belt & by teaching your pre-driver good driving habits.

Be sure your teenager follows bicycle safety rules. Bicycle helmets should be worn every time your teen rides a bike. Helmets are also recommended with inline-roller skates & skateboards. Teach your adolescent road safety. Ride on the right side of the street; signal for turns; wear reflective gear, & use lights if riding after dark.

## **Fire Safety**

Teach and practice an escape plan for your house in case of fire. Change smoke detector batteries at least twice a year on dates you'll remember, like Daylight Savings and Standard Time change date. Do not smoke or allow smoking in your home. Remind your teenager how dangerous smoking is.

## **Firearm Safety**

Do not keep a gun in your home. If you must keep a gun, store it unloaded in a locked place, separate from the ammunition. Children in a home where guns are present are more likely to be shot by themselves, their friends, or family members than by an intruder. Handguns are especially dangerous. Teach your teenager to leave a house or situation immediately if they see a gun.

Check out our website at hyperlink  
"<http://www.cedarparkdoctors.com>"  
[www.cedarparkdoctors.com](http://www.cedarparkdoctors.com)  
for more helpful tips and information regarding  
your child's health.

## Car Safety Recommendations

We highly recommend following the recommendations provided by the American Academy of Pediatrics:

**Infants and toddlers:** keep in a **rear-facing car safety seat** until they reach the highest weight or height allowed by the car safety seat manufacturer. It is important to keep your child rear-facing for as long as possible. This is a change from the previous recommendation and your child will be rear facing until at least age two.

**Preschool and early school-age:** children who have **outgrown the rear-facing weight or height limit** for their car seat should **switch to a forward-facing car safety seat** with a harness. They should remain in this seat for as long as possible and until they reach the highest weight or height allowed by their car safety seat manufacturer.

**School-age:** children who have outgrown the forward-facing car safety seat should use a **belt-positioning booster seat** until the lap and shoulder seat belt fits properly. The seat belt typically fits properly when they have reached 4 ft 9 inches in height and are between the ages of 8 and 12 years.

**Older school-age:** when the seat belt alone fits properly, they should always use lap and shoulder seat belts for optimal protection.

**All children less than 13 years:** must remain in the rear seats of vehicles no matter what. An airbag deployed in the front seat can seriously injure or kill children under the age of 13 years.

**Winter season:** Do **not** restrain your child while he or she is wearing a thick winter jacket.

**Important:** Have your child buckle up for **every** trip, no matter the length of time.