



Penridge Pediatric Associates

Pointers and Pearls

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SETTING THE RULES OF THE ROAD

When it's time for your teen to take the wheel, don't hand over the car keys until some safety rules have been set and agreed upon. If needed, put the rules and consequences in writing so that everyone understands their importance.

- Limit nighttime driving. Nighttime driving requires more skill than daytime driving. The nighttime fatal crash rate for teens is almost twice as high as the daytime rate.
- Restrict the number of passengers. Fatal crashes are more likely when other teens are in the car, and the risk increases with each passenger. There should be no more than one or two passengers in the car at any time.
- Require seat belt use for the driver and all passengers. Two-thirds of teens killed in vehicle crashes are not buckled, and half of all teens killed in accidents would be alive today if they had used a seat belt.
- There should be absolutely no cell phone usage while behind the wheel. If your child is lost, or needs directions, he should pull over in a safe area to place the call.
- The car stereo system's volume should be kept low, and should be no switching channels or changing CDs while the car is in motion.
- Set rigid drinking and driving rules. First of all, prohibit the risky activity! But, if your child has been drinking, or if the person with whom he drove has been drinking, have a backup plan in place that will allow him to call home (or a cab) for a ride. Make sure your child knows you will not be angry, and should never

hesitate to call under those circumstances.

- Doors should be kept locked. This will keep out potential carjackers. When riding alone, the passenger side window should be kept up high enough to prevent someone on the outside from reaching in and unlocking the door to gain entrance.
- No speeding or "fooling around." Your child must understand that her vehicle is a potentially deadly weapon, and she must follow all traffic safety laws.



- Be prepared to take away the keys. If your child exhibits bad driving habits, or has shown he is not yet mature enough to handle the responsibility. Do not hesitate to take away driving privileges.

EARLY READING SETS THE STAGE FOR SUCCESS

According to literacy experts, infancy through age 8 are the most important period for literacy development. The development of

reading skills through early experiences with books is critically linked to a child's success in learning to read. Here are a few ways to make your children lifetime readers:

- Start early. Even in infancy reading an early-level book with lots of pictures prepares children for reading.
- Make reading a positive experience Use story time as a relaxing time for you and your child. Whether you cuddle on a rocking chair or sit in bed, reading should be an enjoyable experience for both of you.
- Get a library card and then plan frequent trips to let her pick out books.
- Turn off the electronics. That includes the TV, radio, computer and games. Use the time to read to younger children, or to have older children read on their own.
- Turn the tables. Let him read to you. This will help you gauge comprehension levels and identify problem areas.
- Whatever the book, discuss the themes, character development, and writing styles. Ask open-ended questions about the story to start discussions.
- Allow your child to pick out her own books; children will read what interests them.
- Set goals and reward reading. Plan a trip to the library or bookstore for the next book in your child's favorite series or by his favorite author. Schedule an ice cream party to celebrate the completion of a book.
- Be a reading role model. Let your kids see you reading a variety of

printed matter, including novels, newspapers, and magazines.

KIDS' BEDTIME DELAYING TACTICS

When it comes to bedtime battles, there are several kinds of kids:

The staller. He always has “just one more thing to do” before he hits the sack, or “one more thing to tell you” as you try to leave his room. He always needs one more sip of water or one more trip to the bathroom.

The boomerang kid. No matter how many times you tuck her in and say good-night, she always pops out of bed and comes back to you.

The screamer. She throws tantrums, screams, cries, and refuses to go to bed at all.

What's the big deal about bedtime?

It is natural for young children to resist bedtime. Some children resist out of fear - fear of the dark (monsters living under the bed, ogres lurking in closets), or fear of being alone. Others are testing their independence. And some children simply want to spend more time with their parents. To make bedtime battles a thing of the past and create a highway to sweet dreams, consider the following tips:

- The bedtime ritual should be a relaxing part of the day for your children, not a three-ring circus.

Make the experience pleasurable by creating (and sticking to) a bedtime routine with calming activities that include brushing the teeth, taking a warm bath, climbing under the covers with a favorite stuffed animal, having a bedtime story read, or having a nice conversation about anything on the child's mind.

- Set aside “together time” well before the bedtime hour. Allot time to talk about the day's events with your child. If she doesn't want to go to bed, ask her why, and then help her problem solve through the answer.

- Shed light on the subject. Place a nightlight in your child's room, and give him a flashlight to use in the event he becomes frightened of the dark.

- Give her the sound of music. Put a tape of soothing lullabies on to help

her drift off. The lullabies will also help mask the sounds of things that go bump in the night.

- Make his room “the place to be.”

Let him help decorate his room by choosing the comforter, artwork, etc.

- Give a 30-minute warning that the bedtime routine is about to start.

Then the 15-minute notice, and start the ritual on time. Stick to the schedule, as allowing any extra time will encourage her to keep stalling.

- Give choices. Refusing to go to bed is a way for a child to test newfound independence. Let him decide which bedtime story he wants to read, whether he wants to brush his teeth before or after his bath, which pajamas he wants to wear, etc. By giving him choices, you are allowing him to have at least some control over the routine.

- Offer rewards. Let her know that if she sticks to the routine, she will win a sticker. When she gets three stickers in a row, she can win a small reward, such as a new book, a trip to the playground, whatever the two of you decide.

- Give him security. Let him know that you will check on him before you retire for the night.

- Never use being sent to bed as punishment, as this sends the wrong message about bedtime.

ANOREXIA

Anorexia is an eating disorder characterized by an irrational fear of weight gain. People with anorexia believe that they are overweight even when they are extremely thin. Those who suffer from the disorder attempt to control their weight by severely restricting their intake of calories.

According to The National Institute of Mental Health, almost 4 percent of females in the U.S. suffer from anorexia. Although primarily seen in females, it can affect males too.

The teen years are the most important time of life for developing normal, strong bones. Up to half of bone mass needed for a lifetime is achieved during adolescence. Since anorexia typically starts in mid- to late adolescence, those who suffer from the disorder risk a lifetime of

fractures and spinal deformities.

Studies show that that low bone mass (osteoporosis) can occur as early as six months of the onset of the illness. In severe cases, anorexia has resulted in osteoporosis in patients in their 20s.

Some signs of anorexia are:

- Dramatic weight loss
- Intense fear of gaining weight
- Negative body image
- In females, menstrual changes or the absence of menstruation
- Anxious or ritualistic behavior at mealtimes
- Fatigue
- Depression
- Baby-fine hair covering the body
- Brittle nails and hair
- Not wanting to eat meals with the family

If you suspect your child has anorexia, don't delay calling us.

FROM THE SECRETARIES

A reminder for summer check ups – please make camp, school and sports exam appointments early (but remember that PIAA cards must be dated after June 1st).

STUDIES AT PPA

Meningococcus is now the most common cause of life-threatening bacterial infections. We have four meningococcal vaccine studies in progress. Two use the same vaccine as the one currently recommended routinely at 11, 15, and 17 years of age. It will be given to infants 9 months and children 4 years of age. Two other studies evaluate a meningococcal vaccine almost exactly like the licensed product in infants at 2 months of age and in people 11 years and older (including parents!)

A study of an already licensed medication to prevent wheezing episodes in children with asthma has begun. The purpose of the study is to see if the medication can be used at the time of an illness rather than every day as it is now used. The ages are 1 to 5 years of age.

If you have questions about any of these studies please call Bonnie Pforter, RN, Dr. Kratz or Dr. Rothstein at 215-257-2727.