

6-10 Years – well child care

Arrival Time: _____

Household

Who lives in the home (e.g. Father, mother, brother, etc.)? _____

Development

Doing well in school	Yes	No
Interacts well with others	Yes	No
Maintains Friendships	Yes	No
Acceptable behavior at home and in school	Yes	No
Engages in regular exercise	Yes	No
Television watching less than 2 hours/day	Yes	No

Nutrition

Eats three meals per day with snacks	Yes	No
Drinks 1-2% milk	Yes	No
Eats relatively well balanced diet	Yes	No
Well water or city water?	Well	City

Bowel Habits

Every day or every other day stool	Yes	No
Stooling is painless and non-bloody	Yes	No

Sleep Pattern

Having nightmares or sleepwalking	Yes	No
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Safety

Using car seat or safety booster seat?	Yes	No
Wears a seatbelt in automobile	Yes	No
Wears a bicycle helmet	Yes	No
Are there smoke detectors in your house	Yes	No
Any smokers at home?	Yes	No
Any guns in the house?	Yes	No

Miscellaneous

Any questions or concerns about your child? If yes, what are they?	Yes	No
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Preventive Screen Questionnaire

Lead Risk Assessment:

Does your child live in a house or attend daycare in a house built before 1978?	Yes	No
Is anyone in your home being treated for lead poisoning?	Yes	No
Are there any renovations or peeling paint in your home or one your child visits?	Yes	No
Is there any family member who is currently working in an occupation or hobby where lead exposure could occur?(auto, ceramics, painter)	Yes	No

Tuberculosis Risk Assessment:

Was your child born in, or lived more than a year in a country other than the U.S.?	Yes	No
Has your child been exposed to anyone with either active or a history of Tuberculosis disease?	Yes	No
Is your child living in a house hold with anyone who is HIV Positive?	Yes	No
Is your child part of a migrant worker family?	Yes	No

Heart Disease/Cholesterol Risk Assessment:

Is there a family history of parents/grandparents under 55 years of age with a heart attack, heart surgery, angina or sudden cardiac death?	Yes	No
Has the child's mother or father been diagnosed with high cholesterol? (240 mg/dL or higher)	Yes	No
Is the child/adolescent overweight?	Yes	No
And is there also a personal history of:		
Smoking?	Yes	No
Lack of physical activity?	Yes	No
High blood pressure?	Yes	No
High cholesterol?	Yes	No
Diabetes mellitus?	Yes	No

ADVICE FOR PARENTS

Parents are the teachers of food habits. As children grow, they are watching for clues on food choices. Children will copy many habits, likes and dislikes. When making food choices, actions speak louder than words. If you want your child to develop a preference for nutritious foods, consider the following:

- ★ Develop good food habits yourself.
- ★ Avoid talk about foods you do not like. Talk about foods you enjoy.
- ★ Never assume that a child will not like a food. Give them a chance to try!
- ★ Be willing to try new recipes and foods.
- ★ If a child does not eat at mealtime, remain calm. When the next meal is served, give the child his/her food as you usually would. Any snack between meals should be nutritious.
- ★ Do not make an issue of refusal to eat. Some children choose this behavior because they get lots of attention.
- ★ Encourage a child to help in planning and preparing meals and snacks.
- ★ Serve regular meals and snacks.
- ★ Buy healthful food. Parents are the best judges of what a child should eat. Children are the best judges of how much they should eat.
- ★ Make mealtime pleasant.

SNACKS

Snacks make up an important part of a child's nutrition. Young children are growing rapidly. In planning snacks you need to select nutritious foods to help promote this rapid growth.

Plan snacks. Schedule them around the normal events of the day and in between the regular meals. Children should learn to get hungry, instead of feeling full all the time.

Snacks should include a variety of foods. Selections can be made from any of the food groups. Foods in the fats, oils and sugars group provide many calories but few nutrients. Foods from this group should be used only occasionally.

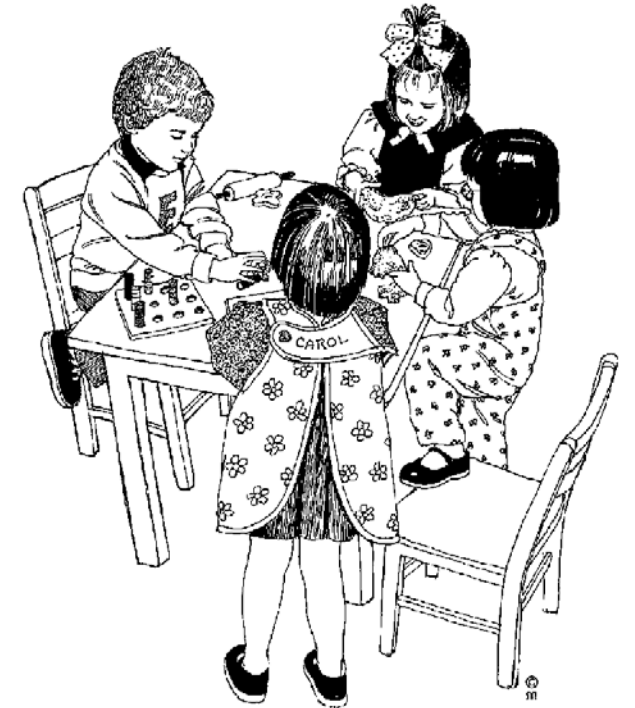
SMART SNACK IDEAS

Fresh fruit
String cheese
Crackers

Fruit juices
Yogurt
Dry cereal
Toast
Bagels
Milk
Custard
Vegetables
Vegetable juices


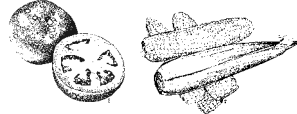







Feeding Our Future

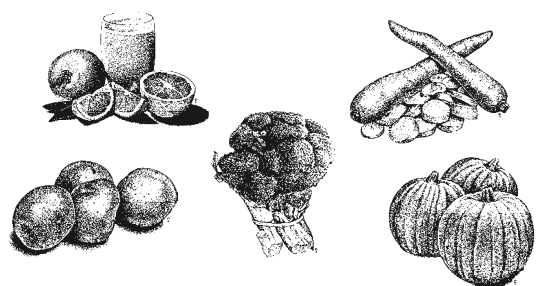


**Guidelines for
Feeding Children
(Ages 1 — 6)**

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FOOD GROUPS	SERVINGS DAILY	FOOD CHOICES	1-2 years	3-5 years	6 years	Servings Eaten	Difference
 Breads & Cereals	6 - 11	bread (any kind)	½ slice	½ slice	1 slice		
		muffins, biscuits, rolls, etc.	½	½	1 whole		
		cold, dry cereal	½ cup	½ cup	¾ cup		
		cooked cereal	¼ cup	¼ cup	½ cup		
		Pasta (macaroni, spaghetti noodles, etc.)	¼ cup	¼ cup	½ cup		
		snack crackers	3	4	6		
		saltines, grahams (1 square = ¼ cracker)	2	3	4		
 Vegetables	3 - 5	cooked	¼ cup	¼ - ½ cup	½ cup		
		raw	1/3 cup	½ cup	¾ cup		
		whole	½ medium or 1 small				
		juice	1/3 cup	½ cup	¾ cup		
 Fruits	2 - 4	cooked	¼ cup	¼ - ½ cup	½ cup		
		raw	1/3 cup	½ cup	¾ cup		
		whole	½ medium or 1 small				
		juice	1/3 cup	½ cup	¾ cup		
 Milk & Milk Products	4	milk (any kind)	½ cup	¾ cup	1 cup		
		yogurt	½ cup	¾ cup	1 cup		
		cheese	¾ oz.	1 to 1 - ½ oz.	2 oz.		
		cottage cheese	1 cup	1-1/3 cup	1 - ½ cup		
		pudding	½ cup	¾ cup	1 cup		
 Protein Foods	3	lean meat, fish, poultry (chicken, turkey, etc.)	1 oz.	1 - ½ oz.	2 oz.		
		egg	1	1	1		
		cooked dry beans and peas	½ cup	¾ cup	1 cup		
		peanut butter	2 TBSP.	3 TBSP.	4 TBSP.		
 Fats, Oils, Sugars	Occasionally	butter, margarine, mayonnaise, salad dressing, sugar, candy, jam, syrup, soft drinks, cake, cookies, pie, chips, etc.	These foods provide calories, with few nutrients.				
 Water & Other Liquids	6 - 8	water, juice, milk, soup or other liquids	½ cup	¾ cup	1 cup		

VITAMIN C			
Eat one high or two good Vitamin C food sources per day.			
High Source		Good Source	
Cantaloupe	Grapefruit/ grapefruit juice	Baked potato with skin	Broccoli
Kiwi	Orange/orange juice	Brussels sprouts	Cauliflower
Strawberries	Green pepper	Honeydew melon	Mandarin orange
V-8 Juice		Pineapple/ pineapple juice	Tangerine
		Tomato/tomato juice	



VITAMIN A			
Eat one high or two good Vitamin A food sources for each Vitamin A serving needed 3-5 times a week.			
High Source		Good Source	
Carrots	Pumpkin	Cantaloupe	Kale
Mixed Vegetables	Dandelion greens	Greens: Collard, Mustard, Turnip	
Spinach	Sweet Potato	Mixed frozen vegetables	
		Winter squash: Acorn, Hubbard, Buttercup, Butternut. (Does not included Zucchini)	

