Your child at 18 months*

Child's Name **Child's Age** **Today's Date**

Milestones matter! How your child plays, learns, speaks, acts, and moves offers important clues about his or her development. Check the milestones your child has reached by 18 months. Take this with you and talk with your child's doctor at every well-child visit about the milestones your child has reached and what to expect next.

What most children do by this age:

Social/Emotional Milestones

- ☐ Moves away from you, but looks to make sure you are close by
- ☐ Points to show you something interesting
- ☐ Puts hands out for you to wash them
- ☐ Looks at a few pages in a book with you
- ☐ Helps you dress him by pushing arm through sleeve or lifting up foot

Language/Communication Milestones

- ☐ Tries to say three or more words besides "mama" or "dada"
- ☐ Follows one-step directions without any gestures, like giving you the toy when you say, "Give it to me."

Cognitive Milestones (learning, thinking, problem-solving)

- ☐ Copies you doing chores, like sweeping with a broom
- ☐ Plays with toys in a simple way, like pushing a toy car

Movement/Physical Development Milestones

- ☐ Walks without holding on to anyone or anything
- ☐ Scribbles
- ☐ Drinks from a cup without a lid and may spill sometimes
- ☐ Feeds herself with her fingers
- ☐ Tries to use a spoon
- ☐ Climbs on and off a couch or chair without help

*** It's time for developmental screening!**
At 18 months, your child is due for general developmental screening and an autism screening, as recommended for all children by the American Academy of Pediatrics. Ask the doctor about your child's developmental screening.

Other important things to share with the doctor...

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or does not do that concerns you?
- Has your child lost any skills he/she once had?
- Does your child have any special healthcare needs or was he/she born prematurely?

You know your child best. Don't wait. If your child is not meeting one or more milestones, has lost skills he or she once had, or you have other concerns, act early. Talk with your child's doctor, share your concerns, and ask about developmental screening. If you or the doctor are still concerned:

1. Ask for a referral to a specialist who can evaluate your child more; and
2. Call your state or territory's early intervention program to find out if your child can get services to help. Learn more and find the number at **cdc.gov/FindEI**.

For more on how to help your child, visit **cdc.gov/Concerned**.

Don't wait.
Acting early can make a real difference!

CDC Centers for Disease Control and Prevention

Download CDC's free *Milestone Tracker* app
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American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

Following vaccination—
what to expect and what to do

Australian Government
Department of Health and Aged Care

National Immunisation Program
A joint Australian, State and Territory Government Initiative

All vaccinations may cause the following reactions:

Mild fever that doesn't last long <38.5°C

Where the needle was given: Sore, red, burning, itching or swelling for 1–2 days and/or small, hard lump for a few weeks

Grizzly, unsettled, unhappy and sleepy

Teenagers/adults fainting and muscle aches

SEE BACK PAGE FOR ADDITIONAL COMMON REACTIONS SPECIFIC TO EACH VACCINE

What to do at home:

If baby/child is hot don't have too many clothes or blankets on

Breast feed more frequently and/or give extra fluids

Put a cold wet cloth on the injection site if it is sore

For fever or pain give paracetamol. Follow instructions on the packaging

When to seek medical advice:

See your doctor or immunisation provider, or go to hospital if:

Pain and fever are not relieved by paracetamol (eg. Panadol®)

The reactions are bad, not going away or getting worse or if you are worried at all

Any of the rare reactions below are experienced

How to report an adverse reaction:

Significant events that occur following immunisation should be reported to your doctor or vaccination provider. Alternatively you can report directly to the Therapeutic Goods Administration **(www.tga.com.au)** or by phone to a pharmacist from NPS Medicinewise on **1300 134 237.**

You can also report adverse events following immunisation to your state or territory health services.

Rare reactions requiring immediate medical attention

As with any medication, on rare occasions, an individual may experience a severe reaction. Seek medical attention if any of the below are experienced and inform of recent vaccination.

Anaphylaxis

- A severe allergic reaction which occurs suddenly, usually within 15 minutes, however anaphylaxis can occur within hours of vaccine administration. Early signs of anaphylaxis include: redness and/or itching of the skin, swelling (hives), breathing difficulties, persistent cough, hoarse voice and a sense of distress.

Intussusception (relates to rotavirus vaccine)

- This is an uncommon form of bowel obstruction where one segment of the bowel slides into the next, much like the pieces of a telescope.
- There is a very small risk of this occurring in a baby in the first week after receiving the first dose of rotavirus vaccine, and a smaller risk after the second vaccine dose.
- The baby has bouts of crying, looks pale, gets very irritable and pulls the legs up to the abdomen because of pain.

Seizure

- Some young children (especially aged 1–3 years) are more prone to seizures when experiencing a high fever from any source (with an infection or after a vaccine). The seizure usually lasts approximately 20 seconds and very rarely more than 2 minutes.

Rash (relates to shingles vaccine Zostavax®)

- Very rarely a generalised chickenpox-like rash following Zostavax® vaccination may occur around 2–4 weeks after vaccination, which may be associated with fever and feeling unwell. This rash may be a sign of a serious reaction to the virus in the vaccine.

Where can I get more information?

Contact your immunisation provider

Visit **health.gov.au/immunisation**

Contact your state or territory health service

Practice contact details:

Vaccines given on ____ / ____ / 20____ Time given: _____ (Please wait a minimum of 15 minutes after immunisation)

Indicate injection sites by circling appropriate box: **LA** = Left Arm, **RA** = Right Arm, **LL** = Left Leg, **RL** = Right Leg

Hepatitis B vaccine (H-B-Vax® II Paediatric or Engerix® B Paediatric)	**Diphtheria, tetanus, whooping cough, hepatitis B, polio, *Haemophilus influenzae* type b vaccine** (Infanrix® hexa or Vaxelis®)	**Pneumococcal vaccine** (Prevenar 13®)	**Rotavirus vaccine** (Rotarix®)
• See 'Common reactions' **LL** **RL** **LA** **RA**	• See 'Common reactions' **LL** **RL** **LA** **RA**	• See 'Common reactions' **LL** **RL** **LA** **RA**	• See 'Common reactions' • Vaccine virus can be shed in poo, particularly after the first dose. Handwashing is important after every nappy change. • Intussusception – see 'rare reactions' **BY MOUTH**
Meningococcal B vaccine (Bexsero®)	**Meningococcal ACWY vaccine** (Nimenrix®)	**Measles, mumps, rubella vaccine** (MMRII® or Priorix®)	**Hepatitis A vaccine** (Vaqta® Paediatric)
• See 'Common reactions' • Fever (>38.5°C) is common in young children receiving this vaccine. Paracetamol will reduce the likelihood of fever. For children less than 2 years of age, a dose of paracetamol is recommended 30 minutes before vaccination or as soon as possible afterwards. Followed by two more doses 6 hours apart even if there is no fever. **LL** **RL** **LA** **RA**	• See 'Common reactions' **LL** **RL** **LA** **RA**	• See 'Common reactions' • Reactions that may be present 7 to 10 days after vaccination: – fever over 39°C – rash (not infectious) – head cold, runny nose, cough, puffy eyes – swelling in the neck /under the chin. **LL** **RL** **LA** **RA**	• See 'Common reactions' • Rash **LL** **RL** **LA** **RA**
***Haemophilus influenzae* type b vaccine** (ActHIB®)	**Measles, mumps, rubella, chickenpox vaccine** (Priorix-Tetra® or ProQuad®)	**Diphtheria, tetanus, whooping cough vaccine** Children (Infanrix® or Tripacel®) Adults and adolescents (Boostrix® or Adacel®)	**Diphtheria, tetanus, whooping cough, polio vaccine** (Infanrix® IPV or Quadracel®)
• See 'Common reactions' **LL** **RL** **LA** **RA**	• See 'Common reactions' • Reactions that may be present 7 to 10 days after vaccination: – fever over 39°C – rash (not infectious) – head cold, runny nose, cough, puffy eyes – swelling in the neck /under the chin. • Reactions 5–26 days after vaccination: – mild chickenpox like rash (may be infectious, seek medical advice). **LL** **RL** **LA** **RA**	• See 'Common reactions' • Very rarely, large injection site reactions (>50 mm) including limb swelling may occur (with the 4th or 5th dose of a tetanus-containing vaccine in children). These reactions usually start within 24–72 hours after vaccination, and resolve spontaneously within 3–5 days. If this reaction extends beyond one or both joints, seek medical advice. **LL** **RL** **LA** **RA**	• See 'Common reactions' • Large injection site reaction of redness and swelling from the shoulder to the elbow. If this reaction extends beyond one or both joints, seek medical advice. **LA** **RA**
Pneumococcal vaccine (Pneumovax 23®)	**Human papillomavirus (HPV) vaccine** (Gardasil®9)	**Shingles vaccine** (Zostavax®)	**Influenza vaccine**
• See 'Common reactions' • Large injection site reaction with redness and swelling, more common after the second or subsequent dose of this vaccine. **LA** **RA**	• See 'Common reactions' • Mild headache • Mild nausea **LA** **RA**	• See 'Common reactions' • Reactions 2-4 weeks after vaccination: generalised chickenpox like rash – seek immediate medical attention and inform of recent vaccination. – see 'rare reactions' **LA** **RA**	• See 'Common reactions' **LL** **RL** **LA** **RA**

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Help your child learn and grow

As your child's first teacher, you can help his or her learning and brain development. Try these simple tips and activities in a safe way. Talk with your child's doctor and teachers if you have questions or for more ideas on how to help your child's development.

- Use positive words and give more attention to behaviors you want to see ("wanted behaviors"). For example, "Look how nicely you put the toy away." Give less attention to those you don't want to see.
- Encourage "pretend" play. Give your child a spoon so she can pretend to feed her stuffed animal. Take turns pretending.
- Help your child learn about others' feelings and about positive ways to react. For example, when he sees a child who is sad, say "He looks sad. Let's bring him a teddy."
- Ask simple questions to help your child think about what's around her. For example, ask her, "What is that?"
- Let your child use a cup without a lid for drinking and practice eating with a spoon. Learning to eat and drink is messy but fun!
- Give simple choices. Let your child choose between two things. For example, when dressing, ask him if he wants to wear the red or blue shirt.
- Have steady routines for sleeping and eating. For example, sit at the table with your child when she's eating meals and snacks. This helps set mealtime routines for your family.
- Limit screen time (TV, tablets, phones, etc.) to video calling with loved ones. Screen time is not recommended for children younger than 2 years of age. Children learn by talking, playing, and interacting with others. Limit your own screen time when you are with your child so you are able to respond to her words and actions.
- Ask your child's doctor and/or teachers if your child is ready for toilet training. Most children are not successful at toilet training until 2 to 3 years old. If he is not ready, it can cause stress and setbacks, which can cause training to take longer.
- Expect tantrums. They are normal at this age and should become shorter and happen less often as your child gets older. You can try distractions, but it's ok to ignore the tantrum. Give him some time to calm down and move on.
- Talk with your child by facing her and getting down to her eye level when possible. This helps your child "see" what you're saying through your eyes and face, not just your words.
- Start to teach your child the names for body parts by pointing them out and saying things like "Here's your nose, here's my nose," while pointing to her nose and your own.

To see more tips and activities download CDC's Milestone Tracker app.

This milestone checklist is not a substitute for a standardized, validated developmental screening tool. These developmental milestones show what most children (75% or more) can do by each age. Subject matter experts selected these milestones based on available data and expert consensus.

www.cdc.gov/ActEarly | 1-800-CDC-INFO (1-800-232-4636)

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Learn the Signs. Act Early.