



Three Years

Patient information

Patient name: _____

Date: _____

Weight: _____

Length: _____

Blood tests (done by finger prick)

- **Hemoglobin**

This test will determine if your child is anemic. We will have the result immediately and let you know if any treatment is needed.

- **Lead test**

This test determines how much lead is in your baby's blood stream. We send this test out to a laboratory and receive results in about two weeks. We will contact you if your child's level is elevated.

Development

At this age, your child's language has developed such that he expresses his thoughts out loud. Not all words may be intelligible yet. To help your child build his vocabulary, describe things that are happening and read to him daily. Stuttering is common at this age and will usually resolve on its own. Questions are a hallmark of this age. Simple and to-the-point answers are the most effective.

At three, interest in structured games increases. Sharing and taking turns is possible, although variable. Large play equipment, tricycles, and open spaces with safe boundaries will allow your child to refine his motor skills. Picture books, blocks, dress-up clothes, dolls and action figures, large markers and crayons, and large beads are useful toys for this age.

Parental warmth, consistent limit-setting, and respectful treatment will help your child develop self-esteem and experience at the world as a safe place. Your child is beginning to understand the consequences of his actions and is developing an awareness of right and wrong. Complex logic and reasoning, however, are not part of his skills yet. You should describe the outcome of unacceptable behaviors simply and offer alternatives. You may use the "time-out" technique described in our previous handouts. Children learn from watching you cope peacefully with conflicts. A three-year-old is usually anxious to please and positive reinforcement goes a long way.

This is often a good time to start pre-school or join an organized group if your child hasn't already.

Eating

Three-year-olds are often very picky with foods. Try to offer simple, balanced meals with some choices. Don't worry if your child doesn't eat well at each meal; try to assure that she receives a balanced diet (grains, vegetables, fruits, meats or other protein sources) over the course of each week. Now is the time to teach your child healthy eating habits that can last a lifetime; if your child gets used to high-fat or sugary snacks, he may be prone to obesity, cavities, and poor eating habits later in life. Also, avoid having your child develop a taste for "fast food", as this is a major source of poor nutrition for children and young adults.

Special instructions

Most three-year-olds sleep ten to twelve hours a night, with one nap daily. Try to have a consistent bedtime routine and encourage a favorite bedtime object (such as a teddy bear, blanket, or pillow). At this age, many children have occasional difficulty falling asleep or staying asleep. When your child wakes and calls for you, try waiting a few minutes to see whether she falls asleep again. If not, reassure her in her room rather than taking her in bed with you. Try not to reward waking with food, television, etc.

Night terrors and nightmares occur frequently at this age. Night terrors usually occur one hour or so after falling asleep. The child screams out and acts terrified. This is not a bad dream, but more like a form of sleep-talking. The child is actually asleep during the night terror and will not remember it in the morning. When a night terror occurs, the best thing to do is simply check that your child is safe and not try to wake her. The night terror should pass after a few minutes. In contrast, nightmares are bad dreams that will frighten the child and that she may remember. Nightmares usually occur in the second half of the night. The child usually wakes completely and wants to be comforted and reassured by you.

Limit television and video time to one hour a day (or none!). Children who watch excessive amounts of television are prone to obesity and aggressive behavior. Supervise what your child does watch on television and avoid violent or inappropriate shows.

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Safety

Food safety

Avoid high-risk choking foods such as nuts, popcorn, raw vegetables, and hard candies. Grapes and hot dogs should be cut into small pieces to avoid choking.

Personal safety

This is a good time to reinforce the “never step off the sidewalk” rule. Start to teach your child his last name and telephone number in case he ever gets lost. Teach your child that his body is his own and that no one should touch him in a way that makes him feel uncomfortable. You should also emphasize at opportune times (for example, bath or doctor’s visit) that the child’s genitals are “private” and that no one except a parent or the doctor should touch him there.

Car safety

Your child should be in a forward-facing car seat always in the back seat of the car. The shoulder straps should be at or above the level of your child’s shoulders. The straps should fit snugly—you should only be able to get only one finger between the straps and your child. In winter, it is safer to put warm layers on top of your child after strapping him into the car seat; securing the straps on top of bulky clothing can reduce the effectiveness of the car seat. If you would like further information on child car safety or would like to find a certified car seat inspector who can check the installation of your car seat, please consult the National Highway Traffic Administration website at www.nhtsa.dot.gov.

Sun safety

Avoid the midday sun between 10 a.m. and 3 p.m. as much as possible. Use a hat or canopy and light clothing that covers as much skin as possible. Sunscreen (SPF 15 or higher) should be used on exposed areas of skin.

Gun safety

Having a gun in the home (especially a handgun) can be extremely risky. The American Academy of Pediatrics recommends that families with children should not have any guns in the home. If you must have a gun at home, it is imperative that it be kept unloaded and locked away at all times, and that the bullets be kept locked away in a separate location. Even if you do not have a gun at home, teach your child to always stay away from guns.

Next visit

Your child’s next routine visit will be at four years old. At that visit the following vaccinations are given.

- Diphtheria/Tetanus/Pertussis (DTaP)
- Polio (IPV)
- Measles-Mumps-Rubella (MMR)
- Varicella (Chickenpox)