



[WWW.CDC.GOV/PARENTSARETHEKEY](http://WWW.CDC.GOV/PARENTSARETHEKEY)

## EIGHT DANGER ZONES FOR TEENS BEHIND THE WHEEL

Motor vehicle crashes are the leading cause of death among teens. Make sure your young driver is aware of the leading causes of teen crashes, and put rules in place to help your teen stay safe.

**NO.º1: DRIVER INEXPERIENCE.** Most crashes happen during the first year a teen has a license. Provide at least 30 to 50 hours of supervised driving practice over at least six months. Make sure to practice on a variety of roads, at different times of day, and in varied weather and traffic conditions. This will help your teen gain the skills he or she needs to be safe.

**NO.º2: DRIVING WITH TEEN PASSENGERS.** Crash risk goes up when teens drive with other teens in the car. Follow your state's teen driving law for passenger restrictions. If your state doesn't have such a rule, limit the number of teen passengers your teen can have to zero or one. Keep this rule for at least the first six months.

**NO.º3: NIGHTTIME DRIVING.** For all ages, fatal crashes are more likely to occur at night; but the risk is higher for teens. Make sure your teen is off the road by 9 or 10 p.m. for at least the first six months of licensed driving.

**NO.º4: NOT USING SEAT BELTS.** The simplest way to prevent car crash deaths is to buckle up. Require your teen to wear a seat belt on every trip. This simple step can reduce your teen's risk of dying or being badly injured in a crash by about half.

**NO.º5: DISTRACTED DRIVING.** Distractions increase your teen's risk of being in a crash. Don't allow activities that may take your teen's attention away from driving, such as talking on a cell phone, texting, eating, or playing with the radio.

**NO.º6: DROWSY DRIVING.** Young drivers are at high risk for drowsy driving, which causes thousands of crashes every year. Teens are most tired and at risk when driving in the early morning or late at night. Be sure your teen is well rested before he or she gets behind the wheel.

**NO.º7: RECKLESS DRIVING.** Research shows that teens lack the experience, judgment, and maturity to assess risky situations. Help your teen avoid the following unsafe behaviors. Speeding: Make sure your teen knows to follow the speed limit and adjust speed to road conditions. Tailgating: Remind your teen to maintain enough space behind the vehicle ahead to avoid a crash in case of a sudden stop.

**NO.º8: IMPAIRED DRIVING.** Even one drink will impair your teen's driving ability and increase their risk of a crash. Be a good role model: never drink and drive, and reinforce this message with your teen.

Take the next step and download the Parent-Teen Driving Agreement at [www.cdc.gov/parentsarethekey](http://www.cdc.gov/parentsarethekey).





## About Bicycle Helmets

### How can I tell if a helmet will keep my child safe?

You should only buy a helmet that meets the bicycle helmet safety standards of the US Consumer Product Safety Commission (CPSC). Any helmet meeting these standards is labeled. Check the inside of the helmet for confirmation.

### Do all helmets meet these standards?

All helmets manufactured or imported for use after March 1999 must comply with a mandatory safety standard issued by the CPSC.

### Can other kinds of helmets be used for bicycling?

Each type of helmet is designed for protection in specific conditions and may not offer enough protection in bike crashes or falls. Bike helmets are very protective in headfirst falls at fairly high speeds and are light and well ventilated for comfort and acceptability. A multisport helmet, certified to meet the CPSC standard for bicycle helmets, is also acceptable.

### Where can I get a helmet?

Helmets meeting CPSC safety standards are available at bicycle shops and at some discount, department, and toy stores in adult, children, and toddler sizes and styles. If you buy a helmet online, buy from a familiar retailer based in the United States and check the label to be sure it meets the CPSC standard. Do not resell, donate, or buy a used bike helmet because it may be too old to provide protection or may have been in a crash.

### Which is better, hard-shell or soft-shell helmets?

The essential part of the helmet for impact protection is a thick layer of firm polystyrene, or plastic foam, that crushes on impact, absorbing the force of the blow. All helmets require a chin strap to keep them in place in a crash.

**Hard-shell helmets** also have a hard outer shell of plastic or fiberglass that provides a shield against penetration by sharp objects and holds the polystyrene together if it cracks in a fall or crash. These helmets are sturdier but tend to be heavier and warmer than the soft-shell models.

**Soft-shell helmets** have no hard outer shell but are made of an extra-thick layer of polystyrene covered with a cloth cover or surface coating. The cloth cover is an essential part of many soft-shell helmets. If the helmet comes with a cover, the cover must always be worn to hold the helmet together if the polystyrene cracks on impact.

Both types of helmets meet CPSC standards; the main difference is style and comfort. The soft-shell helmets are lighter than the hard-shell versions but may be less durable.

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## **How should a helmet fit?**

A helmet should be worn squarely on top of the head, covering the top of the forehead. If it is tipped back, it will not protect the forehead. The helmet fits well if it doesn't move around on the head or slide down over the wearer's eyes when pushed or pulled. The chin strap should be adjusted to fit snugly.

## **Are there helmets for infants?**

Yes. Many infant-sized helmets are of the soft-shell variety. They are light, an important consideration for small children whose necks may not be strong enough to comfortably hold up a hard-shell helmet. Babies younger than 1 year have relatively weak neck structure. Neither helmets nor bike traveling is recommended for them.

## **How long will a child's helmet fit?**

An infant's or child's helmet should fit for several years. Most models have removable fitting pads that can be replaced with thinner ones as the child's head grows.

## **Can a helmet be reused after a crash?**

In general, a helmet that has been through a serious fall or crash should be retired with gratitude. It has served its purpose and may not provide adequate protection in another crash. If you are uncertain whether the helmet is still usable, throw it away.

From Your Doctor

The information in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

# KEEP KIDS SAFER IN CRASHES



## BELT-POSITIONING BOOSTER SEATS: SAFE AND EASY TO USE

A booster seat raises your child up so that your vehicle's lap-and-shoulder belt fits correctly. This will help to prevent injuries in a crash. Your child needs a booster seat when he reaches the top weight or height recommended for his child safety seat, his shoulders are above the top harness slot, or his ears have reached the top of the seat. Children should use a booster seat until they are between 8 and 12 years of age.

### Why aren't seat belts good enough?

- Seat belts are designed to fit adults. Until your child is big enough for a seat belt to fit correctly, she needs a booster.
- Boosters help to keep your child protected in a crash. While using any restraint is better than none, boosters are better at preventing injuries than seat belts. In a crash, seat belts alone (without a booster) can cause serious injuries to your child's abdomen, neck and back.



*Backless booster with  
belt-positioning strap*

### How do you use a booster seat?

- Read instruction manuals for both the booster and the vehicle before you start.
- Put the booster in the back seat, where there is a lap-and-shoulder belt. Lap-only belts are not acceptable to use with a booster seat.
- After your child is in the booster, pull the lap-and-shoulder belt across her and buckle it.
- Check that the belt crosses her shoulder between her neck and arm and that the lap belt is low and snug on the hips, just touching the thighs.

### What type of booster is best?

- Both high-back and backless types work to make the seat belt fit better. But if the back seat of your car doesn't have a headrest or a high seat back, your child needs a high-back booster.
- Prices start at about \$15 for a backless model. Remember, just because a seat costs more does not mean it is safer.

### What should I do if my child says, "I'm too big for a car seat"?

- Let him choose his own booster seat and teach him how to buckle up.
- Show him how the booster helps him to see out of the window better and makes the shoulder belt more comfortable.
- Remember not to call the booster a child seat or car seat.
- Finally, tell your child that the car will not move until everyone is buckled in correctly.



*High-back booster*

### When is it safe to move my child to an adult seat belt?

- Keep your child in a booster until he is about 4 feet 9 inches tall, which is usually when he is between 8 and 12 years old. This is about the time when adult seat belts fit properly.
- Here's how you can tell when your child is ready for an adult seat belt:
  - He is tall enough to sit against the back of the car's seat with his legs bent at the knees and feet hanging down.
  - The shoulder belt lies across the chest, not at the neck or face.
  - The lap belt is low and snug across the thighs, not across the soft abdomen.

**LEARN MORE:**  
215-590-5437  
[chop.edu/carseat](http://chop.edu/carseat)  
[chop.edu/safekids](http://chop.edu/safekids)

*Developed in partnership with the Injury Prevention Program  
at Children's Hospital of Philadelphia.*



**Children's Hospital  
of Philadelphia®**

Center for Injury Research & Prevention



## Bicycle Safety: Myths and Facts

Learning to ride a bike is a developmental milestone in the life of a child. Yet all too often children are seriously injured, or even killed, when they do not follow basic bicycle safety rules. Following is a list of common bicycle safety myths, coupled with the correct information you need to teach your children about safe bike riding. These facts will help you and your children make every bike ride safe.

**Myth:** My child doesn't need to wear a helmet on short rides around the neighborhood.

**Fact:** Your child needs to wear a helmet on every bike ride, no matter how short or how close to home. Many injuries happen in driveways, on sidewalks, and on bike paths, not just on streets. In fact, most bike crashes happen near home. A helmet protects your child from serious injury and should always be worn. And remember, wearing a helmet at all times helps children develop the helmet habit.

**Myth:** A football helmet will work just as well as a bicycle helmet.

**Fact:** Only a bicycle helmet is made specifically to protect the head from any fall that may occur while biking. Other helmets or hard hats are made to protect the head from other types of injury. Never allow your child to wear another type of helmet when riding a bike, unless it is a multisport helmet certified for bicycle use by the US Consumer Product Safety Commission.

**Myth:** I need to buy a bicycle for my child to grow into.

**Fact:** Oversized bikes are especially dangerous. Your child does not have the skills and coordination needed to handle a bigger bike and may lose control. Your child should be able to sit on the seat, with hands on the handlebars, and place both feet on the ground. Your child's first bike should also be equipped with foot brakes because your child's hand muscles and coordination are not mature enough to control hand brakes.

**Myth:** It's safer for my child to ride facing traffic.

**Fact:** Your child should always ride on the right, with traffic. Riding against traffic confuses or surprises drivers. Almost one-quarter of bicycle-car collisions result from bicyclists riding against traffic.

**Myth:** Children shouldn't use hand signals because signaling may cause them to lose control of their bikes.

**Fact:** Hand signals are an important part of the "rules of the road" and should be taught to all children before they begin to ride in the street. They are an important communication link between cyclists and motorists. Any child who does not have the skills necessary to use hand signals without falling or swerving shouldn't be riding in the street. Many crashes involving older children occur when they fail to signal motorists to their intended actions.

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**Myth:** Bike reflectors and a reflective vest will make it safe for my child to ride at night.

**Fact:** It's never safe for your child to ride a bike at night. Night riding requires special skills and special equipment. Few youngsters are equipped with either. Never allow your child to ride at dusk or after dark.

**Myth:** I don't need to teach my child all of this bicycle safety stuff. I was never injured as a child. Biking is just meant to be fun.

**Fact:** Riding a bike is fun—if it's done safely. Unfortunately, most people don't realize hundreds of thousands of children are seriously injured each year in bicycle falls. Worse still, hundreds of children die of them each year. Although you may have been lucky enough to survive childhood without a serious bicycle-related injury, you shouldn't count on luck to protect your child.

Teach your child these basic safety rules.

1. Wear a helmet.
2. Ride on the right side, with traffic.
3. Use appropriate hand signals.
4. Respect traffic signals, including stop signs.

**Basic safety measures like these can keep bicycle riding enjoyable and safe for your child.**

From Your Doctor

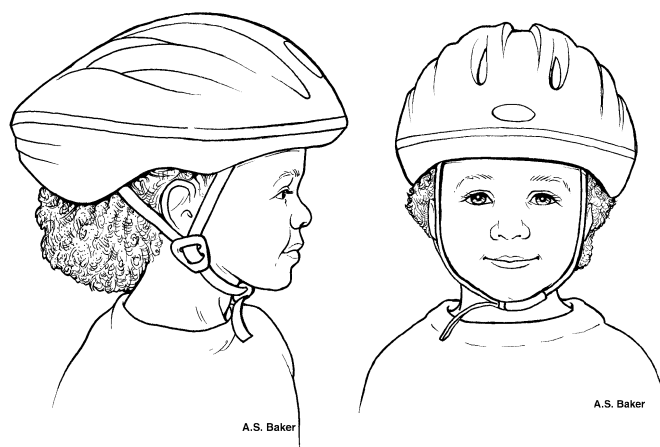
The information in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

## Bicycle Safety

Every year bike crashes kill more than 200 children and send another 350,000 under the age of 15 to hospital emergency rooms. The single most effective safety device available to reduce head injury and death related to bicycle crashes is a helmet. Bike helmets can reduce the risk of head injury by up to 85%.

### How to Choose a Bike Helmet

- Look for the label that says the helmet meets U.S. Consumer Product Safety Commission safety standards or those developed by ASTM, SNELL or ANSI.
- Choose a helmet your child likes.
- Choose a helmet that fits comfortably, securely and correctly.
- Check the helmet each year to make sure it still fits your child. Growing children may need a new helmet every few years.



**Picture 1** How to wear a bike helmet.

### How to Wear a Bike Helmet

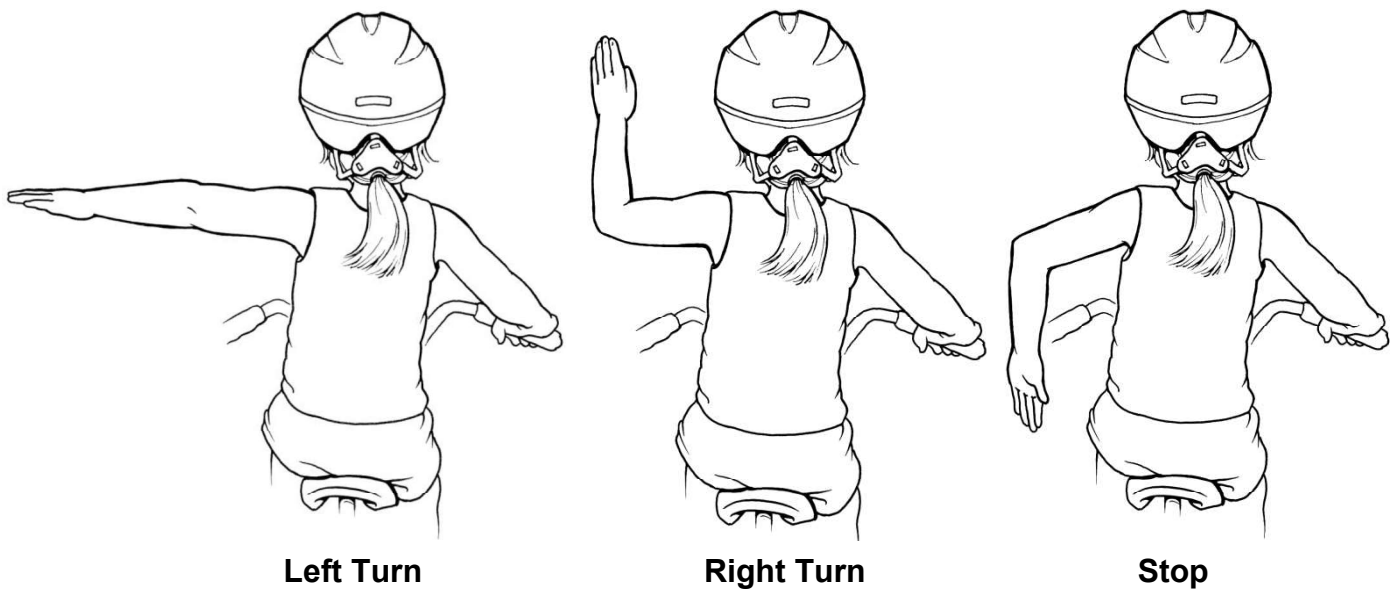
- Make sure the helmet is worn low and level on the forehead (Picture 1). The forehead should be covered, with no more than 1-2 finger widths between the eyebrows and the helmet.
- The helmet should not tip too far forward or too far back.
- The side straps should form a “Y” beneath the child’s ears.
- Make sure you ALWAYS buckle the chin strap. The helmet should be snug. It should not slide from side-to-side or front-to-back. No more than 1 or 2 fingers should fit under the strap.
- Replace any helmet that has been in a crash. Even small cracks may make it less effective in preventing future injury.
- Always wear a bike helmet every time and everywhere you ride.

## Helpful Hints

- Be consistent. Always insist your child wear a helmet when riding on wheels. That includes skates, scooters, skateboards, etc. Helmets should be worn for many winter sports too, including sledding, skiing and ice skating.
- Start early. Begin the helmet habit with your child's first set of wheels.
- Be positive. Praise your child for wearing his or her helmet.
- Practice what you preach. When you ride on wheels together, wear your own helmet. Children always learn by example.

## Safe Cycling Tips

- Stop and look in all directions for traffic when crossing the street.
- Obey all traffic signs and lights.
- Look to the front and to the rear before making a right or left hand turn and use approved hand signals to show the direction you will be turning (Picture 2).
- Ride one person to a bike.
- Never ride at night or in the rain.
- Check your child's bicycle for correct fit and properly working parts such as wheels, tires and brakes.



**Picture 2** Approved hand signals.



# What Adults Can Do to Help Youth Experiencing Bullying

As an adult, you are an important catalyst in guiding kids through addressing and preventing bullying. When young people experience bullying, they often feel like there's nothing that can be done to stop it. Whether you're a parent, educator, or concerned adult, there are ways you can help.

## 1. Listen

When a child approaches you about a bullying situation, be prepared to listen without judgment and provide a safe and supportive space in which the child can share their experience and work out their feelings. Recognize that it can be hard to talk about the experience. They may be experiencing the emotional effects of bullying—insecurity, embarrassment, fear, vulnerability, anger, or sadness—and it could take time for them to fully share their story.

## Help the child recognize the signs of bullying

Adults can prepare themselves to talk with children by considering how they are going to handle the child's questions and emotions. They can also decide what information they would like to give the child about bullying.

When a child begins to tell their story, listen and ask questions that encourage them to talk. Even if you know all the students involved, don't make assumptions. Bullying is frequently socially nuanced; there may be important details that are overlooked or not reported, not every bullying situation is as it seems on the surface, and there is always more than one side to the same story. Respond with empathy, concern, and care. It's important to learn as much as possible about the situation, such as how long the behavior has been happening, who has been involved, and what steps have been taken. Giving the child space to talk through their experience and emotions is an important step. Bullying can be traumatic and opening up about the experience could take time. Be patient and allow the child to confide in you on their own terms.

## 2. Provide support and encouragement

Reassure the young person confiding in you that you are glad they're talking about their experiences. Let them know that they are not alone, and you are there to help. Just as bullying can be an emotional issue for the child experiencing it, bullying can also be emotional for you. It's natural to experience your own feelings, like frustration, anger, confusion, or sadness, but always remember that the child is now looking to you for help.

**The best way to help the child is by taking measures that focus on their emotional and physical health, such as keeping their self-esteem intact and making sure they feel safe at school.**

It's important to recognize that some typical adult responses to bullying are not helpful for children. Adults sometimes have the impulse to tell the child to stand up to the person who is bullying, to advise them to ignore the bullying, or to take matters into their own hands. While these reactions express genuine concern and good intentions, they are likely to be ineffective.

## How to show your support

- Tell the child that it is NOT their fault and bullying is never justified
- Remind them they are NOT alone
- Explain that it is your responsibility as an adult to help them and ensure they feel safe and protected
- Let them know that they deserve respect just like everyone else
- Assure them that they have a right to feel safe at school and at home
- Help them create an action plan by thinking through the possible ways of responding and moving forward

## 3. Empower

After learning the child's story, it's time to think in terms of "self-advocacy" for the child. This process means first letting the child *communicate what they need* and then *helping the child get what they need*. One idea to encourage self-advocacy is to work together to create an action plan outlining a strategy and response to the bullying. When developing the plan, talk with the child about how they would like the situation to be different and how to make that happen.

Involving the child in defining a solution to the bullying can be powerful. So often, those who are bullied feel helpless and think nothing will ever change. Working together creates solutions that are inspired by the child's strengths and abilities and can help build confidence and resilience.

## Student Action Plan

A document designed to help develop a customized strategy to address bullying. Incorporates a 3-step process designed to think through solutions fit for the individual.

[PACER.org/bullying/info/publications/student-action-plan.asp](https://PACER.org/bullying/info/publications/student-action-plan.asp)

### 4. Think who else should be involved

As part of developing a plan, it is also helpful to identify others who can help the child. Think about those who influence their life. When a child is being bullied it can impact their education, emotional well-being, and even physical health. It's important to think through not only what can be done to address the bullying, but also how to build the child's confidence, increase resiliency, and develop self-advocacy skills.

When dealing with a bullying situation, it's important to involve a parent or guardian and adults at school such as teachers and faculty members to ensure the child feels supported at home and at school. A trusted physician or counselor can be included to help with issues like anxiety, depression, and self-image. You may also want to talk with a coach or the leader of a club activity to determine if there are any bullying issues among the participants, or if being part of the team or club could provide the child with stronger social connections. Work with the child to identify whom you want to contact, what you want to ask them, and how you will be involved moving forward. The next step is to share this action plan with the other adults involved in the child's life.

### 5. Understand local and federal laws and policies

In cases of bullying, it's important to have a working knowledge of student rights. **Follow these steps** to ensure that you understand all the help and support available.

- **Document all events and communication.** This is important because written records provide a history. Keep your writing factual, not emotional, and include background on any steps you plan to take or have already implemented. Save all written correspondences, like emails, texts, and posts on social media.

[PACER.org/publications/bullypdf/BP-3.pdf](https://PACER.org/publications/bullypdf/BP-3.pdf)

- **Check your state's legislation on bullying.** Each state has different laws and policies pertaining to bullying, along with requirements for how schools should respond.
- [stopbullying.gov/resources/laws](https://stopbullying.gov/resources/laws)

- **Contact your school** and request a copy of the district's bullying policy.
- **See if there is a Safe Schools bullying prevention office for your state's Department of Education;** it can be a local resource to learn more about your state's legislation.
- **Determine if the bullying is based on race, national origin, sex, age, disability, or religion.** Bullying of this nature can qualify as discriminatory harassment. Schools are required to respond to these situations under federal civil rights laws. [stopbullying.gov/resources/laws/federal](https://stopbullying.gov/resources/laws/federal)

### Did you know?

Through legislation, education codes, and model policies, state and local lawmakers and educators have taken legal and administrative action to prevent bullying and keep all students safe. Ask your school for their policy. Access detailed information on a specific state's protections at [StopBullying.gov](https://StopBullying.gov).

## Why is it important for adults to get involved?

- If students could stop bullying on their own, they would
- Bullying can make kids feel powerless; they need to know someone is there for them
- Kids see adults as role models and kids will follow their example
- Adults set the rules, so adults need to be the ones who enforce them

# What Youth Can Do to Help Peers Who Are Experiencing Bullying

Think about what can happen as a result of being bullied:

- Feeling all alone
- Believing that no one cares
- Questioning whom you can trust
- Wondering if anything will ever change

That is a lonely place to be.

Now imagine how that could be different. Think about how powerful it would be for someone who feels all alone to have another person reach out to them, especially someone their own age who understands what they might be feeling and shows that they care. **That person can be YOU.**

## Peer support makes a difference!

Have you ever thought, “It’s none of my business—I should just ignore it and walk away”? Put yourself in the other person’s place. If you were being pushed around, laughed at, gossiped about, made fun of, or ignored on purpose, wouldn’t you want someone to be there for you? Know that when someone is hurting, especially emotionally, your support as a peer is incredibly meaningful!

### 1. Be available for conversation

Students who experience bullying often don’t tell anyone. They tend to keep it all inside, without sharing the pain they’re experiencing. Maybe they are nervous, afraid, or embarrassed. Maybe it’s because they feel they don’t have anyone they can talk to. If you know someone being bullied, let them know you care by encouraging them to talk about their experiences. Your goal doesn’t need to be fixing the problem; instead, focus on letting them express their story and their emotions. You might be the first person they tell.

**Here are some ways to connect:**

- Listen without judgment
- Let them know they have the right to talk about what’s happening
- Ask questions that allow them to talk through their experience and emotions
  - Want to tell me what happened?
  - How are you doing?
  - What would be helpful to you right now?
- Show empathy for what they are experiencing
- React with support and compassion

- Tell them it's not their fault
- Help them think through how they can tell others about their experience
- Support them when they reach out to a parent or other trusted adult

## 2. Respond with intentional acts of kindness, acceptance, and inclusion

Recognizing what to do when you witness someone being bullied is complicated. There is not always a clear answer and a response that works well for one person may not be right for someone else. Know that when peers look out for each other, it has a tremendously positive impact on the student being bullied. Bullying brings people down. You can build them back up with encouraging words and actions.

Individuals often think the only way they can help is by confronting those doing the bullying. The reality is that in a bullying situation, confrontation is usually not safe. ***The one thing anyone can do to help is show support for the person being bullied.*** There are so many ways to do this. Pay attention to what is happening, think about what you can do, and then **act on it**.

### Here are some ways to be intentional with your support:

Speak up, your words matter. Try saying:

- I'm here for you and I want to help
- You didn't deserve to be treated that way
- You are a good person in a bad situation
- It was wrong of that person to do that
- Can I help you find an adult to talk to?

Reach out; your actions are important.

- Connect with them during class breaks, even just to say hi
- Invite them to sit with you at lunch
- Walk with them to class
- Invite them to do homework with you and a group of friends
- Ask them to play a video or card game during free time
- Show them a video or photo that will guarantee a smile or laugh
- Be patient and respectful if someone takes longer to do something or does it in a different way

Be a friend, build them up.

- Remind them that no one deserves to be disrespected and that bullying won't last forever
- Even if they don't want to talk, invite them to participate in conversations and make sure they feel included
- Recognize what they do well and compliment their talents
- Ask them questions about their activities or interests, and encourage them to talk about things that are important to them
- Make your non-verbal communication more inclusive and intentional, such as leaving seats open at your lunch table rather than filling chairs with belongings

## 3. Redirect the situation

Research shows that peers can be very effective at intervening in a bullying situation. A creative and sometimes challenging solution is to change the direction of the situation to a more positive course. It might take some practice, planning, and extra thought—it's not easy to speak up against a wave of negativity—but research also shows that when one person speaks up, others will follow.

## Support the person being bullied

Understand that *this is not about getting in the middle of a fight or confronting those who are bullying*. In fact, confrontation can be counterproductive and unsafe. The focus should be on supporting the person who is being bullied.

If you see bullying in person, you can:

- Help the person being bullied get away from the situation
- Ask them to walk with you
- Invite another friend or two to join you as there is safety and support in numbers
- Change the subject when your peers start tearing someone down
- Say something positive about the person being bullied
- Take the direct route and, if you feel safe, ask the person doing the bullying to stop
- Distract the person who is bullying by saying something like, “A teacher is coming” or, “Someone is taking pictures”
- Find an adult who can quickly intervene

If you see cyberbullying, you can:

- Write something positive in response
- Contact the person being bullied and let them know you are there for them
- Take a screenshot of the bullying
- Report it to a parent or an adult at school
- Report the bullying content to the social media platform and ask to have it removed

## Redirecting a situation

**When redirecting a situation, remember: When everyone is speaking negatively about another person, your voice becomes more important than ever. While it’s important to speak out against that behavior, it may not always feel safe to do so. Sometimes you may not be sure what to do in the moment, but you want to help to make sure that person feels supported. Talk to an adult you think would handle the situation in the most effective way and ask for their advice.**

### What does it look like to redirect a situation?

During class your teacher announces the winner of the science fair: a quiet, intelligent girl who doesn’t have many friends. Immediately, a bunch of your classmates start mocking her, joking about how she’ll never get a date to prom unless she makes one in the lab herself. You can see that their words are really upsetting the girl. You feel awful—she should be able to celebrate her big win.

What can you do? The whole class is starting to turn on this girl. You’re not sure that you’re okay with telling them directly to stop making fun of her, but maybe there’s a way for you to divert the situation. You take another look at her project on display in the front of the room and realize that it’s a pretty cool cell-phone-controlled robot. You start talking loudly to one of your friends about how cool it is and ask the inventor if you can try it out. Pretty soon the rest of the class shifts their attention to watch the robot zoom around the classroom. Now everyone is focused on this girl’s invention, rather than tearing her down. You can then go to her after class, congratulate her on her well-deserved award, and ask if she would like you to help her talk with the teacher about what happened.

#### 4. Talk with an adult

When you witness bullying, whether you see it in person or online, it can be upsetting and difficult to respond to. Some situations are clear cut, like physical fights, and you know that telling an adult will keep everyone safe.

Many bullying situations can be much more complicated. When the bullying happens through gossip, name calling, intimidation, or trying to damage someone's reputation, it can involve private, confidential details that another person doesn't want shared. Maybe your friend is doing the bullying and you don't want them to get in trouble.

In situations where you're not sure what to do, seeking advice from an adult you trust can be helpful. An adult, such as a parent or a favorite teacher, can help you think through different ways to respond while ensuring everyone stays safe.

##### Here are some ideas for talking with an adult:

- Let them know that you're coming to them for advice because someone is going through a situation that they can't fix on their own
- Sometimes bullying involves a lot of personal details; if you don't want to share everything, let the adult know that there are certain things you are not ready to share and ask them to respect that
- Emphasize that you want the bullying to stop and that the behavior has hurt the person targeted, as well as others who are involved
- Ask, "What can be done so that we can help and we can all feel safe?"
- Listen to the advice, seek clarification on anything that doesn't make sense, and share your own ideas
- Decide on what steps you can take together
- Clarify what your role should be
- Thank them for listening and caring

#### 5. Encourage others to come together against bullying and unite for kindness, acceptance, and inclusion

Have you ever heard the old saying, "There is power in numbers"? In the world of bullying prevention, this is especially true. While it is absolutely important that each person does what they can, individual actions are magnified when we join forces. When a group of individuals works together for a common cause, that is when real change happens.

##### Get others involved by:

- Starting a club or activity at your school that focuses on inclusion. For example, invite students with and without disabilities to work together on an art project each week.
- Holding an open event where board games are played, resources are shared, anyone can participate, and everyone has someone to work with
- Organizing a Unity Day event (third or fourth Wednesday of October) at your school or in your community
- Creating "safe spaces" on playgrounds that are monitored by peers and adults
- Starting a committee that focuses on ways to make your school, club, team, or organization more accepting of all members

## Do your best!

Do your best to help, but also know that each bullying situation is different. It's not up to you to solve it, but recognize that your support can make a difference.



# Child Passenger Safety: Car Seats and Booster Seats

Young children are safest riding in a car seat or booster seat in the back seat of the car. There are many choices on the market:

- Rear-facing only
- Convertible
- 3-in-1
- Combination

Some car seats face only one direction while others can change direction. Knowing which seat to use and when to change to another can be confusing. The safest decision (best practice) is based on a combination of recommendations from the American Academy of Pediatrics (AAP), the National Highway Traffic Safety Administration (NHTSA) and Ohio Law. It is also important to know the guidelines specific to each model of car seat. These can be found in the owner's manual.

Ohio law requires that children ride in a car seat or booster until the child is 8 years old or 4' (feet) 9" (inches) or 145 cm (centimeters) tall.

## Best practice guidelines

<i>Child's age</i>	<i>Type of car seat</i>	<i>Best practice recommendation</i>
Birth to 12 months	Rear-facing only * Convertible 3-in-1	Under age 1 <b>must</b> ride rear-facing.
12 to 23 months	Convertible 3-in-1	Stay rear-facing until at least age 2, unless child is above the height or weight limit of the car seat.
2 to 3 years	Convertible 3-in-1 Combination	Stay rear-facing as long as possible. If above height or weight limit of rear-facing car seat, switch direction to face forward, or change to a different car seat.

<i>Child's age</i>	<i>Type of car seat</i>	<i>Best practice recommendation</i>
4 to 7 years	Convertible 3-in-1 Combination Booster	Stay in a car seat facing forward for as long as possible before switching to a booster. Can use a booster seat if above height or weight limit of the car seat.
8 to 12 years	3-in-1 Booster Adult seat belt	Use a booster until: 1) Child's back and bottom are flat against seat of car. 2) Shoulder belt fits across the middle of the shoulder and chest. 3) Lap belt fits low across the hips. 4) Knees bend at the edge of the seat of the car. 5) Can sit with feet on the floor for the whole trip. <b>Must</b> be "yes" to all "5 steps" to use the adult seat belt. Ohio law allows the use of an adult seat belt at age 8. All children under age 13 should ride in the back seat.

\* Note: Car seats that can only face the back of the car are called "rear-facing only." Convertible and 3-in-1 car seats can be placed facing either the back or to the front. Combination and 3-in-1 car seats can turn into a booster.

## Height guidelines common to car seats

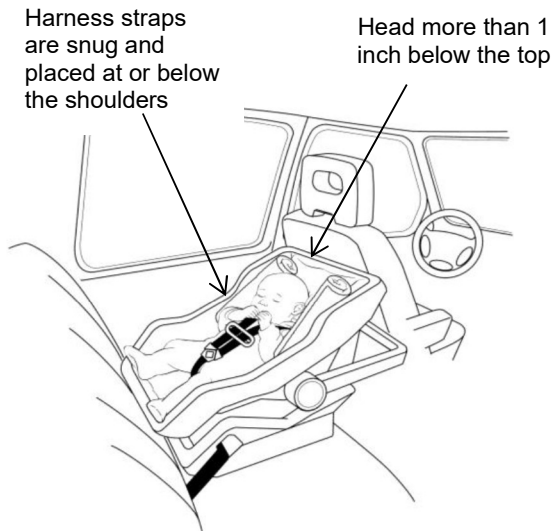
The height limit in all car seat models is gauged by observing where the child's head and shoulders rest in the car seat.

The height of the child's head should be (Pictures 1 and 2, next page):

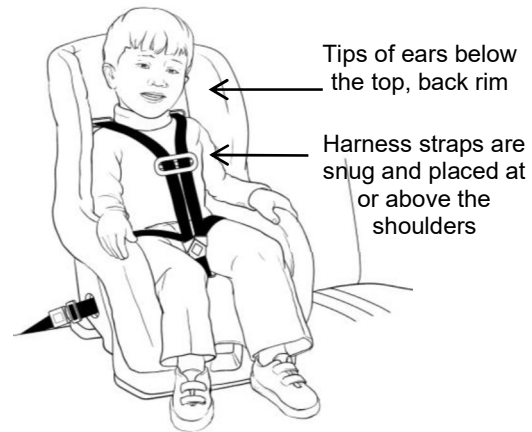
- in car seats that face the back of the car, 1" or more below the back top edge of the car seat
- in car seats that face the front of the car, the head can be higher than the back top edge of a car seat but the tops of the child's ears need to be below the top edge.

The harness straps need to be (Pictures 1 and 2, next page):

- in car seats that face the back of the car, at or below the level of the shoulders
- in car seats that face the front of the car, at or above the level of the shoulders



**Picture 1** Rear-facing car seats



**Picture 2** Forward-facing car seats

## Where your child should ride and airbag safety

Children under the age of 13 should ride in the back seat. Sitting in the front seat could cause serious injury if the airbag goes off (inflates).

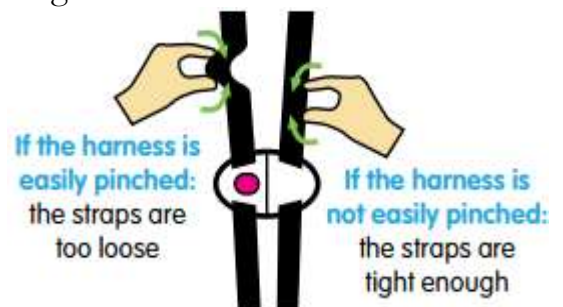
- If a child must ride in the front seat for any reason, the front seat air bag should be OFF, the car seat or booster needs to be secured and the seat pushed back as far as possible.
- **Never** place a rear-facing child in the front seat of a vehicle unless the front air bag can be switched OFF manually (by hand).

## How to adjust the harness straps and headrest

Harness straps give the best protection from injury in a crash. They are raised and refitted as the child grows. The harness straps should always be snug.

**In colder weather, always remove the child’s coat or puffy outerwear (snowsuit) before checking the fit and readjusting the harness straps.**

- To make sure that the harness is tight enough, do the “pinch test” (Picture 3). When the child is sitting in the car seat, put your thumb and first finger on the strap at the child’s collarbone. Try to pinch the strap. If you can pinch a fold, the harness is too loose and should be tightened more. If your fingers slide off, it is tight enough.



Source: NHTSA.gov/therightseat

**Picture 3** The “pinch test” helps to check if harness straps are tight enough.

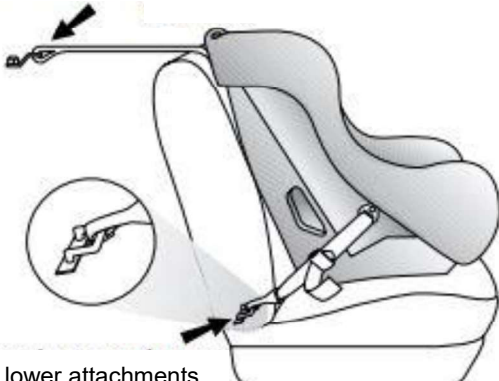
- Some car seats let the headrest be raised so that the back of the car seat can become taller. The head rest needs to be at the right level for the child’s head (Picture 2, page 3).
- Make any adjustments before putting (installing) the seat in the car.

## How to install the car seat

Both the owner’s manual of the vehicle and the car seat manual need to be used to know how to install a car seat properly.

1. The car seat needs to be installed at the correct angle. A rear-facing car seat needs to be tilted as far back as the car seat allows (Picture 1, page 3). A forward-facing car seat is always in the upright position (Picture 2, page 3). The owner’s manual will show the correct position.

Attach top tether from the child seat to the anchor in the vehicle



Fasten lower attachments on the child seat to lower anchors in the vehicle

Source: safecar.gov

**Picture 4** The “LATCH” system uses the lower anchors *and* a tether strap to secure the car seat to the vehicle. For many cars the system can only be used on seats closest to the windows.

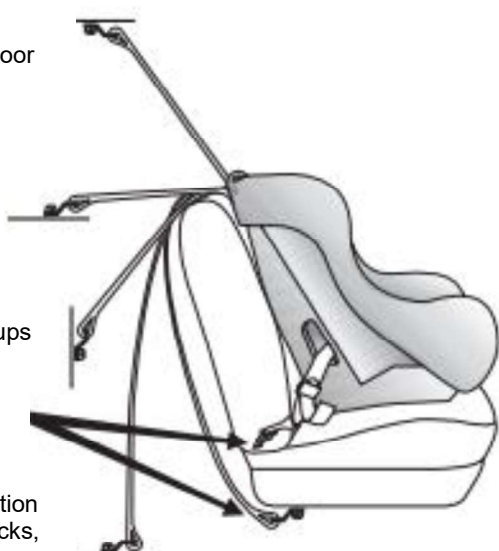
Ceiling or frame around the rear door

Rear shelf of sedans

Back wall of pickups

Vehicles with reinforced seats

Cargo floor of station wagons, hatchbacks, vans and SUV’s



Source: NHTSA.gov

**Picture 5a** This car seat is secured using the adult seat belt, which can be threaded through slots in the car seat and then buckled.

**5b** All car seats that face forward need to be secured at the top using a tether strap. The place to hook the tether strap to the vehicle varies with each type of car.

2. The car seat needs to be secured tightly to the vehicle. Use the car seat’s anchor (“LATCH” system, Picture 4, page 4) **or** the vehicle’s adult seat belt (Picture 5a, page 4). Either way is safe but both should not be used at the same time.
3. Car seats that face forward need to be secured with a tether strap. It should be hooked to the vehicle and pulled tight. The place to hook the tether strap varies in each type of car (Picture 5b, page 4). **The tether strap should always be fastened whether you use the LATCH system or the adult seat belt to fasten the car seat to your vehicle’s seat.** Tether straps are not used when the car seat faces the rear.
4. Check to make sure the car seat is snug. Place your hands on both sides of the car seat where the lower anchor (LATCH) straps start. If using the adult seat belt instead, place your hands where it is threaded through the slots. Tug on the car seat. It should not move more than one inch from side-to-side or front-to-back.

## How to place a child in the car seat

**Always remember to remove the child’s coat or puffy outerwear (snowsuit) before buckling him or her into the car seat.**

1. The child’s back and bottom should be flat against the car seat.
2. The harness straps come over the shoulders and are fastened in 2 places - over the chest and between the legs (Pictures 1 and 2, page 3). The chest clip should be raised to the level of the child’s armpit (Picture 6).

**Both the chest clip AND the buckle between the legs need to be fastened. Using one but not the other will not hold your child in a crash.**

3. Repeat the “pinch test” to check the fit of the harness straps (Picture 3, page 3).
4. For small babies, rolled up receiving blankets can be placed on either side of the head and body for support (Picture 6). Never place anything behind the child’s back or under the child unless it comes with the car seat.
5. For premature babies, ask the health care provider what car seat should be used.



**Picture 6** Chest clips are raised to armpit level. Rolled blankets can support the head and body.

## Using booster seats

The minimum requirements for a child to use a booster seat are:

- at least 4 years old
- weighs at least 40 pounds (18 kg)

- has outgrown the car seat’s weight or height limits
- can sit still the whole ride

A child needs to use a booster seat until:

- at least 8 years old or 4’ 9” or 145 cm tall (Ohio Law)
- the adult seat belt fits properly (See “5 step test,” below)

Booster seats use the vehicle’s adult seat belt instead of harness straps to secure the child. The lap (across the waist) AND the shoulder (across the chest) belt are used at the same time.

In most boosters, the lap belt goes under the booster’s armrests. It should fit low over the hips and thighs. The shoulder belt crosses the center of the child’s shoulder and stretches across the chest (Picture 7). It should not cross in front of the face or the neck.



**Picture 7** With booster seats, both the lap and shoulder belt need to be used.

**Do not allow your child to put the vehicle’s shoulder belt behind him or under his arms.**

If the vehicle has a low seat back or no headrest, use a booster with a high back. In vehicles with only a lap belt, a car seat with harness straps should be used for as long as possible. **It is not safe to secure a child in a booster seat using only a lap belt.**

### **Adult seat belt: the “5 step test”**

A child no longer needs to use a car seat or booster when he can pass **all** steps in the “5 step test.” This means:

1. The child’s back and bottom are flat against the seat of the car.
2. The shoulder belt crosses the center of the shoulder without crossing the face or the neck.
3. The lap belt fits low over the hips and upper thighs and not on the belly.
4. The child is tall enough to sit with knees bent over the edge of the vehicle’s seat without slouching, and the feet are able to rest flat on the floor.
5. The child can ride like this for the whole trip.

**Never let children put the shoulder belts behind them or under their arms. This could cause them to get hurt in a crash.**

Adult seat belts should be fastened at all times when traveling.

## **Used car seats**

Used car seats should not be reused unless:

- You are certain they have never been in a crash.
- They have all of the pieces, including the instructions.
- They have been checked for recalls.
- They are not expired. Seats should not be used for more than 6 years, unless the manufacturer specifies a longer use. The expiration date can be found on the back of the car seat.

If you would like more information, call the Nationwide Children's Hospital's child passenger safety specialists at 614-722-6524 or call the Auto Safety Hotline at 1-800-424-9393.

# Cyberbullying Prevention

## Questions Parents Should Ask Their Children About Technology

Sameer Hinduja, Ph.D. and Justin W. Patchin, Ph.D.



It is important to talk with youth about what they are doing and seeing online. Most of the time, they are using technology safely and responsibly, but sometimes they run into trouble. As a parent, you want to establish an open line of communication so that they are comfortable turning to you in times of crisis, whether perceived or actual and whether online or off.

Below we list several questions that you can use to get the proverbial ball rolling. Be strategic in how you approach your children with these queries: don't badger them with questions first thing in the morning or when they are stressed out about something at school. Find a time when they are open to your interest in these topics. Maybe it is during a longer car ride to an activity that they are really looking forward to. Or bring them up while you are eating ice cream on a hot summer afternoon. If you catch them at the right time, they will prove to be a treasure trove of information that can help you better understand what they are doing online.

### GENERAL TECH USE

What is your favorite app? What do you do on it?

What apps or websites are your friends into these days?

Are you ever contacted by someone online that you don't know? If yes, what did they want? What did you do? How did you respond?

Have you ever received a text message from someone that made you upset? How did you respond?

How do you keep yourself safe online?

Do you get concerned that people will read what others have written about you online that is not true but think it's true?

Do you ever talk to anyone online that isn't in your school?

### CYBERBULLYING

Do you ever argue or post hurtful updates on your Instagram, Snapchat, Twitter, or another social media site? Why?



Have you ever had to delete a post or comment on your page that was written by someone else?

Does cyberbullying happen a lot? Would you feel comfortable telling me if you were being cyberbullied?

Do you think your school takes cyberbullying seriously?



Have you ever had to contact a teacher or someone else at school because of a cyber-threat? If so, did they do something about it and did it help?

Does your school have a way to anonymously report bullying and cyberbullying?

Do you feel like your friends would be supportive of you if you told them you were being cyberbullied?

Do you ever get verbally attacked during online games?

Have you ever had to leave an online game because someone was bothering you online?

Have rumors ever started about you in school, based on something said online?



Did you find out who started the rumor? What did you do when you found out?





Have you ever blocked somebody online because you felt harassed? If so, did that make it stop ?

## SEXTING



Have you ever had anyone do or say anything sexually inappropriate to you online? How did you deal with it?

Has anyone ever asked any of your friends for an inappropriate photo or video? Has anyone ever asked you?

Do you know about the consequences that can result if you send inappropriate pictures (child pornography laws)?

How might sexting affect the reputation of those involved?

Is there a way to participate in sexting while still making sure that pictures or video sent in trust are never shared outside that relationship?

Has any adult at school ever talked with you about sexting?

What might participation in sexting say about your level of maturity, and your readiness to be in a healthy, mature romantic relationship?

Have you heard stories of other kids from your school (even those who may have graduated) or your community who have dealt with major fallout from sexting?

## SAFE SOCIAL MEDIA USE



What social media apps do you use most frequently? How many friends or followers do you currently have on each? Are your accounts set to Public or Private?

What kind of people have you met on social media, outside of people you know at school? Do you feel like you can trust them? Do you ever worry that they might use your posts or content against you in \*any\* way?

Do you get a lot of friend or follow requests from strangers? If so, how are you handling that?

Do you use Twitter? What do you like or dislike about it? Who do you follow and who follows you?

Do you use Snapchat? Can you explain to me how it works? Do you think your sent and received snaps are really completely gone?

Do you know how to use the privacy settings on Instagram, Facebook, Snapchat, YouTube, and Twitter? What about on the games and gaming networks you use?

Do you have them set so that only those you accept as friends can see what you post? Are you sure about this?

What kind of personal information are you posting or sharing online? Have you ever posted your full name? Age? School? Phone number? Current location?

Have you ever been tagged in a photo or video in a way that made you upset?

Do you know how to edit your privacy settings so that if somebody wants to tag you in a post or photo, you have to approve it?



Do you know how to untag yourself in pictures?

Do you feel like social media apps should be used to vent your frustrations? Do your friends vent on social media? Do people comment? What do they say?

What kind of videos are you watching on YouTube? Do you have your own channel? How often are you posting and what kind of reception are you getting from those who see your videos?

Have you ever reported inappropriate videos that you have seen on YouTube? Or any other site or app?

Does anyone else know your password or passcode for any site or social media app? What about for your laptop, or cell phone?

How do you feel about your level of FOMO (fear of missing out) right now? Do you feel like you can control it based on how much you use social media?

Do you ever feel like you're addicted to social media? Has that "addiction" ever messed with your emotions or brought you down or negatively affected other areas of your life?

What do you think you can do to maintain a healthy balance when it comes to social media use?

# CYBERBULLYING TIPS FOR TEENS

It seems like ages ago when the world existed without computers, cell phones, or gaming systems. Nowadays we can't imagine going anywhere without our phones. We hop on the computer and browse the Internet the second we get home, and we spend hours playing games online with people all across the country. Always remember to be careful; with new technology comes new ways to bully others.

## CYBERBULLYING: WHAT IS IT?

Cyberbullying is using the Internet, cell phones, or other technology to send or post images or texts intended to hurt or embarrass another person. Examples include:

- + Posting a threat or slur against someone on a website
- + Posting an embarrassing video about someone on a site such as YouTube or Facebook
- + Spreading a rumor about someone via text message or online
- + Pretending to be someone else online in order to trick, tease, harass, or spread rumors about another person
- + Threatening someone through a live streaming gaming system such as Xbox or PlayStation

## WHY CYBERBULLYING?

When surveyed, 81 percent of youth say that teens cyberbully because it is no big deal. Other reasons are as follows:

- + They don't think about the consequences.
- + They are encouraged by friends.
- + They think everybody cyberbullies.
- + They think they won't get caught.
- + **Remember:** Cyberbullying is a big deal and, more simply, it's wrong. Don't write it, don't forward it.

**For more information check out [www.ncpc.org](http://www.ncpc.org)**

National Crime Prevention Council

2001 Jefferson Davis Hwy Suite 901 Arlington, VA 22202 202-466-6272 [www.ncpc.org](http://www.ncpc.org)

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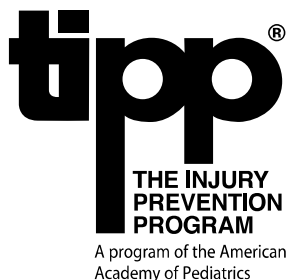
## WHAT CAN I DO IF I'M BEING CYBERBULLIED?

- + Tell an adult you trust about what's going on.
- + Don't delete any of the emails, texts, or messages. They can serve as evidence.
- + Keep a record of incidents.
- + Don't forward any mean messages that spread rumors about you or someone else.
- + Don't cyberbully back. Revenge is never the best answer.
- + If possible, report the incident to the administrator of the website. Many websites including Facebook and YouTube have safety centers to report cyberbullying.
- + Recognize that you don't deserve to be treated that way, and you deserve respect.

## HOW CAN I PREVENT IT?

- + **Refuse to participate in cyberbullying!**
- + Talk to a trusted adult if you know someone who is being cyberbullied.
- + Start an anti-bullying program in your school to educate your peers that cyberbullying is hurtful and wrong.
- + Start (or sign) an anti-bullying pledge in your school where students pledge not to bully others and to speak up if they know someone who is being bullied.
- + Raise awareness of the cyberbullying problem in your community by holding an assembly and creating fliers to give to younger kids or parents.





## Firearms Injury Prevention

About 55 million Americans own firearms. Of the 265 million firearms owned in the United States, 111 million are handguns. Research shows guns in homes are a serious risk to families.

- A gun kept in the home is far more likely to kill or injure a household member than kill or injure an intruder.
- A gun kept in the home triples the risk of homicide.
- The risk of suicide is 5 times more likely if a gun is kept in the home.

### ADVICE TO PARENTS

The best way to keep your children safe from injury or death from guns is to **NEVER** have a gun in the home. Children cannot be hurt by a gun if no gun is near them.

- Do not purchase a gun, especially a handgun.
- Remove all guns from the home.
- Remember that young children simply do not understand how dangerous guns can be, despite parents' warnings.
- Find out if there are guns in the homes where your children play. If so, talk to the adults in the house about how the guns are stored. If you are not confident that the guns are stored unloaded and locked up out of sight and reach, consider having the children play at your house instead.

### FOR THOSE WHO KEEP A GUN IN THE HOME

- Always keep the gun unloaded and locked up.
- Store the bullets in a separate locked place.
- Never share the keys or codes to open the locked boxes with your children.

From Your Doctor

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



## Button Battery Safety

Button or coin-shaped batteries (Picture 1) power many things (devices) we use every day. Examples are (Picture 2):

- key fobs (car keys)
- remote controls
- toys, games, talking books
- watches
- flashing jewelry
- flashing shoes, clothing
- musical greeting cards
- candles, tea light candles
- decorations, ornaments
- medical equipment, meters
- hearing aids
- thermometers
- bathroom scales
- calculators
- cameras



Button batteries are small and shiny. They can range in size from a pill to a quarter. Since they are little, you may not easily see when they fall out of a device. A child can pick up, swallow, or put them in their nose or ear before you know. These batteries may still have power in them even though there may not be enough to make a device work. (To get rid of used batteries, take them to a hazardous waste collection site or a battery store. Some stores will accept them for disposal.)

A button battery or any battery in the body can cause life-threatening injury. The most serious damage happens if your child swallows it. A battery that is stuck in the esophagus (the food pipe or tube that connects the throat to the stomach), can cause serious damage to tissue inside the body in as little as 2 hours. The battery reacts with saliva and lets off an electrical current that burns the tissue. If the injury is very severe, your child may need many surgeries. People have died from burns caused by swallowing button batteries.

## What to look for

If your child swallows a button battery, the symptoms might look like a cold.

- fever
- irritability
- throat pain
- not wanting to eat or drink
- wheezing, difficulty breathing, coughing
- choking, gagging, problems swallowing, vomiting

If your child puts a button battery in their nose or ear, they may have:

- irritability
- fever
- pain or swelling around the ears or nose
- fluid drainage or bleeding from the ears or nose

Sometimes there are no symptoms.

## What to do

If you think your child has swallowed or put a button battery in their nose or ear, **go to the nearest emergency department (ED) right away. Every minute counts.** For more information, call the National Battery Ingestion Hotline at 800-498-8666.

- If your child is over 12 months old and you think they swallowed a button battery in the last 12 hours, you can give 2 teaspoons of honey before taking them to the ED. Repeat this up to 5 more times. Wait 10 minutes between each dose of honey. Stop, if your child vomits or cannot swallow. **Do not delay going to the hospital to obtain honey.**
- Do NOT make the child vomit or let them eat or drink.
- Your child will typically get an X-ray to show if and where a battery is in the body.
- A button battery stuck in the nose, ear, or esophagus, must be taken out as soon as possible to stop further injury.

## Staying safe

- Check every battery-powered device in and around your home and anywhere your children stay or play. Make sure that the battery case is shut tight and secured. It is best to use devices that can only be opened using a tool, such as a screwdriver. If the case is not secure, keep the device where your child cannot see or reach it. Re-check all battery cases to be sure they stay secure over time.
- Do not let small children play with things that might use button batteries. Keep these devices out of their sight and reach. If that is not possible, watch them carefully while they are playing with things that use batteries.
- Store all loose batteries in a locked cabinet or box, out of reach or sight of children.

Share this information with other people, so everyone can stay safe.

## Lead Poisoning Prevention

Lead is a metal. Lead poisoning is the harmful buildup of lead in the body. **Even small amounts can be very harmful to the growth of a young child's brain.** Lead poisoning can cause learning and behavior problems, lower IQs, attention deficit (ADD), and hearing and speech problems. Sometimes brain damage cannot be reversed, even with treatment.

Children under the age of 6 are at highest risk for lead poisoning. This is because they put non-food objects and their fingers in their mouths.

There are many places where children can be exposed to lead. Most older homes have lead paint. Even if non-lead paint covers lead paint, when plaster or paint peels or chips, lead dust can go into the air and fall on surfaces.

Other places where children can be exposed to lead are:

- Painted wood that is burned, sanded or heat-stripped
- Lead pipes used in plumbing and the water that runs through these pipes
- Soil contaminated by industry that has used things made with lead - batteries, large use of leaded gasoline
- Lead crystal glassware and lead-glazed pottery, especially imported pottery
- Some children's toys and jewelry
- Some imported foods and candies
- Cosmetics - especially lipsticks
- Folk remedies - kohl (surma), greta, azarcon, kandu, pay-loo-ah, ghasard, bala goli
- Jobs or hobbies like soldering, welding or casting metals, handling bullets and fishing weights, making stained glass or collecting old lead soldiers and toys

### Your child's risk

The Ohio Department of Health's Lead Prevention Program checklist can help you identify your child's risk for lead poisoning.

Does your child:

- Live in a house or often visit a building older than 1978? This includes a daycare center, preschool or home of a babysitter or relative.
- Have a brother, sister or playmate who has had lead poisoning?
- Have frequent contact with an adult whose hobby or work involves lead? Examples are construction, welding, pottery making, painting and casting metals.
- Live near an active or former lead smelter, battery recycling plant or other such industry?
- Use any traditional folk or homemade remedies?
- Has lived or the mother has lived overseas for a while or was born outside the US?
- Mother was exposed to lead during her pregnancy?

If you answer “yes” or “do not know” to any of these questions, your child is at risk.

The doctor will order a blood lead test if your child:

- Is at risk and is younger than 6 years of age.
- Is on Medicaid. A test is required.
- Lives in a high-risk zip code. A test is recommended.

## Signs of lead poisoning

A blood lead test is the only way to know if a child has lead poisoning. Most children with lead poisoning do not have symptoms. If they do, they may include:

- Headache
- Stomachache or cramps
- Fussiness or crankiness
- Weight loss
- Constipation or diarrhea
- Trouble sleeping

Signs of **severe** lead poisoning include:

- Vomiting
- Dizziness
- Joint pain
- Seizures
- Listlessness (no energy)

## How to help prevent lead poisoning

- Check to make sure the toys your child plays with have no lead. If you think your child has been exposed to a toy that has lead, remove it right away.
  - Only a certified laboratory can accurately test a toy for lead. Home testing kits may not be reliable for finding low levels of lead.
  - To check for toy recalls or to get on the mailing list to receive recall alerts, go to <http://www.cpsc.gov/> or call the United States Consumer Product Safety Commission at 1-800-638-2772.

- Teach your child to practice good hand washing before meals and after playing outdoors. Thoroughly wash hands with soap and water if your child has played in dirt or touched things made of lead.
- Use an all-purpose cleaning solution to damp-mop dusty areas. Use wet paper towels around windows and corners. Keep your house as dust-free as possible.
- Avoid using home remedies and cosmetics that may contain lead.
- Use only cold water from the tap for drinking, cooking and making baby formula. Hot water is more likely to contain higher levels of lead. Allow water to run for 2 to 3 minutes before using.
- After working where lead might be, remove shoes before entering the home. Shower and change clothes.
- Never allow small children or pregnant women in the area where homes built before 1978 are being remodeled.
- Do not store food in lead-glazed pottery. Imported pottery is more likely to have lead glazes. Do not let children drink from lead crystal baby bottles or glassware.
- Ask your health department for information about lead clean-up or removal.

## Good nutrition

Good nutrition is very important. Often, children with lead poisoning are anemic. This means that they do not have enough iron. The less iron in the body, the more lead the body will absorb.

Children need to eat foods that have a lot of iron, protein, vitamin C and calcium. Iron-rich foods and foods with vitamin C work together to help the body absorb more iron. This reduces lead in the blood.

Foods high in calcium block lead absorption.

- Foods **high in iron** and protein are beef, pork, chicken, turkey, fish, eggs, iron-fortified cereals and green leafy vegetables (Picture 1).
- Foods **high in vitamin C** (fresh, frozen or canned) are citrus fruits or juices with vitamin C added, broccoli, red and green peppers, brussels sprouts and green leafy vegetables.

Have your child eat foods high in vitamin C at the same time they eat foods high in iron.

- Foods **high in calcium** are milk, cheese, pudding, yogurt, soy, ice cream, broccoli and green leafy vegetables. High calcium foods should be eaten at least an hour before or after your child eats foods with iron.



**Picture 1** Foods high in protein often have a lot of iron.



## Follow-up care

If your child has lead poisoning or is at high risk for lead poisoning, they may need to get tested more often. Your healthcare provider will let you know. Your local health department will also contact you to find out the source of the lead exposure. There will be no cost for their inspection.

For more information about lead poisoning, contact:

- The Ohio Department of Health’s Ohio Healthy Homes and Lead Poisoning Prevention program <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/childhood-lead-poisoning/for-parents/> Phone: (877) LEADSAFE (877) 532-3723.
- Centers for Disease Control and Prevention (CDC) <https://www.cdc.gov/nceh/lead/>
- The Environmental Protection Agency (EPA): <https://www.epa.gov/sites/production/files/documents/nutrition.pdf>
- County or city health department
- **Columbus** – For directions to the nearest Nationwide Children’s Hospital Laboratory Service Center, please call Laboratory Services at (800) 934-6575 or visit [NationwideChildrens.org/Lab](http://NationwideChildrens.org/Lab).
- **Toledo** – Nationwide Children’s Hospital - Toledo’s pediatric primary care centers screen for lead poisoning. Visit [NationwideChildrens.org/Toledo](http://NationwideChildrens.org/Toledo) to find a location near you.

## Poisoning and Poison Prevention

Children under the age of 5 learn by exploring the things around them. They crawl, walk, put things in their mouth, and grab most things they see. This puts them at a higher risk of poisoning. Things like medicines, chemicals, and gases can be dangerous (\* see page 2 for a list). They can lead to poisoning if they are swallowed, breathed in, touched, spilled on the skin, or injected.

### If you think your child has come into contact with a poison:



- **DO NOT** make them throw up!
- Call the Poison Control Helpline at 1 (800) 222-1222. **Save this number in your cell phone for emergencies.**
  - Poison Control is a free, confidential service that can be contacted 24 hours a day, 7 days a week.
  - You can also contact Poison Control online at [www.poison.org](http://www.poison.org) with webPOISONCONTROL®
  - Calls and online requests are always answered by expert nurses and pharmacists.


**If your child has passed out or is not breathing, call 911 or take them to the closest emergency room right away.**

When you call, have this information ready:

- Your child's weight and age
- Any medicines they're taking
- Any symptoms they're having (\* See page 2 for common symptoms.)
- Any medical problems they have
- The name of the poison and time they came into contact with it (if known).
  - If it was a medicine, have the container or bottle with you when you call.
  - If it was a plant or animal, describe it the best you can.

## Types of Poisons

Keep these items out of the reach of children and pets:

<b>Medicines and vitamins</b>	<ul style="list-style-type: none"> <li>• Prescriptions</li> <li>• Vitamins</li> <li>• Laxatives and antacids</li> <li>• Over-the-counter (OTC) medicines, especially pain medicines like aspirin, ibuprofen (Motrin<sup>®</sup>, Advil<sup>®</sup>), and acetaminophen (Tylenol<sup>®</sup>)</li> </ul>
<b>Drug-related items</b>	<ul style="list-style-type: none"> <li>• Smoking products like lighters, cigarettes, vape pens, vaping liquid, weed</li> <li>• Alcohol drinks like beer, wine, liquor, whiskey, and more</li> <li>• Edibles – food, usually candy or dessert, that has heated up (cooked) marijuana in it</li> </ul>
<b>Cleaning items</b>	<ul style="list-style-type: none"> <li>• Bleach</li> <li>• Ammonia</li> <li>• Pool cleaner</li> <li>• Drain cleaner</li> <li>• Oven cleaner</li> <li>• Toilet bowl cleaner</li> <li>• Disinfectant sprays or wipes like Lysol<sup>®</sup>, Clorox<sup>®</sup>, or Microban<sup>®</sup></li> <li>• Laundry detergent (powder, liquid, and pods) *See page 4 for more information</li> <li>• Dish soap and detergent (powder, liquid, and pods)</li> <li>• Air fresheners, candles, and wax for wax warmers</li> </ul> 
<b>Bathroom items</b>	<ul style="list-style-type: none"> <li>• Mouthwash</li> <li>• Body oil and lotion</li> <li>• Nail polish and remover</li> <li>• Makeup</li> <li>• Rubbing alcohol</li> <li>• Perfume and cologne</li> <li>• Hair products</li> <li>• Hand sanitizer</li> </ul>
<b>Bedroom items</b>	<ul style="list-style-type: none"> <li>• Purses</li> <li>• Remotes</li> <li>• Diaper bags</li> <li>• Backpacks</li> <li>• Anything that uses small batteries</li> <li>• Magnets and magnet toys</li> <li>• Button batteries</li> </ul>
<b>Garage items</b>	<ul style="list-style-type: none"> <li>• Bug spray</li> <li>• Weed killer</li> <li>• Pool chemicals</li> <li>• Fertilizer</li> <li>• Gasoline</li> <li>• Antifreeze</li> <li>• Kerosene</li> <li>• Paint</li> <li>• Paint thinners</li> <li>• Wiper fluid</li> <li>• Lead paint</li> <li>• Tiki torch fluid</li> </ul>
<b>Plants</b>	<ul style="list-style-type: none"> <li>• Foxglove</li> <li>• Poison oak</li> <li>• Dieffenbachia</li> <li>• Poison ivy</li> <li>• Poison sumac</li> <li>• Philodendron</li> </ul>
<b>Gases</b>	<ul style="list-style-type: none"> <li>• Carbon monoxide</li> <li>• Propane</li> <li>• Methane and natural gas</li> </ul>

## Signs and Symptoms

Signs and symptoms for poisonings depend on how the poison got into or on the body. There are also different signs and symptoms for different types of poisons. Some common signs are:

- Problems breathing
- Seeming sleepy (drowsy)
- Skin redness, irritation, burning, or itching
- Having breath that smells like chemicals, like gasoline or paint thinner
- Throwing up (vomiting)
- Acting confused

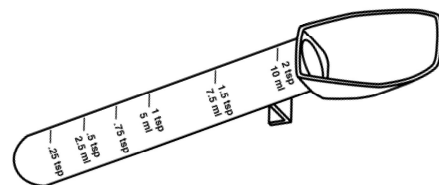
## Preventing Poisonings

### Be Poison Smart!®

- Watch out for poisons that look like things your child may want to eat or drink. Every time you bring something home, ask yourself:
  - Is it medicine or vitamins?
  - Does it have alcohol in it?
  - Does it have gasoline, insecticides, or pesticides in it?

## Medicines

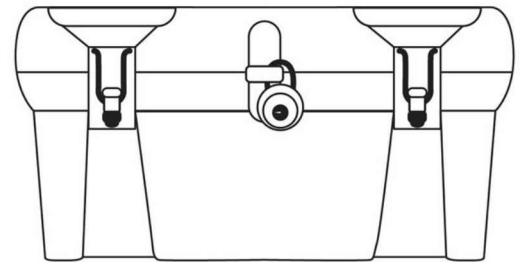
- Never call medicine candy.
- Keep all medicine locked up and out of the reach of children and pets.
- Do not take medicine in front of your child.
- Do not keep pills in a bathroom.
- Do not keep medicine or medicine packaging on counters or window sills.
- Put refrigerated medicines in the very back of the fridge.
- Always read the label before giving medicine. Make sure it's the right medicine and dose for your child.
- Do not use kitchen spoons to measure medicine. Use the cup that came with the medicine or buy a medicine measuring tool from any pharmacy (Picture 1).
- **Many OTC medicines are not safe if taken incorrectly.**
- Never give your child medicine in the dark.
- Keep track of all the medicine(s) your child is taking.
- Get rid of medicines that are not being used or have expired.
- Do not keep medicine in the pockets of clothing.



**Picture 1** Only use a marked measuring spoon to give medicine.

## Locks, lock boxes, and safes

- Keep dangerous items locked up high where your child can't reach them.
- You can also put items away in a lock box or safe (Picture 2). Make sure these boxes are also up high and out of reach.



**Picture 2** Locking up dangerous items can help keep your child safe.

## Containers

- Only use products with child-safe caps. Remember, having a child-safe cap doesn't mean your child can't get into it. If they try hard enough, they may still open it.
- Containers for laundry and dishwasher pods must be stored up high and locked up. These are very dangerous and look like something a child may want to eat (Picture 3).
- Keep products in their original, labeled containers.
- Read the product's name, label, and how much to use before each use.



**Picture 3** Your child may try to eat or pop open detergent pods.

## Plants and outdoors

- Know the berries, fruits, seeds, flowers, shrubs, mushrooms, and trees in your home or yard. If you don't know the name, take a branch or leaf to your local plant store.
- Teach your child to not touch or eat things they find outside.
- If you treat your yard with pesticides, do not let your child play in outside for 24 hours.
- Keep grills and generators away from windows.
- Clean chimneys and get them inspected.

## Carbon monoxide

- This is a deadly gas that you can't see or smell.
- It can come from a gas stove, dryer, furnace, fireplace, grill, or car.
- Put a working carbon monoxide detector on every floor of your home.



## Home Water Hazards for Young Children

Each year, many young children drown in swimming pools, other bodies of water, and standing water around the home, such as

- Bathtubs
- Buckets and pails, especially 5-gallon buckets and diaper pails
- Ice chests with melted ice
- Toilets
- Hot tubs, spas, and whirlpools
- Irrigation ditches, postholes, and wells
- Fishponds and fountains

Children must be watched closely by an adult at all times when in or near water. Children may drown in an inch or 2 of water. Stay within an arm's length of your child.

Other safety activities include

- Empty all buckets, pails, and bathtubs completely after each use—do not leave them filled and unattended.
- Keep young children out of the bathroom unless they are closely watched. Teach others in the home to keep the bathroom door closed. Install a hook-and-eye latch or doorknob cover on the outside of the door. Always close the toilet lid, and consider using a toilet lid latch.
- Never leave a child alone in a bathtub or in the care of another child, even for a moment. Avoid using bath seats or rings. Your baby can slip out of them and be trapped underwater. An adult must be within arm's reach, providing touch supervision at all times.
- Use a rigid, lockable cover on a hot tub, spa, or whirlpool, or fence in all 4 sides as you would for a swimming pool.
- The hottest temperature at the faucet should be no more than 120°F to avoid burns. In many cases, you can adjust your water heater.
- Throw away or tightly cover water or chemical mixtures after use.
- Watch children closely when they are playing near wells, open postholes, or irrigation or drainage ditches. Fill in empty holes or have fences installed to protect your child.
- Learn CPR and know how to get emergency help.

From Your Doctor

The information in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



# Insect Repellents: What Parents Need to Know

One way to protect your child from biting insects is to use insect repellents. However, it's important that insect repellents are used safely and correctly.

Mosquito, biting fly, and tick bites can make children miserable. While most children have only mild reactions to insect bites, some children can become very sick. Some insects carry dangerous germs such as West Nile virus, Zika virus, Lyme disease bacteria, and Rocky Mountain spotted fever bacteria.

Read on for more information from the American Academy of Pediatrics (AAP) about insect repellents, using repellents safely, and other ways to protect your child from insect bites. Also, read about diseases spread by insects.

## About Insect Repellents

Insect repellents prevent bites from biting insects but not stinging insects. Biting insects include mosquitoes, ticks, fleas, chiggers, and biting flies. Stinging insects include bees, hornets, and wasps.

Insect repellents come in many forms, including aerosols, sprays, liquids, creams, and sticks. Some are made from chemicals such as DEET, picaridin, IR3535, and permethrin. Others are made from natural ingredients, such as oil of lemon eucalyptus.

Here are some things to keep in mind.

- Always use an insect repellent registered by the US Environmental Protection Agency (EPA). Visit the US EPA website at [www.epa.gov/insect-repellents](http://www.epa.gov/insect-repellents) for more information.
- Always follow the directions.
- Repellents containing 20% to 30% DEET are safe and effective when used as directed for infants and children.
- If you use repellents containing oil of lemon eucalyptus, the Centers for Disease Control and Prevention (CDC) and the AAP recommend that you do not use them on children younger than 3 years. Oil of lemon eucalyptus may cause allergic skin reactions.
- Repellents containing permethrin can be used to treat clothing and gear, but they should not be applied to skin.
- The following types of products offer minimal protection or no protection:
  - Wristbands soaked in chemical repellents
  - Garlic or vitamin B<sub>1</sub> taken by mouth
  - Ultrasonic devices that give off sound waves designed to keep insects away
  - Bird or bat houses
  - Backyard bug zappers, which may attract insects to your yard
  - Essential oils (cedar, cinnamon, citronella, clove, geranium, lemongrass, and others) other than oil of lemon eucalyptus

## Tips for Using Insect Repellents Safely

- Read the label and follow all directions and precautions.
- Apply insect repellents only on the outside of your child's clothing and on exposed skin. Never spray an insect repellent directly onto

your child's face. Instead, spray a little on your hands first and then rub it onto your child's face. Avoid your child's eyes and mouth. (Permethrin should not be applied to skin.)

- Do not spray an insect repellent on cuts, wounds, or irritated skin.
- Use just enough of the repellent to cover your child's clothing and exposed skin.
- Avoid reapplying the repellent unless needed. Using more doesn't make the repellent more effective.
- Spray repellents in open areas to avoid breathing them in.
- Apply an insect repellent on young children. Supervise older children when using these products.
- Wash your children's skin with soap and water to remove any repellent when they return indoors, and wash their clothing before they wear it again.
- Do not use products that combine DEET with sunscreen. DEET may make the sun protection factor (SPF) less effective. These products can overexpose your child to DEET because the sunscreen needs to be reapplied often.

## Reactions to Insect Repellents

If you suspect that your child is having a reaction, such as a rash, to an insect repellent, stop using the product and wash your child's skin with soap and water. Then call Poison Help at 1-800-222-1222 or your child's doctor. If you go to your child's doctor's office, take the repellent container with you.

## Other Ways to Protect Your Child From Insect Bites

Here are ways to help reduce insect bites.

- Tell your child to avoid areas that attract flying insects, such as garbage cans, stagnant pools of water, and flower beds or orchards.
- Dress your child in lightly colored clothing from head to toe, such as long pants, a lightweight long-sleeved shirt, socks, and closed shoes, when you know your child will be exposed to insects. A hat with a wide brim can help keep insects away from your child's face. Mosquito netting may be used over baby carriers or strollers in areas where your baby may be exposed to insects.
- Don't use scented soaps, perfumes, or hair sprays on your child because they may attract insects.
- Keep door and window screens in good repair.
- Check your child's skin at the end of the day if you live in an area where ticks are present and your child has been playing outdoors.

## Diseases Spread by Insects and Ticks

Infectious diseases spread by insects are a major cause of illnesses to children and adults worldwide. Here are 4 diseases spread by insects.

## West Nile virus is spread by mosquitos.

In the United States, West Nile virus and outbreaks of various types of encephalitis get plenty of media coverage.

### Symptoms

- Most cases of West Nile virus infection are mild. People may have no symptoms or mild symptoms such as fever, headache, and body aches.
- Less common symptoms, occurring mostly in older adults, may include a severe headache, a high fever, a stiff neck, confusion, seizures, sensitivity to light, muscle weakness, and loss of consciousness.

## Zika virus is primarily spread by mosquitoes.

Zika virus infection during pregnancy can cause fetuses to have a birth defect of the brain called *microcephaly*. Zika virus outbreaks are currently happening in many countries and territories. For up-to-date information about the virus and outbreaks, go to [www.cdc.gov/zika](http://www.cdc.gov/zika).

### Symptoms

- Many people won't have symptoms or will have only mild symptoms.
- Symptoms may include fever, rash, joint pain, or red eyes.

## Lyme disease is spread by deer ticks.

Deer ticks are tiny, black-brown arachnids about the size of a poppy seed. They are not insects because they have 8 legs (like spiders). Lyme disease is an important health concern in certain regions of the country; the following areas are where most infections occur: Northeast, from Virginia to Maine; north-central states, mostly Wisconsin and Minnesota; and West Coast, particularly northern California.

### Symptoms

Often the first and most obvious symptom of Lyme disease is a localized rash that begins as a pink or red circle at the site of tick attachment. This circle expands over time and may become several inches or larger. A classic bull's-eye appearance, with concentric rings, appears in some people. The rash generally occurs 1 to 2 weeks after the tick bite but ranges from 3 days to 30 days.

A rash may occur without any other symptoms or may be associated with

- Headache
- Chills
- Fever
- Fatigue
- Swollen glands, usually in the neck or groin
- Aches and pains in the muscles or joints

If you live in an area of the country endemic to Lyme disease and your child develops a suspicious rash with or without any of these symptoms, call your child's doctor.

## Rocky Mountain spotted fever is spread by ticks.

Despite the name, Rocky Mountain spotted fever currently occurs mostly in other regions of the United States, including North and South Carolina, Oklahoma, and Tennessee.

### Symptoms

- Most people get a red, dot-like rash that begins on the wrists and ankles and spreads toward the center of the body. The illness may be severe or fatal in some people.
- Other symptoms may include severe headache, fever, muscle aches, nausea, or vomiting.

If your child has been bitten by an insect and shows any of the symptoms of West Nile virus infection, Zika virus infection, Lyme disease, or Rocky Mountain spotted fever, call your child's doctor.

## Remember

Children need and love to be outdoors. The chance of your children becoming infected by insects and ticks is quite low. The best way to protect yourself and your children is to follow the guidelines in this publication. If you have any concerns about insect or tick bites, talk with your child's doctor.

## From Your Doctor



The American Academy of Pediatrics (AAP) is an organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Any websites, brand names, products, or manufacturers are mentioned for informational and identification purposes only and do not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication.

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# PARENT-TEEN DRIVING AGREEMENT

I, \_\_\_\_\_, will drive carefully and cautiously and will be courteous to other drivers, bicyclists, and pedestrians at all times.

## I PROMISE.

### I promise that I will obey all the rules of the road.

- Always wear a seat belt and make all my passengers buckle up
- Obey all traffic lights, stop signs, other street signs, and road markings
- Stay within the speed limit and drive safely
- Never use the car to race or to try to impress others
- Never give rides to hitchhikers

### I promise that I will make sure I can stay focused on driving.

- Never text while driving (writing, reading or sending messages)
- Never talk on the cell phone — including handsfree devices or speakerphone — while driving
- Drive with both hands on the wheel
- Never eat or drink while driving
- Drive only when I am alert and in emotional control
- Call my parents for a ride home if I am impaired in any way that interferes with my ability to drive safely, or if my driver is impaired in any way
- Never use headphones or earbuds to listen to music while I drive

### I promise that I will respect laws about drugs and alcohol.

- Drive only when I am alcohol and drug free
- Never allow any alcohol or illegal drugs in the car
- Be a passenger only with drivers who are alcohol and drug free

### I promise that I will be a responsible driver.

- Drive only when I have permission to use the car and I will not let anyone else drive the car unless I have permission
- Drive someone else's car only if I have parental permission
- Pay for all traffic citations or parking tickets
- Complete my family responsibilities and maintain good grades at school as listed here: \_\_\_\_\_
- Contribute to the costs of gasoline, maintenance, and insurance as listed here: \_\_\_\_\_

## RESTRICTIONS:

I agree to the following restrictions, but understand that these restrictions will be modified by my parents as I get more driving experience and demonstrate that I am a responsible driver.

- For the next \_\_\_\_\_ months, I will not drive after \_\_\_\_\_ pm.
- For the next \_\_\_\_\_ months, I will not transport more than \_\_\_\_\_ teen passengers (unless I am supervised by a responsible adult).
- For the next \_\_\_\_\_ months, I won't adjust the stereo, electronic devices, or air conditioning/heater while the car is moving.
- For the next \_\_\_\_\_ months, I will not drive in bad weather.
- I understand that I am not permitted to drive to off limit locations or on roads and highways as listed here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Additional restrictions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PENALTIES FOR AGREEMENT VIOLATIONS

- Drove while texting (composed, read or sent message or email with phone).  
NO DRIVING FOR \_\_\_\_\_ MONTHS
- Drove while talking on the cell phone (including handsfree or speakerphone).  
NO DRIVING FOR \_\_\_\_\_ MONTHS
- Drove after drinking alcohol or using drugs.  
NO DRIVING FOR \_\_\_\_\_ MONTHS
- Got ticket for speeding or moving violation.  
NO DRIVING FOR \_\_\_\_\_ MONTHS
- Drove after night driving curfew.  
NO DRIVING FOR \_\_\_\_\_ WEEKS/MONTHS
- Drove too many passengers.  
NO DRIVING FOR \_\_\_\_\_ WEEKS/MONTHS
- Broke promise about seat belts (self and others).  
NO DRIVING FOR \_\_\_\_\_ WEEKS/MONTHS
- Drove on a road or to an area that is off limits.  
NO DRIVING FOR \_\_\_\_\_ WEEKS/MONTHS

I agree to follow all the rules and restrictions in this agreement. I understand that my parents will impose penalties, including removal of my driving privileges, if I violate the agreement. I also understand that my parents will allow me greater driving privileges as I become more experienced and as I demonstrate that I am always a safe and responsible driver.



## SIGNATURES

Driver: \_\_\_\_\_ Date: \_\_\_\_\_

Parent promise: I also agree to drive safely and to be an excellent role model.

Parent (or guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Parent (or guardian): \_\_\_\_\_ Date: \_\_\_\_\_

# Know Your Poison Center's Number.



**POISON**  
**Help**  **p**<sup>®</sup>  
**1-800-222-1222**  
**poison.org**

**You could  
save a life.**

**1-800-222-1222**



# Poison Safety Checklist

Use this checklist to make sure all poisons are safely stored. Keep poisons up and out of reach of children.



## Kitchen:

- Cleaners: soap, dishwashing detergent, disinfectant, carpet cleaner, furniture polish, drain cleaner, oven cleaner
- Medicines: acetaminophen (Tylenol®), ibuprofen, opioids, vitamin and supplements
- Pet medications
- Alcoholic beverages



### **What you should do:**

- Remove medicines from countertops, tables and window sills.
- Store household cleaners in original containers away from food.
- Put safety locks on drawers and cabinets where harmful products are stored.

## Bathroom:

- Medicines
- Mouthwash
- Toothpaste & fluoride
- Nail polish & remover
- Perfume & aftershave
- Eye, nose & ear drops
- Body powder
- Make-up
- Air freshener
- Hair products
- Deodorant
- Cleaners



### **What you should do:**

- Keep medicines in child-resistant containers with labels.
- Dispose of old medicines properly.
- Keep perfumes, cosmetics, and powders out of reach.

## Bedroom:

- Button batteries
- Medicines
- House plants
- Carbon monoxide (CO)
- Cigarettes & e-cigarettes
- Cannabis

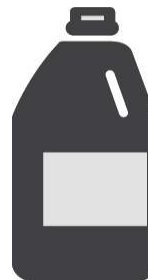


### **What you should do:**

- Remove medicines from low dresser drawers and bedside tables.
- Install CO detectors near bedrooms.
- Keep harmful products out of sight and reach.

## Laundry:

- Bleach
- Laundry detergent & packets
- Disinfectants
- Stain remover
- Fabric softener



### **What you should do:**

- Keep products in original containers.
- Keep laundry products out of sight and reach or in a locked cabinet.

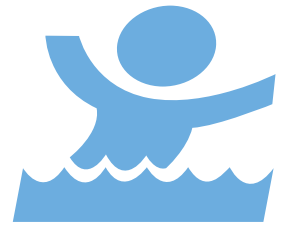
## Garage/Basement/Storage:

- Bug & weed killer
- Fertilizer
- Ice melter
- Antifreeze
- Windshield washer fluid
- Gasoline & motor oil
- Paint remover & thinner



### **What you should do:**

- Keep all products in their original containers.
- Store harmful products out of reach or in a locked cabinet.



## Pool Safety for Children

A swimming pool can be very dangerous for children. If possible, do not put a swimming pool in your yard while you have young children. Help protect your children from drowning by doing the following:

- Never leave your children alone in or near the pool, even for a moment. An adult who knows CPR should actively supervise children at all times.
- Practice touch supervision with children younger than 5 years and with children of any age who are not strong swimmers. This means that the adult is within an arm's length of the child at all times.
- You must put up a fence to separate your house from the pool. Most young children who drown in pools wander out of the house and fall into the pool when they are not expected to be swimming. Install a fence at least 4 feet high around all 4 sides of the pool. This fence must completely separate the pool from the house and play area of the yard. Use gates that self-close and self-latch, with latches higher than your children's reach.
- Keep rescue equipment (such as a shepherd's hook or life preserver) and a telephone by the pool.
- Do not use air-filled "swimming aids" as a substitute for approved life jackets.
- Remove all toys from the pool after use so children aren't tempted to reach for them.
- After the children are done swimming, secure the pool so they can't get back into it.
- Pool alarms and rigid safety covers that meet the standards of ASTM International may add to the protection of your children but should not be used in place of the fence between your house and the pool. Even fencing around your pool and using a rigid safety cover will not prevent all drownings.

While swim skills are an additional layer of prevention, remember that teaching your child how to swim DOES NOT mean your child is safe in water. Additional safety measures are necessary when your child is near the pool and when it is not swim time.

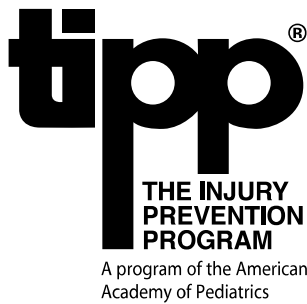
From Your Doctor

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## Safe Bicycling Starts Early

When a child receives his or her first tricycle or bicycle, a lifelong pattern of vehicle operation is begun. A bike is not just a toy but a vehicle that is a speedy means of transportation, subject to the same laws as motor vehicles.

### Training Children in Proper Use of Their Bicycles

1. Parents should set limits on where children may ride, depending on their age and maturity. Most serious injuries occur when the bicyclist is hit by a motor vehicle.
  - a. Young children should ride only with adult supervision and off the street.
  - b. The decision to allow older children to ride in the street should depend on traffic patterns, individual maturity, and an adequate knowledge and ability to follow the “rules of the road.”
2. Children must be provided with helmets (approved by the US Consumer Product Safety Commission) and taught to wear them properly on every ride, starting when they get their first bike or tricycle.
3. The most important rules of the road for them to learn are
  - a. Ride with traffic.
  - b. Stop and look both ways before entering the street.
  - c. Stop at all intersections, marked and unmarked. Stop signs apply to everyone who uses the road, whether in a car or on a bike.
  - d. Before turning, use hand signals and look all ways. Make eye contact with drivers to ensure they see you before riding in front of a stopped car.
4. Children should never ride at dusk or in the dark. This is extremely risky for both children and adults. Your child should be told to call home for a ride rather than ride a bike.
5. Children should receive training in bicycle riding, including the rules of the road, and should have their privilege with the bike withheld if they ignore safety rules or don't wear a helmet.
6. Children should learn how to keep their bikes in good repair, with parents checking the tires, brakes, and seat and handlebar heights annually.

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## Sources of Lead

Identify and remove sources of lead from your home.



### Home

Lead can be in paint in old homes built before 1978.

- Chipped paint
- Old furniture and toys
- Dirt
- Play or costume jewelry
- Pewter
- Crystal glassware



### Imported Goods

Items brought back from other countries may contain lead.

- Glazed pottery
- Asian, Hispanic, Indian spices
- Mexican candy (tamarindo and chili)



### Home Remedies

Some home remedies may contain lead. These remedies are typically red or orange powders.

- Traditional and folk remedies (Greta, Azarcón, Pay-loo-ah)



### Beauty Products

Imported beauty products from Asia, India, and Africa may contain lead.

- Sindoor, Khol, Kajal, Surma



### Jobs

Jobs such as car repair, mining, construction, and plumbing may increase your exposure to lead. Lead dust can be brought into the home on your skin, clothes, shoes, or other items you bring home from work.

- Car batteries
- Scrap metal/parts
- Ammunition



### Hobbies

Certain hobbies increase your risk of coming in contact with lead.

- Hunting (lead bullets)
- Fishing (lead sinkers)
- Artist paints
- Refinished furniture



### Travel

Traveling outside the U.S. may increase your risk of coming in contact with lead-based items.

- Souvenirs
- Toys
- Spices or food
- Jewelry

## Cleaning

Keep lead dirt and dust out of your home with these helpful tips.



Wash hands



Keep shoes outside



Mop & wet wipe



Use a vacuum with a HEPA filter



Wash toys

Avoid:  
Sweeping  
Dry dusting  
Beating rugs

## Nutrition

These foods can help lower your child's lead level.

### Vitamin C



Tomatoes  
Strawberries  
Oranges  
Potatoes

### Calcium



Milk  
Cheese  
Yogurt

### Iron



Chicken  
Steak  
Fish  
Peas  
Eggs



ADHS

## The Basics

### Poison Prevention at Home

- Always read labels before giving medicine or using household products.
- Use child-resistant packages. Put the tops on tightly.
- Use cabinet locks.
- Identify the most dangerous products. Keep them in their original child-resistant packaging. Lock them away where children can't see or reach them. (See below.)
- Don't let children watch adults taking medicine.
- Call medicines by their proper names. Do not refer to them as candy!

### What is a Poison Control Center?

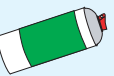
- A Poison Center is an emergency telephone service. If someone may have been poisoned or, if you have questions about poisons, call **1-800-222-1222** right away.
- You can reach the Poison Control Center 24 hours a day, 7 days a week.
  - When you call, you reach specially-trained nurses, pharmacists, and doctors.
  - Advice is available in languages other than English.
  - All services are free and confidential.

## Lock Them Up!

These products should be locked up, out of the reach and sight of children. Some may seem harmless, but can be poisonous to children if used in the wrong way, or in large quantities.

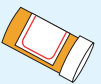
### KITCHEN:

- Drain opener
- Oven cleaner
- Automatic dishwasher detergent
- Furniture polish



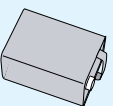
### BATHROOM:

- Toilet bowl cleaner
- Mouthwash
- Prescription medicines
- Non-prescription medicines:
  - Cough medicine
  - Pain relievers
  - Vitamins with iron



### GARAGE:

- Windshield washer fluid
- Antifreeze
- Paint thinner
- Gasoline
- Pesticides



### YARD:

- Garden chemicals
- Wild mushrooms, berries, snakes, spiders, scorpions. (You can't lock them up, but you can teach children to stay away!)



## Be Prepared – Just in Case

There are some easy things you can do to be ready in case of an emergency.

- Post the Poison Control Center number in a prominent place. Make sure that all family members, babysitters, and other caregivers know where to find it.
- Call the Poison Control Center (**1-800-222-1222**) to learn what to have on hand in case of a poisoning.
- Always call the Poison Control Center right away if you think there's been a poisoning. The Poison Center experts will tell you the right thing to do.



### First Aid for Possible Poisonings

Has the child or other person

- ***Collapsed or stopped breathing?*** Call **911** or your local emergency number right away.
- ***Swallowed the wrong medicine or too much medicine?*** Call **1-800-222-1222**.
- ***Swallowed a chemical?*** Drink a small amount of milk or water, and call **1-800-222-1222**.
- ***Inhaled poison?*** Get to fresh air right away, and call **1-800-222-1222**.
- ***Splashed poison on the skin?*** Take off any clothing that the poison touched. Rinse skin with running water for 15 to 20 minutes, and call **1-800-222-1222**.
- ***Splashed poison in the eyes?*** Rinse eyes with running water for 15 to 20 minutes. Call **1-800-222-1222**.

## Sometimes, Poisonings Happen . . .

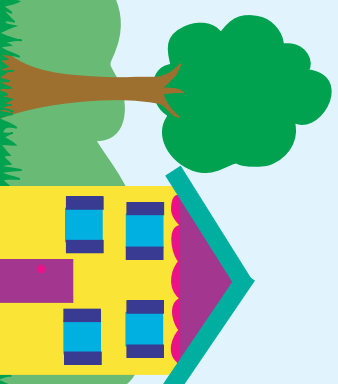
Despite your best efforts, sometimes poisonings can happen. If you suspect a poisoning, do not wait for symptoms to appear. Call the Poison Control Center right away!

**1-800-222-1222**

If you call right away, the problem can often be taken care of over the phone. This is much faster, and cheaper, than calling an ambulance and going to the emergency room. If you do need an ambulance, the Poison Control Center will tell you what to do.

Poison Control Center Toll-Free Hotline:

**1-800-222-1222**







## Protect Your Child...Prevent Poisoning

### CHILDREN CAN GET VERY SICK IF THEY ARE POISONED, AND CHILDREN AGED 1 TO 3 YEARS ARE AT HIGHEST RISK

Young children may put anything in their mouths. This is part of learning. Many household products can be poisonous if swallowed, if in contact with the skin or eyes, or if inhaled.

#### COMMON EXAMPLES

- **MEDICINES:** Vitamins with iron, cough and cold medicine, allergy and asthma medicine, and pain and fever medicine
- **HOUSEHOLD PRODUCTS:** Cleaning products, mothballs, furniture polish, drain cleaners, weed killers, insect or rat poisons, lye, paint thinners, laundry or dishwasher detergent, antifreeze, windshield washer fluid, gasoline, kerosene, and lamp oil

#### SAFETY RULES

- Keep harmful products locked up and out of your child's sight and reach.
- Use safety latches or locks on drawers and cabinets where you keep dangerous items.
- Take extra care during stressful times and when you are away from home.
- Call medicine by its correct name. You do not want to confuse the child by calling medicine "candy."
- Always replace the safety caps immediately after use.
- Never leave alcohol within a child's reach.
- Seek help if your child swallows a substance that is not food. Call the Poison Help Line at 1-800-222-1222 or your doctor. Do not make your child vomit.

- Keep the following telephone numbers by your phone:

POISON HELP \_\_\_\_\_ 1-800-222-1222 \_\_\_\_\_

DOCTOR \_\_\_\_\_ EMERGENCY (usually 911) \_\_\_\_\_

- Keep products in their original containers. Never put nonfood products in food or drink containers.
- Read labels with care before using any product.
- Teach children not to drink or eat anything unless it is given by an adult.
- Do not take medicine in front of small children. Children tend to copy adult behavior.

*continued*

- Check your home often for old medications and get rid of them by disposing of them properly. Many communities have a locked drop box for old or unneeded medications. You can search for a drop box at <https://apps2.deadiversion.usdoj.gov/pubdispsearch>. If no drop box is available in your area, mix medications with something unappealing like old coffee grounds or kitty litter, seal it in a plastic bag, and put it in the trash. Only flush medications if you have no other choice.
- Get rid of substances used for old-fashioned treatments such as oil of wintergreen, boric acid, ammoniated mercury, oil of turpentine, and camphorated oil.
- There is more of a danger of poisoning when you are away from home, especially at a grandparent's home. Check carefully for dangerous substances that may be within reach in the house or in purses.

## From Your Doctor

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# Tips for Getting Your Children to Wear Bicycle Helmets



## Tips for Getting Your Children to Wear Bicycle Helmets

### **Establish the helmet habit early.**

Have your children wear helmets as soon as they start to ride scooters or tricycles and if they are a passenger on the back of an adult's bike. If they learn to wear helmets whenever they ride something with wheels, it becomes a habit for a lifetime. It's never too late, however, to get your children into helmets. Allow your children to participate in choosing their helmet. They'll be able to let you know if it is comfortable. And if they like the design, they are more likely to wear it.

### **Wear a helmet yourself.**

Children learn best by observing you. Whenever you ride your bike, put on your helmet. Plan bicycle outings during which all family members wear their helmets to further reinforce the message. The most important factor influencing children to wear helmets is riding with an adult who wears a helmet.

### **Talk to your children about why you want them to protect their heads.**

There are many things you can tell your children to convince them of the importance of helmet use.

1. Bikes are vehicles, not toys.
2. You love and value them and their intelligence and need to protect them.
3. They can permanently hurt their brains or even die of head injuries.

Most professional athletes use helmets when participating in sports. Bicycle racers are required to use them when racing in the United States and in the Olympics.

### **Reward your kids for wearing helmets.**

Praise them; give them special treats or privileges when they wear their helmets without having to be told.

### **Don't let children ride their bikes unless they wear their helmets.**

Be consistent. If you allow your children to ride occasionally without their helmets, they won't believe that helmet use really is important. Tell your children they have to find another way to get where they are going if they don't want to use their helmets.

### **Encourage your children's friends to wear helmets.**

Peer pressure can be used in a positive way if several families in the neighborhood make helmet use a regular habit at the same time.

(over)

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## How should a helmet fit?

A helmet should be worn squarely on top of the head, covering the top of the forehead. If it is tipped back, it will not protect the forehead. The helmet fits well if it doesn't move around on the head or slide down over the wearer's eyes when pushed or pulled. The chin strap should be adjusted to fit snugly.

## REMEMBER

Head injuries can occur on sidewalks, on driveways, on bike paths, and in parks, as well as on streets. You cannot predict when a fall from a bike will occur. It's important to wear a helmet on every ride.

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# Plant & Mushroom Safety

**Even plants can be poisonous!**

**Learn more about plants and protect your children!**

## **POISONOUS PLANTS**

Autumn crocus, *Colchicum autumnale*  
Azalea, rhododendron *Rhododendron*  
Caladium *Caladium*  
Castor bean *Ricinis communis*  
Daffodil *Narcissus*  
Deadly nightshade *Atropa belladonna*  
Dumbcane *Dieffenbachia*  
Elephant ear *Colocasia esculenta*  
Foxglove *Digitalis purpurea*  
Fruit pits, seeds, and leaves  
Holly *Ilex*  
Iris *Iris*  
Jack-in-the-pulpit *Arisaema triphyllum*  
Jerusalem cherry *Solanum pseudocapsicum*  
Jimson weed *Datura stramonium*  
Lantana *Lantana camara*  
Lily-of-the-valley *Convallaria majalis*  
Mayapple *Podophyllum peltatum*  
Mistletoe *Viscum album*  
Monkshood *Aconitum napellus*, other *Aconitum spp.*  
Morning glory *Ipomoea*  
Mountain laurel *Kalmia latifolia*  
Nightshade *Solanum spp.*  
Oleander *Nerium oleander*  
Peace lily *Spathiphyllum*  
Pennyroyal *Mentha pulegium*  
Philodendron *Philodendron*  
Poison hemlock *Conium maculatum*  
Poison ivy, poison oak, poison sumac *Toxicodendron spp.*  
Pokeweed *Phytolacca americana*  
Pothos *Epipremnum aureum*  
Rhubarb (leaves) *Rheum spp.*  
Rosary pea *Abrus precatorius*  
Water hemlock *Cicuta maculata*  
Yew *Taxus*

**See the back for information on what to do in case of a plant or mushroom poisoning.**

## **NON-POISONOUS PLANTS**

African violet *Saintpaulia ionantha*  
Begonia *Begonia*  
Christmas cactus *Schlumbergera bridgesii*

(continued on back)

*(Non-poisonous Plants continued)*

Coleus *Coleus*

Dandelion *Taraxacum officinale*

Dracaena *Dracaena*

Forsythia *Forsythia*

Impatiens *Impatiens*

Inch plant *Tradescantia fluminesis*

Jade *Crassula argentea*

Marigold *Calendula, Tagetes spp.*

Nandina *Nandina domestica*

Petunia *Petunia*

Poinsettia *Euphorbia pulcherrima* (may cause irritation)

Rose *Rosa*

Spider plant *Chlorophytum comosum*

Swedish ivy *Plectranthus spp.*

Wild strawberry *Fragaria virginiana*

## Keep Your Child Safe Around Plants!

### KNOW YOUR PLANTS

- Which plants are poisonous? Check the list. If your plants are not on the list, call the **Poison Control at 1-800-222-1222**.
- Find out the names of your plants. Ask a florist, nursery, park ranger, or county extension agent. Or, check a library book.
- Put your house plants up high.
- Watch your children carefully when they're outdoors. Berries are VERY attractive to children. Some berries are poisonous.
- Some wild mushrooms are more poisonous than plants. Watch your children carefully when they are playing outdoors.

### BE PREPARED

- Keep the Poison Control emergency number on your phone. For stickers or magnets, call **1-800-222-1222**.
- Download the web**POISONCONTROL**® app.
- Bookmark [poison.org](http://poison.org) in your favorite browser.

### ACT FAST

- If someone swallows part of a plant or mushroom, call Poison Control right away at **1-800-222-1222**.

Call **1-800-222-1222** or  
log on to **poison.org**  
for help with a possible  
poisoning.

**POISON**  
**Help**  
**1-800-222-1222**  
**poison.org**



# Understanding Lead Poisoning

## What is Lead Poisoning?

Lead poisoning is caused by swallowing or breathing lead. Lead is poison when it gets into the body.

Lead can stay in the body for a long time. Young children absorb lead more easily than adults. The harm done by lead does not go away. Lead in the body can:

- Hurt the brain, kidneys, and nervous system
- Slow down growth and development
- Make it hard to learn
- Damage hearing and speech
- Cause behavior problems

## How will I know if my child has lead poisoning?

Most children who have lead poisoning do not look or act sick. A lead test is the only way to know if your child has lead poisoning. Ask your healthcare provider to test your child for lead.

Some children may have:

- Upset stomach
- Trouble eating or sleeping
- Headache
- Trouble paying attention

## How do children get lead poisoning?

Most of the lead poisoning in Ohio comes from deteriorating lead paint and its resulting lead dust. Many homes built before 1978 have lead paint on the inside and outside of the building.

When old paint peels and cracks, it creates lead paint chips and lead dust. Lead dust also comes from opening and closing old windows.

Home repairs and renovations also create lead dust.

Lead dust lands on the floor. Lead gets into a child's body when he puts his hands and toys in his mouth. Children can also breathe in lead dust. Children between the ages of 9 months and 6 years are at risk, but toddlers who are teething and learning and crawl are most at risk.

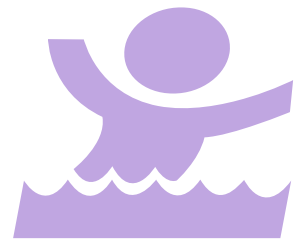
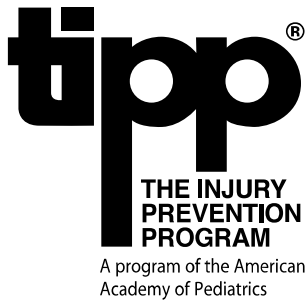
## Common myths about lead poisoning

Thanks to scientific research we know a lot more about lead than we used to. However, there are still many myths about lead poisoning. Below are the most common myths that prevent children from being properly protected from lead.

<p><b>Myth</b> - Children have to eat paint chips or chew on painted surfaces to get lead poisoning.</p>	<p><b>Fact</b> - Ingesting dust from lead paint is the most common way of getting lead poisoning. Lead dust covers surfaces and objects that children touch and clings to their hands and toys. Children swallow lead dust when they put their hands or toys in their mouths, which is normal behavior for young children.</p> <p>Eating chips or chewing on painted surfaces can also poison children.</p>
<p><b>Myth</b> - Only children with very high levels of lead in their blood are permanently impaired.</p>	<p><b>Fact</b> - Even low levels of lead in a child's blood may have long-term effects on learning and behavior.</p>
<p><b>Myth</b> - Only children in the inner city are in danger of getting lead poisoning.</p>	<p><b>Fact</b> - Lead poisoning crosses all racial, geographic, and economic lines. Lead paint can be in any home built before 1978.</p>
<p><b>Myth</b> - Only children living in poorly maintained or poorly cleaned homes are lead poisoned.</p>	<p><b>Fact</b> - Poor maintenance and cleaning habits do increase the risk of childhood lead poisoning. But, good maintenance and cleaning habits alone will not fully protect a child. Lead dust cannot be fully removed by normal household cleaning.</p> <p>Children are most often poisoned by lead dust created over time through normal wear and tear and repairs or renovations. Even if cleaned, lead dust continues to be generated by activities such as opening and closing windows and doors.</p>
<p><b>Myth</b> - Poor parental supervision is to blame for lead poisoning.</p>	<p><b>Fact</b> - Even well supervised children are lead poisoned. Lead poisoning frequently occurs when children put their hands, toys, and other objects in their mouths.</p>
<p><b>Myth</b> - It is more hazardous to delead than to leave lead in place. Disturbing lead paint creates dust and makes the problem worse.</p>	<p><b>Fact</b> - During deleading, lead hazards can be controlled by a licensed deleader trained to use safe techniques and proper cleanup methods. Lead inspectors check deleading work and take dust wipes to make sure the dust is cleaned.</p>
<p><b>Myth</b> - A child who appears healthy, active, and lacks symptoms is not lead poisoned.</p>	<p><b>Fact</b> - Children who seem perfectly normal and healthy may still be lead poisoned. Damage to the brain and nervous system can</p>



	<p>be subtle and very difficult to detect without a medical exam. The effect of lead poisoning may not be noticeable until the child enters school.</p>
<p><b>Myth</b> - Lead poisoning is not a real problem. Many people grew up in homes with lead paint and are perfectly healthy.</p>	<p><b>Fact</b> - Since Ohio did not always routinely test for lead poisoning, many people may have been affected.</p> <p>Many people who have grown up in homes with lead paint may have experienced subtle damage to the brain and nervous system. There are no symptoms of moderate lead poisoning, so no one would know they were in danger.</p> <p>A significant number of these people may experience undiagnosed lead poisoning. Learning, behavior, and attention problems are all effects of lead poisoning. Lead paint becomes more dangerous as it ages. Old paint is more likely to chip, peel, chalk and create lead dust and debris. It poses more health hazards. As a result, the lead paint in old buildings is more dangerous, even if it has been painted over.</p>



## Water Safety for Your School-aged Child

Swimming and playing in water can give your child much enjoyment and good exercise. But you must take steps to prevent your child from drowning.

- Never let your child swim in any body of water without an adult watching. The supervising adult should be focusing all his or her attention on the child and not be using a phone, reading a book, or distracted in any way.
- Be sure the adult watching your child knows how to swim, get emergency help, and perform CPR.
- Keep a life preserver and shepherd's hook in the pool area to help pull a child to the edge of the pool if necessary.
- Teach your child safety rules and make sure they are obeyed.
  - Never swim alone. Lifeguards, supervising adults, and buddies can all help prevent drowning.
  - Never dive into water except when permitted by an adult who knows the depth of the water and who has checked for underwater objects.
  - Always use a life jacket when on a boat, fishing, or playing in a river or stream.
- Do not permit your child to walk or skate on ice unless an adult has checked that the ice is thick enough to be safe.
- Don't let young children and children who cannot swim use inflatable toys, water wings, or mattresses in water that is above the waist. These are toys, not safety devices.
- Watch children closely when they are playing near standing water, wells, open postholes, or irrigation or drainage ditches. If possible, get rid of standing water near your home.
- Teach your child to swim once he or she is ready. Some children may be ready to learn as early as age 1 year. All children should have the opportunity to learn swim skills by age 5 years.

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# A Parent's Guide to Water Safety

Drowning is one of the top causes of injury and death in children. Children can drown in pools, rivers, ponds, lakes, or oceans. They can even drown in a few inches of water in bathtubs, toilets, and large buckets.

Here is information from the American Academy of Pediatrics (AAP) about how to keep your children safe in or around water.

## Water Safety at Home

Parents need to keep a close eye on infants and young children, especially as they learn to crawl.

### To keep your child safe, make sure you

- **Never leave your child alone in the bathtub—even for a moment.** Many bathtub drownings happen (even in a few inches of water) when a parent leaves a small child alone or with another young child. Also, bath seats are just bathing aids. Bath seats can tip over and your child can slip out of them, so they won't prevent drowning.
- **Empty water from containers, such as large pails and 5-gallon buckets, immediately after use.**
- **Keep bathroom doors closed.** Install doorknob covers or a hook-and-eye latch or other lock that is out of the reach of your small child.
- **Keep toilets closed.** Always close the toilet lid, and consider using a toilet lid latch.

## Water Safety at the Pool

An adult should actively watch children at all times while they are in a pool. For infants and toddlers, an adult should be in the water and within arm's reach, providing "touch supervision." For older children, an adult should be paying constant attention and free from distractions, like talking on the phone, socializing, tending to household chores, or drinking alcohol. The supervising adult must know how to swim.

### Pool Rules

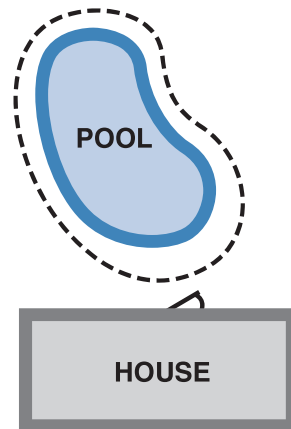
#### If you have a pool, insist that the following rules are followed:

- No one, adult or child, should ever swim alone.
- Keep toys away from the pool when the pool is not in use.
- Empty small blow-up pools after each use.
- No tricycles or other riding toys at poolside.
- No electrical appliances near the pool.
- No diving in a pool that is not deep enough.
- No running on the pool deck.

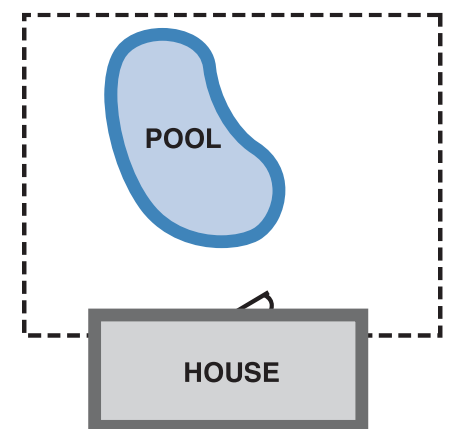
### Pool Fences

Children can climb out a window, climb through a doggy door, or sneak out a door to get to the backyard and the pool. To prevent small children from entering the pool area on their own, there should be a fence that completely surrounds the pool or spa. Combined with the watchful eyes of an adult, a fence is the best way to protect your child and other children who may visit or live nearby.

### RIGHT!



### WRONG!



A fence should completely surround the pool, isolating it from the house.

### Pool fences should also

- Be climb-resistant and not have anything alongside them (such as lawn furniture) that can be used to climb them.
- Be at least 4 feet high and have no footholds or handholds that could help a child climb them.
- Have no more than 4 inches between vertical slats. Chain-link fences are very easy to climb and are not recommended as pool fences. If they must be used, the diamond shape should not be bigger than 13/4 inches.
- Have a gate that is well maintained and is self-closing and self-latching. It should only open away from the pool. The latches should be higher than a child can reach—54 inches from the bottom of the gate.
- For aboveground pools always keep children away from steps or ladders. When the pool is not in use, lock or remove ladders to prevent access by children.

Other protection products, when used with an "isolation" fence, may be of some benefit; however, these are not substitutes for adequate fencing.

### These may include

- Automatic pool covers (motorized covers operated by a switch). Pool covers should cover the entire pool so that a child can't slip under them. Make sure there is no standing water on top of the pool cover. Be aware that floating solar covers are *not* safety covers.
- Door alarms pool alarms, and window guards.
- Doors to the house that are self-closing or self-latching.

## Swimming Lessons

Children need to learn to swim. The AAP supports swimming lessons for most children 4 years and older and for children 1 to 4 years of age who are ready to learn how to swim. Keep in mind that because children

## Don't Drink and Swim

Swimmers are at serious risk of drowning when they drink alcohol or use other drugs while swimming, diving, and playing water sports. These activities require clear thinking, coordination, and the ability to judge distance, depth, speed, and direction. Alcohol impairs all of these skills. People who are supervising other swimmers should not be using alcohol or drugs.

develop at different rates, each child will be ready to swim at her own time. Also, swimming lessons do not provide “drown-proofing” for children of any age, so supervision and other layers of protection are necessary—even for children who have learned swimming skills.

Some factors you may consider before starting swimming lessons for younger children include frequency of exposure to water, emotional maturity, physical limitations, and health concerns related to swimming pools (for example, swallowing water, infections, pool chemicals). While some swim programs claim to teach water survival skills to infants younger than 12 months, evidence does not show that they are effective in preventing drowning.

Swim classes should be taught by qualified teachers. For children younger than 3 years, the World Aquatic Babies & Children Network recommends that parents must participate, the time the head is submerged underwater is limited (swallowing too much water can make your child sick), and classes should be fun and include one-on-one teaching.

Pool conditions should be monitored to make sure chemical and water temperature levels are safe. Another safety measure is to check with the pool operator if there are protective drain covers or vacuum release systems.

## Diving

Serious spinal cord injuries, permanent brain damage, and death can occur to swimmers who dive into shallow water or spring upward on the diving board and hit it on the way down.

**Keep safe by following these simple commonsense diving rules.**

- Check how deep the water is. Enter the water feetfirst, especially when going in for the first time.
- Never dive into aboveground pools.
- Never dive into the shallow end of a pool.
- Never dive through inner tubes or other pool toys.
- Learn how to dive properly by taking classes.

## Water Safety in Other Bodies of Water

Swimming in a pool is different from swimming in other bodies of water. In addition to rules for pool safety, parents and children should know the rules for swimming in oceans, lakes, ponds, rivers, and streams.

**These include**

- Never swim without adult supervision.
- Never dive into water unless an adult who knows the depth of the water says it's OK.

- Always use an approved personal flotation device (life jacket or life vest) when boating, riding on a personal watercraft, fishing, waterskiing, or playing in a river or stream. Water wings and other blow-up swimming aids should not be used in place of life jackets.
- Never try water sports such as skiing, scuba diving, or snorkeling without instructions from a qualified teacher.
- Never swim around anchored boats, in motorboat lanes, or where people are waterskiing.
- Never swim during electrical storms.
- If you swim or drift far from shore, stay calm and tread water, or float on your back until help arrives.
- Other water hazards found near many homes include canals, ditches, postholes, wells, fishponds, and fountains. Watch your child closely if he is playing near any of these areas.

## Life Jackets and Life Preservers

If your family enjoys spending time on the water, make sure everyone wears an approved personal flotation device or life jacket. Some people think life jackets are hot, bulky, and ugly. However, today's models have improved in looks, comfort, and protection. Many states require the use of life jackets and life preservers. They must be present on all boats traveling in water supervised by the US Coast Guard. Remember, without wearing a life jacket, your child is not protected.

**Keep the following tips in mind:**

- A life jacket should not take the place of adult supervision.
- Choose a life jacket that fits your child's weight and age. It should be approved by the US Coast Guard and tested by Underwriters Laboratories (UL). Check the label to be sure. The label should also say whether the jacket is made for an adult or a child.
- Teach your child how to put on her own life jacket and make sure it is worn the right way.
- Blow-up water wings, toys, rafts, and air mattresses should never be used as life jackets or life preservers.

## In an Emergency

**Here are ways to be ready for an emergency.**

- **Learn CPR.** Anyone caring for or watching children should know CPR (cardiopulmonary resuscitation). CPR can save a life and help reduce injury after a near drowning. The American Red Cross, the American Heart Association, and your local hospital or fire department offer CPR training.
- **Always have a phone near the pool.** Clearly post your local emergency phone number (usually 911).
- **Post safety and CPR instructions at poolside.**
- **Make sure all rescue equipment is nearby.** This includes a shepherd hook, safety ring, and rope.

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