

Growth In Childhood

Infants	Weekly weight gain	Ht(mthly)	FOC (mthly)	General parameters
0 to 3 mths	200grams(4-8oz)	3.5cm	2 cm	Regain birth weight by 2 wks
3 to 6 mths	140grams(5oz)	2cm	1cm	Double birth weight by 6mths
6 to 12 mths	80-100grams(3-4oz)	1.2-1.5cm	0.5cm	Triple birth weight by 1 year
Toddlers	Weight gain(yearly)	Ht(yearly)		General parameters
1-3 years	2-3kg(4.6-6lbs)	12cm		Ht @2yrs ~1/2 adult ht.
Preschool				
3-6 years	2kg(4.5lbs)	3-7cm		
Schoolage				
6-12 years	3-3.5kg(7lbs)	6cm		
Adolescent	Total wt gain	Ht(yearly)		General Parameters
Girls 10-14	17.7kg(39lbs)	6-8.3cm		Puberty affects growth
Boys 12-16	22.2kg(50lbs)	6-9.5cm		Weight gain follows linear Growth (eg taller then fill out)

Nutrition

Infants		General parameters
0-3mths	100-110Kcal/Kg/day	Infants birth to 6 mths should be exclusively breast or formula fed. 6 mths--introduce solids-begin with cereal then veg/ fruits and 1 new food q 3-5 days. Give via spoon. 1tbsp per year of age(serving) Change to Whole milk at 1 year of age Change to 2% or Skim at 2 years of age. After age 1-no more than 16-20 oz of milk/day
4-6 mths	85Kcal/Kg/day	
7-12 mths	80Kcal/kg/day	
3-35 mths	83Kcal/kg/day	
Toddlers/preschool		General parameters
3-8yrs	80-90Kcal/Kg/day	Picky eaters, need to be introduced to foods x 15

before become accustomed to it. Decreased growth demands results in decreased food intake. Don't force feed but follow cues of child.

Healthy eating habits

Milk should be no more than 16-20oz per day.

School age

8-12yrs 60-80 Kcal/Kg/day

General Parameters

Food likes/dislikes carry over from toddlerhood.

Erratic growth and activity levels so more likely to

Skip meals. Healthy fast snacks easily available.

Healthy eating habits.

Adolescent

12-16 yrs 45-60 Kcal/Kg/day

General Parameters

Increasing independence and body image change.

Usually lacking in calcium, folate, iron.

Promote healthy eating and exercise habits.

AAP recommends all infants, children and adults get Vitamin D supplementation. If concerned about dietary intake may require additional multivitamin supplementation, iron, and calcium.

Burns, et.al. (2013). *Pediatric Primary Care*. 5th ed. St. Louis, MO, Saunders/Elsevier.