

## Keeping track

We suggest you use this binder as a place to keep records of your child's health condition and medical treatments or surgical procedures. Some contents are listed below.

■ *Some parents choose to keep detailed records of their child's journey as a journal, photo album or scrapbook,* ■ *Height and growth charts,* ■ *Immunization records,* ■ *Plastic pouch to organize professional cards,* ■ *Directory (a place to write down frequently contacted supports in the community and in the hospital).*

### My own resources



#### JOURNAL IDEAS

JOURNAL, PHOTO  
ALBUM, SCRAPBOOK



HEIGHT AND GROWTH  
CHARTS



IMMUNIZATION  
RECORDS



PLASTIC POUCH  
TO ORGANIZE  
PROFESSIONAL CARDS



DIRECTORY FOR  
SUPPORTS IN THE  
COMMUNITY



Finding answers. For life.

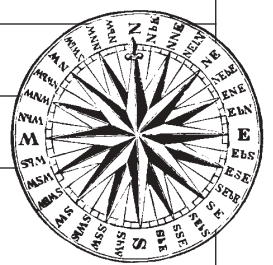
**GROWTH CHART**

Fill in the height and weight for your child as she/he grows.

Age	Height	Weight
in years	<input type="checkbox"/> in inches <input type="checkbox"/> in centimetres	<input type="checkbox"/> in lbs. <input type="checkbox"/> in kgs.
<b>18</b>		
<b>17</b>		
<b>16</b>		
<b>15</b>		
<b>14</b>		
<b>13</b>		
<b>12</b>		
<b>11</b>		
<b>10</b>		
<b>9</b>		
<b>8</b>		
<b>7</b>		
<b>6</b>		
<b>5</b>		
<b>4</b>		
<b>3</b>		
<b>2</b>		
<b>1</b>		
<b>at birth</b>		

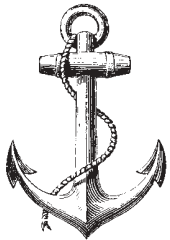
**IMMUNIZATION RECORD**

Vaccine	Age	Date
<b>Diphtheria/pertussis/tetanus/polio DTP</b>	2 months	
	4 months	
	6 months	
	18 months	
	school entry	
<b>Measles/mumps/rubella (MMR)</b>	1 year	
	18 months	
<b>H influenza type B (Hib)</b> <i>(usually given with DTP)</i>	2 months	
	4 months	
	6 months	
	18 months	
<b>Hepatitis B</b>	2 months	
	4 months	
	6 months	
	grade 6 (series/2 doses)	
<b>Tetanus diphtheria (Td)</b>	grade 9	
<b>Influenza vaccine</b> <i>(annual)</i>	<b>Annual</b> <i>(ask your doctor or nurse if your child is at risk)</i>	
<b>Pneumococcal Vaccine (Prevnar)</b>	2 months	
	4 months	
	6 months	
	12-15 months	



IMMUNIZATION RECORD - CONTINUED

Vaccine	Age	Date
Meningococcal C Conjugate (Neis Vac-C)	2 months	
	4 months	
	6 months	
Other Vaccines		



Before having immunizations

Talk to your doctor if your son/daughter:

- has a serious reaction to any antibiotics
- has received immune globulin or blood transfusions in the past three months
- has a serious illness
- has had a serious reaction when he/she was immunized before

Phone number of health department in your area:

## DIRECTORY

### ■ Cardiology Clinical Nurse Specialist (CNS)

Clinical nurse specialist available to work with your family is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Pediatric Nurse Practitioner (PNP)

Pediatric nurse practitioner available to work with your family is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Cardiology Nurse Clinician/Clinic Nurse

Cardiology nurse clinician available to work with your family is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Parent Support Network

Parent support network contact person is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Pediatric Cardiac Surgeon

Pediatric cardiac surgeon(s) in our program:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Pediatric Cardiologist

The pediatric cardiologist involved in your child's care is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Social Worker

The social worker available to work with your family is:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

### ■ Other team members

(chaplain, child life specialist, psychologist, lactation consultant, First Nation's advocate)

Other team members available to work with your family are:

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

at: \_\_\_\_\_

\_\_\_\_\_

