



# Bright Futures Parent Handout 2 Year Visit

Here are some suggestions from Bright Futures experts that may be of value to your family.

ASSESSMENT OF LANGUAGE DEVELOPMENT

## Your Talking Child

- Talk about and describe pictures in books and the things you see and hear together.
- Parent-child play, where the child leads, is the best way to help toddlers learn to talk.
- Read to your child every day.
- Your child may love hearing the same story over and over.
- Ask your child to point to things as you read.
- Stop a story to let your child make an animal sound or finish a part of the story.
- Use correct language; be a good model for your child.
- Talk slowly and remember that it may take a while for your child to respond.

TELEVISION VIEWING

## Your Child and TV

- It is better for toddlers to play than watch TV.
- Limit TV to 1–2 hours or less each day.
- Watch TV together and discuss what you see and think.
- Be careful about the programs and advertising your young child sees.
- Do other activities with your child such as reading, playing games, and singing.
- Be active together as a family. Make sure your child is active at home, at child care, and with sitters.

SAFETY

## Safety

- Be sure your child's car safety seat is correctly installed in the back seat of all vehicles.
- There should be no more than a finger's width of space between your child's collarbone and the harness strap.

SAFETY

- Everyone should wear a seat belt in the car. Do not start the vehicle until everyone is buckled up.
- Never leave your child alone in your home or yard, especially near cars, without a mature adult in charge.
- When backing out of the garage or driving in the driveway, have another adult hold your child a safe distance away so he is not run over.
- Keep your child away from moving machines, lawn mowers, streets, moving garage doors, and driveways.
- Have your child wear a good-fitting helmet on bikes and trikes.
- Never have a gun in the home. If you must have a gun, store it unloaded and locked with the ammunition locked separately from the gun.

TOILET TRAINING

## Toilet Training

- Signs of being ready for toilet training
  - Dry for 2 hours
  - Knows if she is wet or dry
  - Can pull pants down and up
  - Wants to learn
  - Can tell you if she is going to have a bowel movement
- Plan for toilet breaks often. Children use the toilet as many as 10 times each day.
- Help your child wash her hands after toileting and diaper changes and before meals.
- Clean potty chairs after every use.
- Teach your child to cough or sneeze into her shoulder. Use a tissue to wipe her nose.
- Take the child to choose underwear when she feels ready to do so.

TEMPERAMENT AND BEHAVIOR

## How Your Child Behaves

- Praise your child for behaving well.
- It is normal for your child to protest being away from you or meeting new people.
- Listen to your child and treat him with respect. Expect others to do as well.
- Play with your child each day, joining in things the child likes to do.
- Hug and hold your child often.
- Give your child choices between 2 good things in snacks, books, or toys.
- Help your child express his feelings and name them.
- Help your child play with other children, but do not expect sharing.
- Never make fun of the child's fears or allow others to scare your child.
- Watch how your child responds to new people or situations.

## What to Expect at Your Child's 2½ Year Visit

### We will talk about

- Your talking child
- Getting ready for preschool
- Family activities
- Home and car safety
- Getting along with other children

Poison Help: 1-800-222-1222

Child safety seat inspection:  
1-866-SEATCHECK; seatcheck.org



American Academy  
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# Your Child at 2 Years



Child's Name \_\_\_\_\_

Child's Age \_\_\_\_\_

Today's Date \_\_\_\_\_

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by his or her 2nd birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

## What Most Children Do at this Age:

### Social/Emotional

- Copies others, especially adults and older children
- Gets excited when with other children
- Shows more and more independence
- Shows defiant behavior (doing what he has been told not to)
- Plays mainly beside other children, but is beginning to include other children, such as in chase games

### Language/Communication

- Points to things or pictures when they are named
- Knows names of familiar people and body parts
- Says sentences with 2 to 4 words
- Follows simple instructions
- Repeats words overheard in conversation
- Points to things in a book

### Cognitive (learning, thinking, problem-solving)

- Finds things even when hidden under two or three covers
- Begins to sort shapes and colors
- Completes sentences and rhymes in familiar books
- Plays simple make-believe games
- Builds towers of 4 or more blocks
- Might use one hand more than the other
- Follows two-step instructions such as "Pick up your shoes and put them in the closet."
- Names items in a picture book such as a cat, bird, or dog

### Movement/Physical Development

- Stands on tiptoe
- Kicks a ball
- Begins to run

- Climbs onto and down from furniture without help
- Walks up and down stairs holding on
- Throws ball overhand
- Makes or copies straight lines and circles

## Act Early by Talking to Your Child's Doctor if Your Child:

- Doesn't use 2-word phrases (for example, "drink milk")
- Doesn't know what to do with common things, like a brush, phone, fork, spoon
- Doesn't copy actions and words
- Doesn't follow simple instructions
- Doesn't walk steadily
- Loses skills she once had

**Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to [www.cdc.gov/concerned](http://www.cdc.gov/concerned) or call 1-800-CDC-INFO.**

The American Academy of Pediatrics recommends that children be screened for general development and autism at the 24-month visit. Ask your child's doctor about your child's developmental screening.

Adapted from CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Fifth Edition, edited by Steven Shelov and Tanya Remer Altmann © 1991, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS, CHILDREN, AND ADOLESCENTS, Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics. This milestone checklist is not a substitute for a standardized, validated developmental screening tool.

[www.cdc.gov/actearly](http://www.cdc.gov/actearly)

1-800-CDC-INFO



Learn the Signs. Act Early.

# Su Hijo de 2 Años



Nombre del niño \_\_\_\_\_

Edad del niño \_\_\_\_\_

Fecha de hoy \_\_\_\_\_

La manera en que su hijo juega, aprende, habla y actúa nos ofrece pistas importantes sobre cómo se está desarrollando. Los indicadores del desarrollo son las cosas que la mayoría de los niños pueden hacer a una edad determinada.

Marque los indicadores del desarrollo que puede ver en su hijo cuando cumple 2 años de edad. En cada visita médica de su hijo, lleve esta información y hable con el pediatra sobre los indicadores que su hijo alcanzó y cuáles son los que debería alcanzar a continuación.

## ¿Qué Hacen los Niños a Esta Edad?

### En las áreas social y emocional

- Copia a otras personas, especialmente a adultos y niños mayores
- Se entusiasma cuando está con otros niños
- Demuestra ser cada vez más independiente
- Demuestra un comportamiento desafiante (hace lo que se le ha dicho que no haga)
- Comienza a incluir otros niños en sus juegos, como jugar a sentarse a comer con las muñecas o a correr y perseguirse

### En las áreas del habla y la comunicación

- Señala a objetos o ilustraciones cuando se los nombra
- Sabe los nombres de personas conocidas y partes del cuerpo
- Dice frases de 2 a 4 palabras
- Sigue instrucciones sencillas
- Repite palabras que escuchó en alguna conversación
- Señala las cosas que aparecen en un libro

### En el área cognitiva (aprendizaje, razonamiento, resolución de problemas)

- Encuentra cosas aun cuando están escondidas debajo de dos o tres sábanas
- Empieza a clasificar por formas y colores
- Completa las frases y las rimas de los cuentos que conoce
- Juega con su imaginación de manera sencilla
- Construye torres de 4 bloques o más
- Puede que use una mano más que la otra
- Sigue instrucciones para hacer dos cosas como por ejemplo, "levanta tus zapatos y ponlos en su lugar"
- Nombra las ilustraciones de los libros como un gato, pájaro o perro

### En las áreas motora y de desarrollo físico

- Se para en las puntas de los dedos
- Patea una pelota
- Empieza a correr

- Se trepa y baja de muebles sin ayuda
- Sube y baja las escaleras agarrándose
- Tira la pelota por encima de la cabeza
- Dibuja o copia líneas rectas y círculos

## Reaccione pronto y hable con el doctor de su hijo si el niño:

- No usa frases de 2 palabras (por ejemplo, "toma leche")
- No sabe cómo utilizar objetos de uso común, como un cepillo, teléfono, tenedor o cuchara
- No copia acciones ni palabras
- No puede seguir instrucciones sencillas
- No camina con estabilidad
- Pierde habilidades que había logrado

**Dígale al médico o a la enfermera de su hijo si nota cualquiera de estos signos de posible retraso del desarrollo para su edad**, y converse con alguien de su comunidad que conozca los servicios para niños de su área, como por ejemplo el programa público de intervención temprana patrocinado por el estado. Para obtener más información, consulte [www.cdc.gov/preocupado](http://www.cdc.gov/preocupado) o llame **1-800-CDC-INFO**.

La Academia Americana de Pediatría recomienda que, a los 24 meses de edad, se evalúe el desarrollo general de los niños y se realicen pruebas de detección del autismo. Pregúntele al médico de su hijo si el niño necesita ser evaluado.

Tomado de CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Quinta Edición, editado por Steven Shelov y Tanya Remer Altmann © 1991, 1993, 1998, 2004, 2009 por la Academia Americana de Pediatría y BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS, CHILDREN, AND ADOLESCENTS, tercera edición, editado por Joseph Hagan, Jr., Judith S. Shaw y Paula M. Duncan, 2008, Elk Grove Village, IL: Academia Americana de Pediatría. Esta lista de verificación de indicadores del desarrollo no es un sustituto de una herramienta de evaluación del desarrollo estandarizada y validada.

[www.cdc.gov/pronto](http://www.cdc.gov/pronto)

1-800-CDC-INFO



Aprenda los signos. Reaccione pronto.



## 2 TO 4 YEARS

### Safety for Your Child

Did you know that injuries are the leading cause of death of children younger than 4 years in the United States? Most of these injuries can be prevented.

Often, injuries happen because parents are not aware of what their children can do. Children *learn fast*, and before you know it your child will be *jumping, running, riding* a tricycle, and *using tools*. Your child is at special risk for injuries from falls, drowning, poisons, burns, and car crashes. Your child doesn't understand dangers or remember "no" while playing and exploring.

#### Falls

Because your child's abilities are so great now, he or she will find an endless variety of dangerous situations at home and in the neighborhood.

Your child can fall off play equipment, out of windows, down stairs, off a bike or tricycle, and off anything that can be climbed on. **Be sure the surface under play equipment is soft enough to absorb a fall.** Use safety-tested mats or loose-fill materials (shredded rubber, sand, wood chips, or bark) maintained to a depth of at least 9 inches underneath play equipment. Install the protective surface at least 6 feet (more for swings and slides) in all directions from the equipment.

Lock the doors to any dangerous areas. **Use gates on stairways and install operable window guards** above the first floor. Fence in the play yard. **If your child has a serious fall or does not act normally after a fall, call your doctor.**

#### Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. It is best to keep all guns out of the home. If you choose to keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. **Handguns are especially dangerous.** Ask if the homes where your child visits or is cared for have guns and how they are stored.

#### Burns

The kitchen can be a dangerous place for your child, especially when you are cooking. If your child is underfoot, hot liquids, grease, and hot foods can spill on him or her and cause serious burns. Find something safe for your child to do while you are cooking.

Remember that kitchen appliances and other hot surfaces such as irons, ovens, wall heaters, and outdoor grills can burn your child long after you have finished using them.



(over)



**If your child does get burned, immediately put cold water on the burned area. Keep the burned area in cold water for a few minutes to cool it off. Then cover the burn loosely with a dry bandage or clean cloth. Call your doctor for all burns. To protect your child from tap water scalds, the hottest temperature at the faucet should be no more than 120°F. In many cases you can adjust your water heater.**

Make sure you have a working smoke alarm on every level of your home, especially in furnace and sleeping areas. Test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries at least once a year.

## Poisonings

Your child will be able to *open* any drawer and *climb* anywhere curiosity leads. Your child may *swallow anything* he or she finds. Use only household products and medicines that are absolutely necessary and keep them safely capped and out of sight and reach. Keep all products in their original containers.

**If your child does put something poisonous in his or her mouth, call the Poison Help Line immediately. Attach the Poison Help Line number (1-800-222-1222) to your phone. Do not make your child vomit.**

## And Remember Car Safety

**Car crashes** are the **greatest danger** to your child's life and health. The crushing forces to your child's brain and body in a collision or sudden stop, even at low speeds, can cause injuries or death.

**To prevent these injuries, correctly USE a car safety seat EVERY TIME** your child is in the car. If your child weighs more than the highest weight allowed by the seat or if his or her ears come to the top of the car safety seat, use a belt-positioning booster seat.

The safest place for all children to ride is in the back seat. In an emergency, if a child **must** ride in the front seat, move the vehicle seat back as far as it can go, away from the air bag.

Do not allow your child to play or ride a tricycle in the street. **Your child should play in a fenced yard or playground.** Driveways are also dangerous. Walk behind your car before you back out of your driveway to be sure your child is not behind your car. You may not see your child through the rearview mirror.

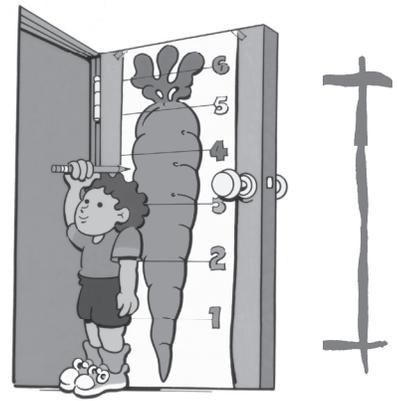
**Remember, the biggest threat to your child's life and health is an injury.**



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 the individual facts and circumstances.

# Growing Up Healthy: Fat, Cholesterol, and More



Many Americans consume too many calories and too much fat, especially saturated fat, trans fat, and sugar. These eating patterns are one cause of America's high rates of obesity and heart disease.

As a parent or caregiver, you can help your child develop healthy habits that can last a lifetime. Although many things influence children, adults are still the most important role models. The single best predictor of a child with a healthy weight and lifestyle is parents who set a good example by making healthy food choices and engaging in regular physical activity. If heart disease runs in your family, your child is at greater risk for it in adulthood, making this even more important.

Read on for information from the American Academy of Pediatrics about fat in food and healthier food choices. If you have specific questions about your child's nutrition, talk with your child's doctor or a registered dietitian.

## Fat in food: how much for children?

Childhood is the best time to start heart-healthy eating habits. But eating healthy for most children doesn't mean following adult goals for cutting back on total fat, saturated fat, trans fat, and cholesterol, particularly for children younger than 2 years. Fat is an essential nutrient that supplies the energy, or calories, children need for growth and active play and should not be severely restricted.

However, if your child is younger than 2 years and overweight or at risk for overweight, or has a family history of high cholesterol or heart disease, reduced saturated fat dietary choices may be appropriate. Check with your child's doctor or a registered dietitian before restricting fat in your child's diet. When children are between the ages of 2 and 5 years, encourage them to gradually choose foods with less fat, saturated fat, and trans fat. By age 5, their overall food choices, like yours, should include heart-healthy foods such as nonfat or low-fat dairy products, skinless chicken, fish, lean red meats, whole grains, fruits, and vegetables.

Keep in mind, restricting a child's eating too much may harm growth and development or encourage undesirable eating behaviors. Before making any drastic changes in a child's eating plan or physical activity habits, talk with your child's doctor or a registered dietitian. If your child is younger than 2 years and obese or overweight, consult your child's doctor before restricting fat or calories, such as with reduced-fat (2%) milk.

## How is saturated fat different than other fat?

Saturated fat is usually solid at room temperature, compared with liquid fats such as oil that contain unsaturated fats. Saturated fats come mostly from animal sources, such as butter, cheese, bacon, and meat, as well as stick margarine. Polyunsaturated and monounsaturated fats are found in vegetables and fruits such as olives, soybeans, and nuts. Trans fats are fats that begin as good fats but are chemically changed to keep foods fresh longer; unfortunately, they can be bad for your cholesterol levels. They are found in baked goods and processed foods. Reading Nutrition Facts labels

and ingredients to look for saturated and trans fats can help you determine how much of these fats are present in a particular food.

## Cholesterol: where does it come from?

Cholesterol is made by your body to help form the walls of cells and organs. It is an important part of the brain and nervous system. The liver converts fat that you eat into cholesterol. Cholesterol also comes from your diet; it is found in large amounts in shrimp, octopus, squid (calamari), and organ meats such as liver. Eggs also contain cholesterol in lesser amounts. Foods higher in cholesterol do not need to be avoided but should be eaten in moderate amounts.

## Good nutrition for the whole family

Chances are that some of your child's favorite foods are higher in fat and energy (or calories) compared with the amount of nutrients they provide. Try to select foods that have a high content of nutrients (protein, vitamins, and minerals) compared with the amount of calories, fat, and salt. For example,

- Have plenty of fresh fruits and vegetables available and ready to eat. Washing and preparing these ahead of time may make it more likely your family will eat them.
- Include high-fiber, whole-grain foods such as brown rice, whole-grain pasta, corns, peas, and breads and cereals at meals. Sweet potatoes are also a good choice.
- Choose lower fat or fat-free toppings like grated low-fat parmesan cheese, salsa, herbed cottage cheese, nonfat/low-fat gravy, low-fat sour cream or salad dressing, or yogurt.
- Select lean meats such as skinless chicken and turkey, fish, lean beef cuts (round, sirloin, chuck, loin, and lean ground beef—no more than 15% fat content) and lean pork cuts (tenderloin, chops, and ham). Buy *choice* or *select* grades of beef rather than *prime*. Trim off all visible fat. Remove skin from cooked poultry before eating.

## Milk choices

Here are guidelines about what type of milk to give your child.

- **Children younger than 12 months**—Breast milk is best. Give iron-fortified formula if breast milk is not available.
- **Children 12 to 24 months**—Whole milk. Your child's doctor may recommend reduced-fat (2%) or low-fat (1%) milk if your child is obese or overweight, or if there is a family history of high cholesterol or heart disease. Check with your child's doctor or a registered dietitian before switching from whole to reduced-fat milk. (Breastfeeding can continue after 12 months of age as long as is desired by mom and baby.)
- **Children older than 24 months**—Low-fat or nonfat (skim) milk.

## Tips on How to Make Healthier Food Choices<sup>a</sup>

	Most Days	Once in a While
Fruit	Several servings of fresh, canned, frozen, or dried fruit, and 100% unsweetened fruit juice <sup>b</sup>	<ul style="list-style-type: none"> <li>• Pies or desserts with fruit</li> </ul>
Vegetable	Several servings of raw and cooked vegetables	<ul style="list-style-type: none"> <li>• French fries</li> <li>• Creamy coleslaw</li> </ul>
Grains	<ul style="list-style-type: none"> <li>• Whole-grain mini bagel or English muffin</li> <li>• Whole-grain chips or breads high in fiber</li> <li>• Low-sugar, low-fat, high-fiber granola bars and baked goods</li> </ul>	<ul style="list-style-type: none"> <li>• Donut or Danish pastry</li> <li>• Fried potato or corn chips</li> <li>• Cookie or cupcake</li> </ul>
Meat, poultry, fish, dry beans, eggs, and nuts	<ul style="list-style-type: none"> <li>• Baked or grilled skinless chicken</li> <li>• Baked or grilled fish</li> <li>• Veggie “burgers”</li> <li>• Beans, eggs, nuts, seeds, and almond or peanut butter (1 to 2 tablespoons)</li> </ul>	<ul style="list-style-type: none"> <li>• Fried fish sticks</li> <li>• Fried chicken</li> <li>• Fried chicken nuggets</li> </ul>
Milk, yogurt, and cheese	<ul style="list-style-type: none"> <li>• Low-fat (1%) or nonfat (skim) milk</li> <li>• Reduced-fat cottage cheese or cheese</li> <li>• Low-fat yogurt</li> </ul>	<ul style="list-style-type: none"> <li>• Ice cream, milkshakes</li> </ul>

<sup>a</sup>Do not feed children younger than 4 years round, firm food unless it is chopped completely. The following foods are choking hazards: nuts and seeds; chunks of meat; chunks of cheese or string cheese; hot dogs; whole grapes; fruit chunks such as apples; popcorn; raw vegetables; hard, gooey, or sticky candy; and chewing gum. Peanut butter and other nut butters can be a choking hazard for children younger than 2.

<sup>b</sup>The American Academy of Pediatrics recommends that juice be limited to 4 ounces per day for children 1 to 3 years of age, 4 to 6 ounces per day for children 4 to 6 years of age, and 8 ounces per day for children 7 to 18 years of age.

- Include healthy oils such as canola or olive oil in your diet. Choose margarine and vegetable oils without trans fats made from canola, corn, sunflower, soybean, or olive oil. Choose tub and liquid rather than stick margarine, which contains trans fats.
- Use nonstick vegetable sprays when cooking.
- Use fat-free cooking methods such as baking, broiling, grilling, poaching, or steaming when cooking meat, poultry, or fish.
- Serve vegetable- and broth-based soups, or use nonfat (skim), low-fat (1%), or evaporated skim milk when making cream soups.
- Use the Nutrition Facts label on food packages to find foods with less saturated fat per serving. Pay attention to the serving size as you make choices. Remember that the percent daily values on food labels are based on portion sizes and calorie levels for adults.

### Don't forget active play!

Physical activity, along with proper nutrition, promotes lifelong health. Active play is the best exercise for kids! Parents can join their children and have fun while being active too. Some fun activities for parents and kids to do together include playing on swings, riding tricycles or bicycles, jumping rope, flying a kite, making a snowman, swimming, or dancing. The daily recommendation for exercise for children (adults also) is at least 1 hour per day. This takes commitment from parents, but the rewards are time together and better health.

### Serving up healthier food choices

It's important for children and adults to be sensible and enjoy all foods but not to overdo it on one type of food. Also, no food should be forced or forbidden. When children think a food is forbidden by their parents, it often

becomes more desirable. However, children should know that sweets and higher fat snack foods in appropriate portions are OK once in a while. See Tips on How to Make Healthier Food Choices when considering fat, saturated fat, and cholesterol in food choices.

### For more information

#### American Academy of Pediatrics

[www.aap.org](http://www.aap.org) and [www.HealthyChildren.org](http://www.HealthyChildren.org)

#### Academy of Nutrition and Dietetics

[www.eatright.org](http://www.eatright.org) and [www.kidseatright.org](http://www.kidseatright.org)

#### US Department of Agriculture Food and Nutrition Service

[www.fns.usda.gov](http://www.fns.usda.gov) (includes information on SNAP [Supplemental Nutrition Assistance Program] and WIC [Women, Infants and Children] benefits)

Listing of resources does 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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### From your doctor

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DEDICATED TO THE HEALTH OF ALL CHILDREN™

The American Academy of Pediatrics (AAP) is an organization of 66,000 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.

American Academy of Pediatrics  
Web site—[www.HealthyChildren.org](http://www.HealthyChildren.org)

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## Head First

**Always wear a helmet.** As a bicyclist, your only significant piece of safety equipment is your helmet. A helmet can prevent serious head injury; it can save your life. In Missouri, a helmet is required safety equipment in some municipalities. Check with your local police department to see if your community has a helmet law.

Helmets can reduce risk of head injury by up to 85 percent. Consider your own safety and buy a helmet that:

- Meets current Federal Safety Standards. Look inside the helmet for label certifying it meets safety standards set by the Consumer Products Safety Commission (CPSC), American National Standards Institute (ANSI) or Snell Memorial Foundation.
- Has plenty of ventilation holes.
- Fits securely. Wear your helmet low on your forehead, just above your eyebrows.

Replace your helmet every five years and after any crash, even if it looks undamaged.

### Good fit is a must when choosing and wearing a helmet.

#### Right

Helmets come in both adult and child sizes. A helmet must fit snugly.

Be sure to wear the helmet straight across your forehead. Imagine a line parallel to the ground.

Fasten the chin strap securely so the helmet can't easily shift or come off in a fall.



#### Wrong

If the helmet is not in the proper position, it won't protect you in a fall. Make sure the front of the helmet protects your forehead.



## Dress for Safety

Besides wearing a helmet, there are several other ways to dress smart and increase your safety as a bicyclist.

**Make yourself visible.** During the day, wear bright colors like yellow, orange or bright pink. It's safest to avoid night riding, but if you must ride after dark, wear reflective tape and white or light-colored clothes – and obey Missouri's laws for equipping your bike with lights or reflectors.

**Use leg clips or bands on pants.** Avoid loose clothing which can catch in gears and chains and cause falls.

Wear gloves. They'll protect your hands if you fall.



Missouri Department of Transportation  
P.O. Box 270  
Jefferson City, MO 65102

**573-751-4161**  
**800-800-BELT**

[www.saveMOLives.com](http://www.saveMOLives.com)  
[www.modot.org](http://www.modot.org)

This brochure paid for with federal highway safety funding by the Missouri Department of Transportation.

# Bicycle Safety

## Tips for Bicyclists of All Ages



HS11.086

**ARRIVE  
ALIVE**

# Rules of the Road

## Ride a Safe Bike and Ride it Safely.

Your safety as a bike rider is mostly up to you. You need to know how to choose and care for your bike, use proper safety equipment and understand the rules of the road. Your actions on your bike can keep the streets safer and more enjoyable for everyone.

**Your bike should be equipped for safety.** Once you choose your bike style, you need to equip it for safety. This means adding safety features such as:

- A rearview mirror,
- A bell or horn, and
- A headlight and taillight, or comparable reflectors.

**Chapter 307 of the Missouri Revised Statutes** lists minimum mandatory requirements for safely equipping and operating your bicycle on Missouri roads. By law, bicycles must be equipped with a brake or brakes that will enable you to stop the bike within 25 feet from a speed of 10 miles per hour on clean, dry pavement. Additionally, all bikes ridden after dark must have:

- A white light mounted on the front of the bicycle or carried by the rider,
- A rear-facing red reflector at least two inches square, or a rear-facing red lamp,
- Reflective material and/or lights visible from each side of the bike, and
- Reflective material and/or lights visible from the front and rear on any moving parts or the bicyclist's shoes and lower legs.

Some municipalities may have additional laws that govern bicycle safety. Failure to comply with safety requirements may result in fines or even impoundment of a bicycle for up to five days.

## The Rules of the Road Apply to You.

According to state statutes, bike riders must obey the same laws and rules of the road as vehicle drivers. Stop and check for traffic before entering any street. Be aware of any vehicles around you.

**Always ride on the right** with the traffic flow. Stay as far to the right as you can but be aware of hazards on the roadway, parked vehicles or vehicles proceeding in the same direction. You may move into traffic when making a left turn, when the lane is too narrow to share with another vehicle, or on a one-way street.

**Use caution** at intersections, go slowly and yield to pedestrians. Look for turning vehicles. If traffic is heavy, or if you are uncomfortable biking in traffic, consider walking your bike across.

**Steer clear of parked cars.** Be alert for opening doors and cars pulling away from curbs. Drivers in cars are probably not expecting to see you approaching, so ride defensively.

**Be on the lookout.** As a bicyclist, you share the road with more than just cars. Pedestrians and other bicyclists also create potential hazards. Go slowly and alert people when passing. Remember, young children can run out in front of you anywhere.

**Respect pedestrians.** Always yield to pedestrians in crosswalks and on sidewalks. Take extra care when riding your bicycle on sidewalks, and when approaching pedestrians, always alert them of your intention to pass. Riding on sidewalks is prohibited in business districts and in other areas where signs are posted.

**Don't hitch a ride.** It is illegal in Missouri for bicyclists to attach to another vehicle by holding onto a car, truck or other bicycle for a ride. So no matter how tempting it is to "hitch" a ride with friends, don't do it.

**Extra precautions for young cyclists.** Children should take extra steps to stay safe on bikes. Kids are smaller, less familiar with road rules, and often ride their bikes in

congested areas such as school drop-off zones. Some special safety considerations for small bicyclists include:

- Small children can't pedal as fast as adults, and may not be able to cross streets as quickly as lights change. Walking bikes across intersections can be safer for kids who are not yet confident cyclists.
- Dusk and dawn are the most dangerous times for kids to ride. Encourage them to be extra careful if they ride their bikes during these times.
- School bus drivers may not see small bicyclists around their bus, and people in cars are not expecting them to ride out from behind a parked bus. Instruct children to look both ways before crossing the street, and not to cross between parked vehicles.
- Bicycles are vehicles. Children should be able to understand and obey the rules of the road before they are allowed to ride in the street.

### Even very young bicyclists will be safer if they learn to:

**Use hand signals.** Always signal turns and stops.

- Left turn: Left arm held straight out.
- Right turn: Left arm turned up or right arm held straight out.
- Slow or stop: Left arm bent downward.

**Check street signs.** Their size, shape and color give important information to everyone on the road.

- Stop: Red sign, eight sides.
- Yield: Red and white triangle.
- Caution: Yellow, diamond-shaped sign.
- Information & regulations: Square or rectangular.
- Railroad crossing: Yellow circle with X through it.