◆ NGN NCLEX · PEDIATRIC NURSING · 2026 TEST PLAN

Growth & Development

High-yield milestones, psychosocial theory, safety priorities, and nutrition for the Infant & Toddler stages — everything the NGN test plan expects you to recognize at a glance.

INFANT · 0–12 MO
TODDLER · 1–3 YR
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The Infant 01

BIRTH – 12 MONTHS

Rapid physical growth & trust-building. Everything is *cephalocaudal* (head-to-toe) and *proximodistal* (center-out).

The Toddler 02

1 – 3 YEARS

Growth *slows*, autonomy *explodes*. Ritualism, negativism, and parallel play define this stage.

i. Physical Growth — *the body*

VITALS · FONTANELS · DENTITION

Infant Growth

HC > CHEST UNTIL 2 YR

- **Weight:** 2× by 6 mo · 3× by 12 mo
- **Length:** increases ~50% by 12 months
- **Head circumference:** grows ~33% in first year
- **Posterior fontanel** closes by **2–3 mo**
- **Anterior fontanel** closes by **12–18 mo**
- **First tooth:** erupts around 6 mo (lower central incisors)
- HOT Bulging fontanel → ↑ICP · Sunken → dehydration

Toddler Growth

GROWTH SLOWS ↓

- **Weight gain:** only **4–6 lbs/yr** (slows!)
- **Height:** ~3 inches per year
- **Anterior fontanel** fully closed by **18 mo**
- **Dentition:** 20 primary (deciduous) teeth by ~**30 mo**
- **Pot belly + lordosis** = *normal* body shape
- Bow-legged appearance until about 2–3 yr
- HOT Physiologic anorexia → expect ↓ appetite

ii. Gross Motor — *big movements*

CEPHALOCAUDAL · HEAD → FEET

Infant Gross Motor

LIFT · ROLL · SIT · CRAWL · WALK

2 mo	Lifts head 45° when prone
4 mo	Rolls *front → back*; holds head steady
5 mo	Rolls *back → front*; sits with support
6 mo	Tripod sits; bears weight on legs
8 mo	Sits unsupported
9 mo	Crawls on hands & knees
10 mo	Pulls to stand; cruises furniture
12 mo	Walks with one hand held

Toddler Gross Motor

RUN · JUMP · PEDAL

15 mo	Walks alone steadily
18 mo	Runs (clumsily); climbs stairs with help
2 yr	Runs well; kicks ball; jumps in place
2.5 yr	Jumps with both feet; stands on one foot briefly
3 yr	Rides tricycle; alternates feet up stairs
3 yr	Balances on one foot 2–3 sec

Tip *Alternating feet up-stairs = 3 yr · down-stairs = 4 yr*

iii. Fine Motor & Language — *hands & words*

GRASP · BABBLE · PHRASE

Infant Fine Motor + Language

2 mo	**Coos;** social smile
3 mo	Hands to midline; laughs
4 mo	Grasps rattle voluntarily
6 mo	**Babbles** ("ba-ba-ba"); palmar grasp
7 mo	Transfers object hand-to-hand
9 mo	**Pincer grasp** begins (crude)
10 mo	"Mama/Dada" *non-specific*
12 mo	Neat pincer · **2–4 words** specific · waves bye

Toddler Fine Motor + Language

15 mo	Tower of **2 blocks**; 4–6 words
18 mo	Tower of **3–4 blocks**; 10–20 words
2 yr	Tower of **6–7 blocks**; **50+ words**; 2-word phrases ("me go")
2 yr	Turns pages one at a time; removes shoes
3 yr	Tower of **9–10 blocks**; copies a ○
3 yr	**300+ words**; 3-word sentences; asks "why?"

Rule of thumb Speech should be **75% intelligible** by age 3.

● Erikson · Psychosocial

Infant `Trust vs Mistrust`

Consistent, responsive caregiving builds **trust**. Feeding is the central trust event. Unmet needs → mistrust, withdrawal.

Toddler `Autonomy vs Shame/Doubt`

Child asserts independence ("I do it!"). Support **choices within limits**. Shaming → self-doubt & hesitation.

● Piaget · Cognitive

Infant `Sensorimotor (0-2)`

Object permanence emerges ~9 mo → why peek-a-boo is thrilling. Learns through senses & motion.

Toddler `Preoperational begins ~2 yr`

Egocentric & **magical thinking**. Symbolic play (banana = phone). Cannot yet take another's perspective.

iv. Play & Social-Emotional — *the "why" behind behavior*

ATTACHMENT · PLAY TYPE · REGULATION

Infant Social / Play

SOLITARY

- **Social smile:** 2 months (responsive)
- **Stranger anxiety:** begins **6–8 mo**
- **Separation anxiety: 9–18 mo** (peaks around 15 mo)
- **Play type:** `Solitary` plays alone
- Toys: mobiles, mirrors, rattles, soft blocks, textured books
- `NGN` Hospitalized infant → keep primary caregiver present; consistent nurse assignment

Toddler Social / Play

PARALLEL

- **Play type:** `Parallel` plays *beside*, not with
- **Negativism:** "NO!" is a normal autonomy response
- **Ritualism:** routines feel safe — honor them in hospital
- **Temper tantrums:** peak 2–3 yr; ignore unsafe behavior, do not reason mid-tantrum
- **Regression** common during hospitalization — reassure parent it's expected
- Toys: push/pull, stacking rings, large crayons, pretend kitchen

Safety — Unintentional Injury = #1 Cause of Death Ages 1–4

NGN PRIORITY

Infant Safety Priorities

- ✓ **Back to sleep** — supine, firm mattress, no loose bedding/bumpers (SIDS)
- ✓ Share a **room**, not a **bed**, for first 6 mo
- ✓ Rear-facing car seat **until age 2** (or per max weight/height)
- ✗ NO honey before **12 mo** → infant botulism
- ✗ NO cow's milk before **12 mo** → GI bleed, anemia
- ✗ NO infant walkers (AAP contraindicated)
- ✗ Choking: keep objects < **1.25 in** away (toilet paper tube test)
- ✗ NEVER leave unattended on changing table, couch, or in tub

Toddler Safety Priorities

- ✓ **Drowning** is the leading injury death 1–4 yr → close supervision near ALL water (bath, toilet, pool, bucket)
- ✓ Car seat: rear-facing to 2 yr, then **forward-facing 5-point harness**
- ✓ Poison Control: **1-800-222-1222** · meds in locked, climbed-to cabinets
- ✗ Outlet covers, cabinet locks, stove-knob guards, window guards
- ✗ Avoid small foods: hot dogs, grapes, nuts, hard candy, popcorn
- ✗ Sunscreen, helmet for trike, fence around pool w/ self-latching gate
- ✗ No plastic bags, cords, blinds within reach

Developmental Red Flags — Refer for Evaluation

Infant Red Flags

- ⚠ No social smile by **3 mo**
- ⚠ Doesn't follow objects with eyes by **4 mo**
- ⚠ Head lag persists beyond **4 mo**
- ⚠ Not babbling by **9 mo**
- ⚠ Not sitting unsupported by **9 mo**
- ⚠ No words or gestures (wave/point) by **12 mo**
- ⚠ Any loss of previously acquired skill

Toddler Red Flags

- ⚠ Not walking by **18 mo**
- ⚠ < 15 words or no 2-word phrases by **24 mo**
- ⚠ Speech unintelligible to strangers at **3 yr**
- ⚠ Does not engage in pretend play by **24–30 mo**
- ⚠ Persistent toe-walking / abnormal gait
- ⚠ No eye contact, social smile, or joint attention
- ⚠ Regression in language or social skills

Nutrition — High-Yield NGN Points

Infant Feeding

- **0–6 mo:** Breast milk or iron-fortified formula *exclusively*
- **6 mo:** Start solids — **iron-fortified rice cereal** first
- Introduce one food every **3–5 days** to monitor for allergies
- Finger foods ~8–9 mo; cup introduced ~6–12 mo
- **12 mo:** Transition to whole cow's milk (needs fat for brain dev)
- Signs of readiness: good head control, sits supported, opens mouth for spoon, doubled birth weight

Toddler Feeding

- **Physiologic anorexia** — decreased appetite is *normal*
- "Food jags" common — offer variety, do not force-feed
- Whole milk **16–24 oz/day max** (> 32 oz → iron-deficiency anemia)
- Serving size: **1 Tbsp per year of age** per food group
- Self-feeds with spoon by 18 mo; uses cup well by 2 yr
- No juice or honey-limited; avoid choking foods (whole grapes, hot dogs, nuts, popcorn)

Memory Aids — *remember on test day*

2·4·6·9

INFANT MILESTONES

2=smile · 4=roll f→b · 6=sit/babble · 9=crawl/pincer

T·R·U·S·T

ERIKSON INFANT

Take turns · Respond consistently · Use comfort · Soothe · Through feeding

SIDS

PREVENTION "ABC"

Alone · Back · Crib — firm mattress, no bumpers, pacifier OK, room-share not bed-share

NO!

TODDLER TRUTH

Negativism · Obstinate ritualism. Offer 2 choices, not open-ended. Ignore tantrums that are safe.

For the prepared nurse.

V1.0 · INFANT-TODDLER · PRINT-READY