Car seat guidelines change periodically, and it is important to stay up to date with the current regulations. Many of our pediatric clients are not yet being transported in their mobility base due to age, weight or lack of accessible transportation.

Motor vehicle injuries are a leading cause of death among children in the United States. Car seat use reduces the risk of death to infants under 12 months by 71 percent and to toddlers aged 1 to 4 years by 54 percent in passenger vehicles. Booster seats reduce risk of serious injury by 45 percent for children aged 4 to 8 years. An estimated 46 percent of car and booster seats are misused, included being installed incorrectly. Car seats should always be placed in the rear seat and, if possible, in the middle.

Car seat recommendations are based on the age and size of the child.

• Rear-facing only and rear-facing convertible car seats are recommended for infants and toddlers until 2 years of age or until the child reaches the height or weight limit of that specific car seat (these limits vary by manufacturer). If an infant is too small, often collapsing within the seat, blanket rolls can be placed on either side of the trunk and a small diaper or blanket can be placed between the crotch strap and infant to provide more support. Premies can often ride in a rear-facing only seat, as this is semi-reclined. If a baby needs to lie flat, car beds are available.

• Convertible or forward-facing with a harness car seats are recommended after rear-facing car seats have been outgrown. The American Academy of Pediatrics recommends children use a forward facing seat with a harness for as long as possible, up to the height and weight limit, regardless of age, though at least until 4 years of age.

• Booster seats are recommended for children who have outgrown a forward facing car seat in weight or height and should be used until the vehicle seat belt fits properly, typically at a height of 4’9” and between 8 and 12 years of age. Children younger than age 13 should ride in the back seat.

• Travel vests can be worn by children between 20 and 68 pounds and may be used instead of a traditional forward-facing car seat. This can be helpful if the vehicle only has lap belts in the rear seat, for children with special needs or children who have reached the weight limit for a forward-facing car seat.

Car seats are installed with the vehicle’s seat belt or LATCH system (lower anchors and tethers for children). The LATCH system may be used until the child reaches a weight of 65 pounds, including the car seat. Car seats should not be used after a moderate or severe crash, if the car seat is cracked or otherwise damaged, or if it is too old. The car seat should be labeled with the date it was made and the manufacturer has recommended length of use guidelines available.

Many children with special needs can use standard car seats. Some convertible seats that rear face have higher weight limits to support a child who is very small, has brittle bones, low tone or poor trunk and head control. Rear-facing places the child in a semi-reclined position. Some forward-facing seats are available with weight limits as high as 90 pounds and provide five-point harness support, when required. Some of these seats have lower or shallow sides which may accommodate hip casts. Forward-facing car seats may have a semi-reclined option for children who have limited trunk and head control as well as additional padding and positional inserts to increase support. Specialized car seats are available to meet specific needs not addressed by standard car seats.

It is important to be aware of standard car seat options and regulations to provide the safest transportation to pediatric clients using mobility bases. Standard or specialized car seats often provide better protection during transport for children with special needs than the mobility base and seating system.

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RESOURCES:

HEALTHYCHILDREN.ORG FROM THE AMERICAN ACADEMY OF PEDIATRICS
CAR SEATS: INFORMATION FOR FAMILIES
CENTERS FOR DISEASE CONTROL AND PREVENTION INJURY PREVENTION AND CONTROL: MOTOR VEHICLE SAFETY CHILD PASSENGER SAFETY
AUTOMOTIVE SAFETY PROGRAM
SPECIAL NEEDS TRANSPORTATION