



DEVELOPMENT:

All babies develop at their own rate. In the first few days, you may notice your baby:

- Raises head slightly when on stomach
- Moves arms and legs together
- Automatically holds your finger
- Startles easily
- Sees objects best at 8 to 10 inches away
- Follows slow moving objects with eyes
- Calms when swaddled and rocked

IMUNIZATIONS: Hepatitis B #1 (if not given at birth)

Possible vaccine side effects are rare but may include:

- Mild fever
- More irritability or fussiness
- Redness or swelling at the site of the shot.

NUTRITION:

Babies at this age get all their nutrition from breastmilk or formula. Try to breast feed as much as you can for as long as possible. Below are some facts and tips on feeding your baby.

- Breastfed babies should nurse on demand, at least 8 to 12 times in 24 hours. If your baby is sleepy, you may have to undress him or her, tickle the feet or rub the back to wake him or her for feeds.
- Breastfeeding is often not well established for several weeks – take your time and be patient. Sometimes bottle feeds are needed, especially if your baby is losing weight, is significantly jaundiced, or not feeding well at the breast. Sometimes extra help from a lactation nurse can help. Ask your provider for details on how to find one in your area.
- Bottle-fed babies may take 2-4 ounces per feeding, 7-8 times per 24 hours.
- If you give your baby formula, always follow package directions when preparing it. You do not need to boil water before preparing formula, unless your water comes from a well.
- Do not heat bottles in the microwave because this can lead to uneven heating and burns.
- Babies may have periods in the day when they cluster their feeds, feeding every hour. Feed your baby on demand.
- Many babies spit up when they feed. If your baby spits up often, keep his or her head raised for at least 30 minutes after feeding. Spitting up small amounts is harmless as long as your baby is gaining weight and is not in pain. Spitting up usually ends by age six to nine months.
- After feeds, gently burp the baby by holding the baby on your chest, upright and gently patting or stroking the back. Do this for 2 to 5 minutes. Your baby may not burp after every feeding.
- Do not prop bottles in your baby's mouth. Do not add cereal to your baby's bottles. Do not give your baby extra water. Do not give your baby honey.



COMMON CONCERNS

- **Stools:** Your newborn's stools will be changing from the tar-like black meconium stools shortly after birth, to greenish and finally to yellow seedy stools. In the first few days, the stool frequency and color help you know that the baby is feeding sufficiently and, for breastfed infants, that mom's milk is in. By day 4 or 5 stools should be yellow, seedy and babies should have at least 3-6 stools/24 hours. Some babies stool up to 12 times a day, often when feeding. Babies often make dramatic facial expressions, pass gas, strain and draw up their legs when passing stools. As long as stools are soft, this is not constipation and not a cause of concern. True constipation is rare at this age.
- **Congestion/Sneezing:** Babies often sneeze or sound congested. This is not necessarily as sign of a cold. If the congestion is mild, intermittent, and not interfering with feedings and your baby seems comfortable, you do not need to do anything at all. For more bothersome symptoms, you can try using over the counter nasal saline drops (1 or 2 drops to each side of the nose every 4-6 hours as needed) and/or a bulb suction. If your baby has significant congestion, nasal drainage, fever or a persistent cough, you should discuss your concerns with your provider.
- **Jaundice:** Newborn babies commonly have jaundice, a yellow discoloration of the eyes and skin, in the first few days after birth. This is, in part, because their livers are still not fully mature. Often a test is done in the hospital to check the bilirubin level, which is the substance in the blood responsible for the yellow color. If it is elevated, a repeat test may be recommended in the next 1-2 days. Your provider will let you know if a test is needed. Let your provider know if you think your baby is getting more yellow.
- **Sleeping:** Always place your baby on the back to sleep to reduce the chance of Sudden Infant Death Syndrome (SIDS). Infants should sleep on a firm mattress covered by a fitted sheet. Keep pillows, bumpers, blankets and toys away from the baby when sleeping.
- **Bathing:** After the umbilical cord falls off, you may bathe your baby in a small tub.
- **Skin Care:** Newborns often have peeling skin. This is a natural process and part of adjusting to life outside the womb. No oils are needed. If you choose to use oil for massage, grapeseed, canola or olive oil are good choices. Avoid fragranced oils and lotions. Soaps are usually not needed at this age.
- **Diaper Care:** Your baby's skin is delicate. Use a dabbing motion when cleaning the diaper area. For girls, wipe front to back. For uncircumcised boys, no special care is needed. Do not try to retract the foreskin. For circumcised boys, follow the instructions given to you at the time the procedure was done. The best way to clean the diaper area during a diaper change is with warm water and soft paper towels or cotton balls. If you use wipes, invert the container between use so the top wipes are moist and less rough. If you see redness in the diaper area, stop using wipes and switch to water. Always let the diaper area air dry for a few minutes before putting on a new diaper. When the skin is dry, you can use Vaseline or a diaper rash ointment that contains zinc oxide, such as Balmex or Desitin. Zinc oxide can be removed more easily using oil on a tissue.
- **Crying/Colic:** Crying increases over the first six to eight weeks, and then begins to taper off. Initially cries often indicate hunger or needing a diaper change. Sometimes babies cry and there is no reason. Try swaddling your baby, rocking, cuddling, using "white noise" like a fan or vacuum cleaner, or placing your baby in a swing. If these measures don't work and you cannot calm your baby, call your provider's office.

SAFETY

- Never jiggle or shake your baby. Consider taking an infant CPR class.
- Set water heater to 120°F. Don't drink hot liquids while holding baby.
- Ensure smoke and CO detectors are working.

- Always place your baby in a car seat, rear-facing, in the back seat. For more information on car seats or to find a car seat inspection office in your area, go to the National Highway Traffic Safety Administration website: www.nhtsa.gov
- Never leave your baby unattended in the car, in the bath or on elevated surfaces.
- To prevent illness, avoid crowded places and wash your hands often.
- Avoid exposure to second hand smoke.
- Never tie a pacifier or put jewelry around your baby's neck due to risk of choking.
- If you are concerned about violence in the home, please speak with your provider or contact the National Domestic Violence Hotline at 1-800-799-SAFE or www.ndvh.org

FOCUS ON FAMILY

- The first weeks at home with a newborn are often exhausting. Both parents should try to rest when the baby is sleeping. Often taking turns being up with the baby is helpful. Try to remember that things will get better with time.
- Postpartum depression is common and can arise anytime in the first year. Postpartum "blues" are common for the first few weeks and usually get better. If you find yourself feeling sad, anxious, or depressed beyond this period, please seek help and talk to your provider. Information is available online at www.postpartum.net
- Older siblings may be feeling some jealousy. Spending some time alone with older brothers and sisters may help.
- Moms should schedule the 6 week post-partum check with their obstetric provider. If desired they may discuss birth-control options at that visit.
- Enjoy this precious time. Cuddle with your baby – infants this age cannot be "spoiled". Responding to baby promptly at this age teaches him/her that he/she will be cared for and loved.

WHEN TO CALL YOUR PROVIDER'S OFFICE

Call your provider if you have questions about your baby or if he or she:

- Has a rectal temperature of 100.4 or higher
- Is crying excessively or is inconsolable
- Has difficulty or troubled breathing
- Is listless or lethargic or is feeding poorly
- Is vomiting forcefully and repeatedly
- Is getting more yellow

You can always call if you have questions or concerns about your baby.

ADDITIONAL RESOURCES

- American Academy of Pediatrics: aap.org; American Academy of Family Physicians: aafp.org; Immunization information: immunize.org, cdc.gov/vaccines, vaccine.chop.edu, familyprovider.org and vaccineinformation.org
- Suggested reading (Other books are available at aap.org/bookstore):
 - *Baby 411: Clear Answers & Smart Advice for Your Baby's First Year* by Ari Brown, M.D., and Denise Fields
 - *Bestfeeding: Getting Breastfeeding Right for You* by Mary Renfrew, et al.
 - *Healthy Sleep Habits, Happy Child* by Marc Weissbluth
 - *The Nursing Mother's Companion*, by Kathleen Huggins
 - *What to Expect the First Year* by H. Mukoff
 - *Mother Nurture* by Rick Hanson, Jan Hanson and Ricki Pollycove