



Congratulations on Your New Baby!

Most mothers will leave the hospital one to three days after the baby is born, and questions may arise as soon as you get home. Some of these may be answered at your baby's next visit but others may require advice earlier. Our nurses can usually answer any questions you may have.

If you think your baby is sick, please do not hesitate to call our office. Remember that our afterhours triage is available when we are not here to help you. If the baby is experiencing life-threatening symptoms (difficulty breathing, seizure, and/or unconsciousness) dial 911 or go to the nearest emergency room.

IF YOUR NEWBORN DEVELOPS ANY OF THE FOLLOWING, CONTACT OUR OFFICE IMMEDIATELY:

- **Rectal temperature above 100.4°F**
- **Persistent refusal to eat (3 feedings in a row)**
- **Repeated vomiting of 2 or more complete feedings (not spitting up)**
- **Vomiting green material**
- **Infrequent or decreased urination**
- **Lethargy (inactive or unable to awaken)**
- **Persistent irritability (inconsolable)**
- **Persistent eye discharge or swelling of the eyes**
- **Sudden breast enlargement or redness**

The following are some topics that you may find helpful in navigating some common newborn concerns.

FEEDING:

Breast milk or infant formula gives your baby all the nutrition needed for the first 6 months of life. Newborns and infants do not need water or juice. Until your baby starts eating solid food, all the water needed is obtained from breast milk or formula. A baby's nutritional needs during the first year of life are greater than at any other time. Babies will triple their birth weight during the first year. Feeding your baby provides more than just good nutrition. It gives you a chance to hold your newborn close, cuddle, and make eye contact.

SLEEP:

Newborns sleep an average of 16 to 17 hours a day, but they may only sleep 1-2 hours at a time. As children get older, the total number of hours they need to sleep decreases. At 6 months of age, a baby may still wake during the night, but these awakenings should only last a few minutes and the baby should be able to fall back to sleep on his/her own. Babies should sleep on their backs. This is because there is an increased risk of Sudden Infant Death Syndrome (SIDS) in babies who sleep on their stomachs. Pillows, stuffed animals, quilts, and comforters should not be kept on a baby's bed. "Tummy time" is perfectly safe when a baby is awake!

CONSOLING YOUR BABY:

Crying serves several purposes for a baby: 1) it lets the baby call out for help when hungry, wet, or uncomfortable, 2) it enables the baby to shut out sights and sounds that are too intense to handle, and 3) it helps the baby release tension. The best way to handle your baby's crying is to respond promptly. You cannot spoil a newborn by giving lots of attention and responding to crying. If your baby is cold, wet or hungry, respond to the crying by meeting his or her needs (warm up, feed, change diaper). If your baby does not fall asleep and remains inconsolable, he or she could be sick. Let your baby's doctor know!

SKIN AND NAIL CARE:

Newborn babies have very sensitive skin and are very susceptible to irritation from chemicals in new clothing, soaps or detergents. Newborns should have all their clothing and bedding washed before being used. Newborns normally do not need any lotions, oils, or powders. If your baby has very dry skin, you can use a small amount of non-perfumed baby lotion on the dry areas. Newborns' nails should be kept short and smooth to prevent them from scratching themselves. You can use a soft emery board or baby nail-clippers to trim the nails. It may be easiest to trim the nails when the baby is asleep and lying still.

JAUNDICE:

60% of newborns become jaundiced. This happens when bilirubin (a waste product) builds up faster than the developing liver can remove it. It causes a yellow to orange skin color and usually develops between days 3-5 of life. Feeding frequently (every 2-3 hours) is important. Babies get rid of bilirubin through their bowel movements and urine. Exposure to sunlight can also be helpful. Jaundice can be monitored by checking a bilirubin blood test.

BOWEL MOVEMENTS:

The first bowel movement is thick, dark-green, or black in color and is called meconium. After the meconium is passed, the stools will turn green to yellow in color. Breastfed stools are typically yellow, seedy, loose or runny, and even explosive. Formula-fed stools are usually firmer. The stool may be any color (even green) but not red or bloody. The frequency of bowel movements varies from baby to baby. Some babies stool with each feeding. Babies do not need to have a stool every day.

THE HEAD:

The head is usually pushed out of shape during the birthing process. There may be bumps that will slowly disappear as the baby's head rounds out with age. The soft spot is a space between the skull bones, or fontanel, which leaves room for growth. The baby's brain is protected by a very tough covering and will not be injured when the baby's head is washed. The soft spots will close around 9-18 months of age.

THE EYES:

Tears generally begin to form when the baby is 2-3-weeks-old or even later. Tears often collect on the eyelid to form a crust. The tear ducts do not open until the baby is about 6 weeks old. They can become infected if bacteria are present and the tear ducts cannot drain properly. To clear the eyelids of crust or mucous, use a cotton ball soaked in sterile water. Wipe from the nasal corner to the outside corner. Call the office if there is redness or excessive discharge from the eyes.

THE NOSE:

Sneezing is very normal. This is how your baby clears the nose. Nasal congestion is also very normal. You may use a rubber bulb syringe and saline nose drops to help clear the nasal passages. A cool mist vaporizer next to the crib may help to loosen the secretions. The vaporizer will be useful for colds later on. This early congestion will usually stop by 3 months of age. If your baby has no fever and continues to feed normally, you need not worry. If your baby is breathing at a rate of over 50 times per minute, has difficulty breathing (uses chest muscles to breath, has flaring nostrils, or shortness of breath) and/or a bluish tinge to the tongue or lips, call a doctor immediately. These symptoms indicate a medical emergency.

THE CORD:

The umbilical cord will usually fall off 7-21 days after birth. The belly button may stick out and have some bleeding or yellow gooey discharge. If excessive, you can clean it with a Q-tip dipped in rubbing alcohol. Tub baths should be postponed until 3-4 days after the cord falls off. Call the office if there is any redness on the abdomen around the navel. It could indicate an infection.

CLEANING THE BABY:

It is safe to bathe a baby 3-4 days after the cord falls off. Until then, give your baby a sponge bath. You can use soap on the hair and body but use just water on the face. Do not use lotion, ointment, or anything on freshly cleansed skin. Do not use any rough paper to clean the diaper area. Clear water rinsing and air exposure is the best care for the skin. Baby wipes are fine for most babies; however, discontinue use if a rash develops. If this happens, expose the area to air as much as possible and keep the skin clean and dry. Do not use baby powder, talc, or cornstarch due to the risk of inhalation or irritating the lungs.

DIAPER RASH:

When skin stays wet for too long, the layers that protect it start to break down. Prevention: 1) change diapers frequently and 2) gently clean the diaper area with water. Treatment: 1) apply a thick layer of protective ointment or cream each time you change the diaper to form a protective coating on the skin, 2) pat, do not rub, the diaper area dry, and 3) allow the diaper area to air dry as much as possible when you change it. Check with your pediatrician IF: 1) the rash develops blisters or pus-filled sores, 2) the rash does not go away within 72 hours, or 3) the rash continues to get worse.

FEMALE GENITALS:

Baby girls may have vaginal spotting/ bleeding during the first few days of life, especially on day 4 or 5. This is normal and due to the mother's hormones transferred to the baby during pregnancy. This will resolve, and there should not be any further vaginal bleeding until puberty. Baby girls also experience mucus, clear to white, stringy discharge after birth. This discharge is normal and clears several days after birth.

MALE GENITALS:

Circumcision is a surgical procedure in which the skin covering the end of the penis is removed. After circumcision, it is common for the tip of the penis to appear raw or yellow. Circumcision care involves covering the penis with vasoline and gauze for about 2 days after the procedure. For the uncircumcised boy, the foreskin should never be forcibly retracted. Sometime during the first several years of life, a boy's foreskin will separate from the glans. An uncircumcised penis requires no special care and is easy to keep clean. As your son reaches puberty, teach him to retract the foreskin and clean beneath it on a regular basis.

FEVER:

Fever is a body temperature higher than normal. A fever is considered to be 100.4°F (38°C) or higher (taken rectally) in the first 3 months of life. A baby with a fever may feel warm to the touch or may be extremely fussy. Fever is not dangerous to the baby, but a fever is telling us there is an infection to be aware of.

PERIODIC BREATHING:

In the first few months of life, most babies will have periods when they may stop breathing for 5-10 seconds. The baby will then progress into a pattern of more rapid breathing for about 30 seconds. This breathing cycle often repeats itself and is totally normal. However, a baby who stops breathing for more than 20 seconds or develops persistent blue color of the lips and/or tongue is cause for concern. Call your doctor or emergency services immediately.

CAR SEATS:

A child should ride rear-facing in a car seat until he is BOTH 2-years-old and over 20 pounds. Your baby should be placed in the car seat in the middle of the back seat. Even after your child has grown out of a car seat, the safest place for anyone under age 13 is the back seat.

SAFETY AND ACCIDENT PREVENTION

- Enforce a NO SMOKING rule in your home and around your infant.
- Hot water heaters should be set at 120 to 130 degrees. Always check the temperature of bath water and formula. Do not heat formula in the microwave.
- Never leave an infant unattended on a surface without sides. He/she can easily roll off. Remember an infant cannot roll off the floor.
- Watch for trauma caused by other children and adults.
- Avoid tying anything around the neck, including clothing cords, pacifiers, and necklaces. Frequent hand washing, especially before feeding and after diapering, helps prevent the spread of colds and diseases.
- Do not use pillows in your baby's crib.
- Car seats are mandatory. Rear facing in the center of the back seat and strapped appropriately is the proper placement.
- Watch out for hair or strings that could wrap around the baby or small child.
- Keep small objects and breakable toys away from the baby or small child.
- Never use Q-tips in the ear canal.
- Put up or lock up everything harmful that a child can ingest.
- Keep children away from motor driven equipment.
- Do not leave the baby or child unattended around wading or swimming pools or in the bathtub.
- Beware of clear glass doors. Use decals at the child's eye level to identify the glass.
- Cover all electrical outlets.
- Call Poison Control Center at **1-800-222-1222** if you feel your child has ingested a poison or toxin.

RECOMMENDED READING

Your Baby's First Year American Academy of Pediatrics, Steven Shelov, MD, editor in chief

Baby and Child Care by Dr. Benjamin Spock

Your Child's Health by Barton Schmidt

What to Expect the First Year by Arlene Eisenberg

Dr. Mom: A Guide to Baby and Child Care books by Marianne Egeland Neifert, MD

The series of books by Penelope Leach and the behavior tips of Dr. T. Berry Brazelton may be helpful.

For breast feeding mothers, our lactation consultants recommend:

New Mother's Guide to Breastfeeding American Academy of Pediatrics

The Nursing Mothers Companion by K. Huggins

The Womanly Art of Breastfeeding published by the La Leche League

Medications and Mother's Milk by Thomas W. Hale

Please do not hesitate to call if you have any questions. Remember, enjoy your new baby.