

# **PEDIATRIC SOLUTIONS, S.C.**

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## **Facts About Caring for Your Newborn**

Congratulations on your new addition! We at Pediatric Solutions are happy that you have chosen us for the care of your child. We have put together some general information about your newborn but feel free to call us any time you have a question. Also, look for our group page on Facebook!

### **When to Call the Doctor**

- Fever – a rectal temperature of 100.4 degrees or higher is considered a fever for newborns. Only rectal temperatures, preferably with a digital thermometer, are reliable. If you have an elevated temperature that is not rectal, please do a rectal temp before calling the doctor. To reduce the risk of fever in your baby, people should wash their hands before touching the baby.
- Forceful vomiting – all children under 6 months will spit up somewhat, but if they truly vomit with force, consult your physician.
- Persistent cough – especially if interfering with sucking. Babies often sneeze, sound congested, or have the sniffles or hiccups, but they should not be coughing.
- Not feeding normally – for any reason
- Over-sleeping, difficulty waking to feed, and increased irritability.
- Never assume that a baby that does not have a fever is not sick. Even without a fever, if you feel that your baby does not look or act right, err on the side of calling us.

### **Feeding Baby**

- Breastfeeding – Breast milk is the perfect food for babies! It nourishes as well as protects against infection. Women should breastfeed (or pump and feed out of a bottle) as much as possible during the first 6 months of life.
- Over the first week of breastfeeding, the milk usually becomes more liquid and increases in volume. Be sure to drink plenty of fluids. You do not need to drink milk yourself: water and calcium-fortified juices are sufficient. It is OK to supplement after breastfeeding with pumped breast milk or formula.
- Feed a baby when they seem hungry, which is usually every 2 to 3 hours. Virtually all babies lose weight during the first few days of life. Babies should be fed every 3 hours (day and night) until they exceed their birth weight, which usually occurs at 7-10 days old (sometimes earlier or later). This includes waking the baby during the night to feed.
- Bottle feeding – Formula is also great, very safe nutrition for babies if parents choose. The brand you choose does not really matter as long as your baby will drink it. Formula fed babies tend to eat a little less often, from every 2 to 4 hours. You do not need to sterilize bottles in the US – the water is safe! Wash bottles as you would any dishes. Dishwashers can sterilize bottles or you can use a separate sterilizer. All babies need burping with feeds. Burping improves comfort and reduces spit up by getting rid of swallowed air when the hungry baby gulps down food.
- Babies need no solid food until 4-6 months of age. Until then, they cannot digest any foods besides breast milk or formula. Never give pure honey to babies under one year. Impurities in honey can cause paralysis in babies.

### **Voiding and Stooling**

- Breastfed babies can have a stool with every feeding. It is usually watery, with seedy-looking yellow components. Formula-fed babies' stools are more solid. Babies should have at least 6 wet diapers daily. Modern diapers are absorbent, so you may need to press on them to detect urine. If your baby is not wetting this many times, please call us.
- Eventually, babies will have a few bowel movements a day or a few per week. It is OK for a baby to go a few days without a bowel movement. Call if it has been 5 or more days without a bowel movement, if there is blood in the stool, or if your baby seems very uncomfortable.

### **Skin and Umbilical Cord Care**

- When the cord falls off it will shrivel up, look goeey, and may bleed a little. This is normal. Once the belly button looks healed, you can safely submerge your baby for a bath. Prior to the cord coming off, you can only give a sponge bath.

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- Call if the cord has a large amount of discharge, or if the skin around cord looks red or pink (especially if the baby is fussy), or if the cord has not fallen off within 2 weeks.
- Most babies have rashes for the first 4 months of life, as the skin matures. Lots of bumps can occur as skin glands open to the surface or from maternal hormones transferred to the baby before birth. Most babies will have some degree of skin peeling the first two weeks. A mild lotion or petroleum jelly (like Vaseline or Aquaphor) can be used but this may or may not help the peeling. Call if the skin is peeling off in sheets, or the rash is extremely dry and scaly.
- It is very common to have a red rash in the diaper area. This is from irritation from urine and stool. Use a barrier cream or ointment such as Desitin, Balmex, or Vitamin A&D if this happens. If it is still not better after trying barrier cream or ointment, call us for an appointment.
- Many babies appear yellow after birth. This is called jaundice. It is caused by the breakdown of newborn blood cells and the slow maturation of the liver's ability to metabolize and excrete the pigment bilirubin. Until the body can better handle these pigments, they are deposited in the skin. Jaundice is rarely a problem for healthy newborns after the first few days, but please call a doctor if the yellow color appears to be worsening.

## **Vitamin D Supplements**

All babies need extra vitamin D to prevent rickets (abnormal bending of the bones). Once a day give 1ml of poly-vi-sol, Tri-vi-sol, D-vi-sol or other over the counter infant vitamin that contains vitamin D. Another option is concentrated Baby D Drops that you can buy on the internet. The dose for these is only 1 drop on the tongue once a day.

## **Baby's Genitals**

Wash with warm water and avoid soap directly where the baby urinates. Both boys and girls can initially have little breast buds soon after birth due to maternal hormones. Girls can have a small amount of blood from the vagina or some milk from the breast area. This is normal, again due to maternal hormones, and can last up to a few weeks.

## **Stuffy Noses, Sneezing, and Congestion**

All of these are very common during the 1<sup>st</sup> few months. This is due to having a small nose and not breathing through their mouth often, other than while crying. To clean baby's nose, use a bulb syringe you may have been given at the hospital. If needed, you can also use a few nasal saline drops prior to suctioning. If your baby is having difficulty feeding due to their congestion, please call us.

## **Car Seats**

Newborns must be in car seats, strapped in correctly in the back seat facing backwards until they are 2 years old. Please read our separate handout on car seats for more information.

## **Sleep positioning**

All babies should be placed on their back to sleep. Studies have shown a decreased risk of sudden infant death syndrome (SIDS) when babies sleep on their back. When the baby is awake, however, do give the baby some tummy time to develop their trunk muscles. Also, be sure there are no loose blankets, soft toys, or stuffed animals in the crib. If you want to use crib bumpers, use a thin "breathable" one. Infant sleep sacks are an alternative to loose blankets to keep babies swaddled and warm.

## **Healthy checkups**

We recommend seeing us within a few days after leaving the hospital with your baby. After that, visits during the first month will depend on baby's weight. Thereafter, we recommend visits every month for the first six months, then every three months until 2 years old. After that, we will see your child at 2 ½ years old, and then once a year