

Weston Pediatric Physicians

Shelly C. Bernstein, MD
Katherine Bui, MD
Robert Andler, MD
Joshua Gundersheimer, MD

486 Boston Post Road, Weston, MA 02493 (781) 899-4456
490C Boston Post Road, Sudbury, MA 01776 (978) 443-0707
www.westonpediatrics.org

Rosemarie Dieffenbach, MD
Colleen Brownell-Krupat, MD
Karen Ashworth, FNP
Andrea Bertorelli, NP

Your Newborn

Length _____
Weight _____
HC _____

NORMAL DEVELOPMENT

Your baby:

May lift her chin for a few seconds when lying on her tummy.
Cannot support her head without assistance.
Explores her surroundings with her eyes.

May be fussy in the evening.
Sleeps most of the day (16 hours/day).
Cries when left alone; stops when she is picked up.
Grasps small objects when placed in her palm.

Cries to communicate that she's hungry, bored, or uncomfortable.
Can see 8-12 inches in front of her.

DIET

Breast milk or iron-fortified formula is all that is necessary for your baby's complete nourishment. Breast fed babies who receive less than 32 oz. per day of formula need vitamin D supplementation. 1 dropperful of TRI-VI-SOL or D-VI-SOL a day (available without prescription) meets these needs.

A bottle feeding usually take 20-30 minutes.

Expect to feed your infant about 1-3 oz. every 1-3 hours in the first two weeks of life, then about 2-4 oz. every 2-4 hours in weeks 2-4.

Breast feeding may take several weeks to get well established, especially if this is your first baby. Your baby is unlikely to be feeding on a schedule for several weeks.

To reduce nighttime feedings, awaken your baby if she naps more than 4 consecutive hours during the day.

Feeding solids before 4 months of age will not help your baby sleep through the night and may put your baby at risk for food allergies when she is older.

If you are breastfeeding and want your baby to be able to take a bottle, offer your baby a bottle every other day beginning between 3 and 4 weeks of age. This may be expressed breast milk or formula.

ELIMINATION

Breast fed babies usually have yellow or green seedy bowel movements the consistency of thin mustard. Often, breast fed babies stool with every feeding; however, it is also common for some breast fed babies to stool only once every 7-10 days. This may begin at 1 month of age and is not a cause of concern unless your baby is irritable, not feeding well, or vomiting.

Formula fed babies usually have slightly yellow, brown, or green stools.

CONSTIPATION

Many babies grunt and turn red in the face when having a bowel movement. This is normal. They are constipated if the stool is thicker than peanut butter, occurs infrequently, and the baby is very uncomfortable.

HYGIENE

Unscented, hypoallergenic baby wipes are fine to use.

Diaper rashes are common, caused by irritation from frequent stooling. Use any diaper cream to protect your infant's sensitive skin.

Keep the umbilical cord open to air. If it smells or is damp clean with alcohol and schedule an appointment.

Keep your baby's fingernails short and smooth to prevent scratches. It may be easier to cut the nails with blunt tipped scissors after a bath and while the baby is sleeping. Cut or file nails straight across.

If necessary, clean only the outer ear with a cotton swab (Q-tip); NEVER put a swab into the ear canal because you can push wax in and possibly damage your baby's eardrum.

Don't use baby powder, as it may be inhaled and cause breathing problems.

SAFETY

⊕ ALWAYS restrain your baby in an appropriate carseat facing the rear of the car and in the BACK SEAT. Keep ALL children in the back seat to avoid airbag injuries.

⊕ Never use a microwave to heat a bottle as it can create hot spots in the formula and burn your baby's mouth. Check the temperature of the bottle before feeding.

⊕ Keep your baby away from tobacco smoke. Smoke particles can stick to clothing and upholstery in the house and car. Smoke has been linked to asthma, ear infections, and possibly SIDS.

⊕ Install smoke detectors on every floor. Check batteries monthly; replace the batteries every 6 months.

⊕ Dress your baby the way you dress yourself, plus one removable layer (like a blanket). In colder weather, make sure she wears a hat because most of her body heat is lost through the head.

⊕ Your baby should ALWAYS sleep on her back. Avoid floppy toys, pillows, and plastic where your baby is sleeping because she could suffocate. Blankets, sharing a bed with parents or other people, and sleeping in a bed instead of a crib have been associated with suffocation deaths.

⊕ Never leave your baby alone on a table, sofa, or bed.

PLAY

Talk and sing to your baby. You cannot spoil an infant at this age. You should respond to her crying since this is her only form of communication.

SUPPLIES TO HAVE AT HOME

Digital rectal thermometer (not a mercury thermometer or an ear thermometer).

Saline nose drops and a short, fat nasal bulb aspirator (not the one from the hospital).

Breast pump for breastfeeding moms.

COMMON PROBLEMS

Call our office at any time if your baby:

- ♥ has a rectal temperature greater than 100.5.
- ♥ refuses to feed for more than one feeding.
- ♥ is unusually irritable or sleepy.
- ♥ is working hard to breath.
- ♥ has blood in the stool.

LOOKING AHEAD

Before your next visit, your baby may:

- ⊕ enjoy looking at you more.
- ⊕ begin to have better head control.
- ⊕ have more awake time.
- ⊕ not start sleeping through the night.

SUGGESTED READINGS

Caring for Your Infant and Young Child: Birth to 5 Years edited by Steven Shelov, MD.

The Nursing Mother's Companion by Kathleen Huggins

What to Expect the 1st Year by Heidi Murkoff, Sandee Hathaway, Arlene Eisenberg

NOTES:

- ⊕ Your next scheduled appointment will be at 1 month.
- ⊕ There are no immunizations for the next scheduled visit.