

Your Newborn Infant

Feeding

- Breast-feed your baby on demand, every 2–3 hours or 8–12 times in 24 hours. Feed until your baby seems content. Continue prenatal vitamins while breast-feeding.
- Babies who are breastfed (or mostly breastfed) should have supplemental Vitamin D, 400 IU daily. This is available over the counter. Brands such as Baby D or Carlson's Vitamin D offer 400 IU in one drop.
- If you are using formula, it should be iron fortified. Feed your baby 1–3 ounces every 2–3 hours. Occasionally, your baby may need a bottle sooner. As your baby grows, his/her formula intake will increase.
- Review the formula preparation instructions carefully. Do not heat formula or breast milk in the microwave.
- Babies do not need supplemental water.
- If your newborn will not suck vigorously at the breast or the bottle at least every 4 hours, please call the office!
- If you need further assistance with breastfeeding, we recommend consulting a lactation specialist.

Elimination

- A well fed baby will need frequent diaper changes. In the first week of life, the age of your baby (in days) tells us how many wet diapers should occur in 24 hours. A 4-day-old should urinate at least four times in 24 hours, and a 6-day-old should urinate at least six times in 24 hours. After the first week, 6–7 wet diapers in 24 hours is sufficient.
- You may see a red-orange substance in your baby's urine diapers. This is called "urate crystals," and is normal in the first week of life.
- Normal stool patterns vary. Newborns have yellow, green, brown or orange stools. They can be watery, pasty or seedy, occurring once every other day or more than 10 times per day.

Sleep

- Always place your baby to sleep on his back. A firm, flat mattress in a crib or bassinet is best. The crib or bassinet should not contain bumpers, positioners or wedges.
- Nights and days may be mixed up for some time. To help establish sleep patterns, keep things dark, quiet and boring at night. Expect your baby to wake at least every 3–4 hours to eat. Try to sleep when your baby sleeps!

Development

- Although babies must sleep on their backs, allow supervised "tummy time" every day while awake. Tummy time encourages motor development, and helps prevent a flat head shape. Start by placing your baby on his tummy across your lap. As your baby grows stronger, put him on a blanket on the floor and increase the frequency and duration of tummy time. Never leave your baby unattended during tummy time, and stop when your baby is fussy or sleepy.
- Your baby will blink in reaction to bright light and respond to sound by startling or quieting.

Safety

- Always use an infant car seat, rear-facing, in the back seat.
- Never leave your baby unattended on a bed, sofa, changing table, or in the bathtub.
- Never leave your baby in a car seat or bouncer on an elevated surface.
- Shaking or spanking your baby may cause injury or death.
- Keep your baby's environment tobacco-free.
- Avoid direct sun exposure by using clothing, blankets or an umbrella.
- To prevent burns, set your hot water heater no higher than 120° F, and never drink hot liquids while holding your baby.
- Install smoke and carbon monoxide detectors in your home.
- To sign up for an infant CPR class, visit redcross.org/courses.

Baby care

- Diaper changes: Use soft paper towels with water, or diaper wipes if there is no diaper rash.
- Cord care: The cord stump will dry up and separate in 1–4 weeks. As the cord stump falls off, there may be some smelly or bloody discharge. This is normal, and may be cleaned with rubbing alcohol.
- Baby boy circumcision care: The penis will look red and shiny and may ooze. To help healing, use petroleum jelly on gauze, placed on the penis. This protects it from urine and stool.
- Baby girls may have vaginal mucus or discharge, possibly with blood. Wipe from front to back gently.
- Bathing: Sponge bathing is recommended until the cord stump falls off.
- There may be some breast engorgement in baby boys and girls; this is normal.

Fever/Illness

- Fever is a symptom that we take very seriously in the first three months of life. If your baby has a fever — rectal temperature **over 100.4° F or less than 97° F** — please call our office immediately. If the office is closed, the answering service will contact the doctor on call.
- A rectal thermometer is the most accurate way to check a baby's temperature. You do not need to check your baby's temperature routinely. Take a temperature if your baby feels hot or has other signs of illness (unusual fussiness, vomiting beyond typical spit-up, diarrhea or failure to eat several feedings in a row).

Disease prevention

- Adults who have regular close contact with your infant should receive the Tdap vaccine (for tetanus, diphtheria and pertussis). This helps prevent pertussis (whooping cough) in babies.
- We follow the vaccine schedule recommended by the American Academy of Pediatrics. If you have questions or concerns about vaccines, please visit vaccine.chop.edu/parents.

Reaching us

If you have any concerns, please do not hesitate to call the office to speak to a nurse. You may also leave a non-emergent message for your doctor or nurse practitioner to return by the end of the day. For emergencies, a doctor is on call after the office is closed.

Resources

- A good website to bookmark for future reference is: healthychildren.org.
- We suggest having the Illinois Poison Control Center phone number handy: [800.222.1222](tel:800.222.1222).

Today

- Your baby will have a physical examination.
- Your baby will have a rectal temperature taken and a skin test to detect jaundice. Both of these tests are painless.
- You will receive information about tummy time.
- You and your provider will decide if a weight check visit is necessary before the 1 month check-up. This may be done in 2-3 days, or at 2 weeks of age.

At the 1 month check-up

- Your baby will have a physical examination.
- Your questions will be answered.
- Your baby will receive the Hepatitis B vaccine.