

## Care of the Newborn

In order to get your baby off to the best start, we have provided this booklet on newborn care. We hope that you will find the information in this booklet useful and that it provides the answers to questions and concerns that you may have as a new parent.

### General Care Items

It is useful to have the following items on hand in caring for your baby:

- Rectal thermometer ( ear thermometers are used only after 6 months of age)
- Nasal syringe
- Cotton balls and rubbing alcohol
- Acetaminophen

### Bathing

Give sponge baths until the cord falls off and circumcision is healed. Use a mild soap and warm water (for safety we recommend reducing the temperature of your hot water heater to between 120<sup>0</sup> and 130<sup>0</sup> degrees F.) Shampoo the head once or twice a week. Wash the baby's face in plain water to avoid getting soap in the eyes. We do not recommend the use of baby lotion, oils or powder. A dry appearance to the skin is often normal in the first 2-3 weeks of life and requires no treatment.

### Books on Child Care

*Caring of Your Baby and Young Child: Birth to Age 5*, Published by the American Academy of Pediatrics.

*How to Prevent*, by Dr. Fitzhugh Dodson

*The First Twelve Months of Life*, by Frank Kaplan

*How to Solve Your Child's Sleep Problems* by Dr. Richard Ferber

### Bowels

There are variations in normal bowel patterns in newborns. Some babies have a small bowel movement after each feeding, while others may have only one every other day. Babies tend to strain at their stools, but unless the stool is hard and pellet-like, no treatment is needed. Breast-fed babies tend to have more frequent stools in the first few weeks of life which are usually yellow and soft or watery. The frequency of these stools decrease later.

### Circumcision

Apply petroleum jelly (Vaseline) to the circumcision until it is well healed to prevent sticking to the diaper.

### Colic

Colic is a poorly understood condition of young infants associated with crying spells usually in the evening. Typically, an infant with colic has periods of extreme fussiness characterized by crying, sucking on fist, wanting to eat often, passing gas, flailing the arms and legs, turning red in the face and pulling the knees to the abdomen as if in severe pain. The following approaches may be helpful:

- Check your baby carefully to make sure there is no other reason for crying. This should be done with the baby completely undressed. If there is nothing obviously wrong, make sure you baby is well fed, adequately burped and appropriately dressed, including a clean, dry diaper.
- Swaddle the baby snugly in a blanket, hold close to you with baby's head near your voice box as you hum quietly.
- Rock baby gently or use an automatic swing. Some babies are comforted b a ride in the car.
- Burp the infant after every one to two ounces of formula and several times during breastfeeding. Mylicon drops (simethicone) (0.3ml every 2 hours) may help decrease gas and is available without prescription.

- If you are breastfeeding you may want to consider recent changes in your diet that might be affecting the infant.
- If your baby is bottle fed, try changing the type of bottle and/or nipple. We recommend that you call the office before changing formulas.

If the above measures are not helpful and your baby continues to scream, it is possible that your child has another problem besides colic. Unusual screaming which is inconsolable and persists for more than two hours should prompt a call to our office.

### **Cradle Cap**

#### Seborrheic Dermatitis

Cradle cap is a scaly rash on the scalp of newborns and infants. It is caused by excessively oily skin and can be made worse by baby oils. It is treated by keeping the scalp clean and dry and removing the scales with a soft baby brush. Stubborn scales may require an anti-dandruff shampoo such as Sebulex or Selson Blue.

### **Eye Problems**

Many times the newborn's eyes are mildly swollen or irritated in the first few days of life due to medicine used in the nursery. Usually, the swelling and irritation will resolve without treatment within a week. Occasionally one or both eyes may be slightly matted from time to time during the day. This is usually due to a blocked tear duct. The treatment for this is massaging the tear duct with the index finger at the inner corner of the eye applying pressure in a downward direction. This massage will help open the tear duct and no additional treatment is needed in most cases. If there is significant drainage from the eyes or if they seem excessively swollen the child should be checked.

## **FEEDING**

### **Breast Feeding**

We encourage breastfeeding if at all possible. The nutrition and infection fighting capacity of human milk are very important for the baby and will benefit the baby even if the switch to formula is made. Milk products based on "supply and demand". As the baby nurses frequently and "demands" more milk, mother produces an increased supply of breast milk to meet this need. Breastfed infants will need to nurse 8 – 12 times in a 24 hour period or about every 2- 3 hours. Early introduction of artificial nipples and formula can interfere with the supply and demand system and may result in decreased milk volume.

All new mothers need lots of rest, a good diet, and plenty of fluids. Taking care of yourself and frequent nursing will help get breastfeeding off to a good start. Some babies and mothers begin breast feeding with little or no difficulty. In other cases it may be difficult to get breast feeding established. In these cases, we want to do all we can to assist you so that you can continue to breastfeed.

### **Formula Feeding**

Sterilization is not necessary if you have city water and use clean technique in preparing the formula. Prepare all formula following label directions. Prepared formula can be stored in the refrigerator up to 48 hours. Make 3 or 4 oz. bottles at first and then increase as the baby's appetite increases. Use a fresh bottle at each feeding and give the milk at room temperature. Warm the bottle by placing it in a container of hot water. Use of the microwave oven is not recommended due to the potential of serious burns. Always hold the bottle and baby for feedings – never prop the bottle. Burp the baby at the middle and at the end of each feeding. Formula fed babies usually eat every 3 or 4 hours. Most babies on city water do not need supplemental vitamins with fluoride.

Breast milk or infant formula is recommended for the first full year of your baby's life. Cow's milk is a good supplement to the diet of older children, but it does not supply the balanced nutrition your baby needs during the first year. Please contact the office before any formula change.

### **Solid Feeding**

Solids are usually introduced between 4 and 6 months of age. Introduction of solids will be discussed at your baby's 4-month check up. If you have questions prior to this visit, please call the office during regular hours. We do not recommend the use of infant feeders.

### **FEVER**

#### **Taking a Rectal Temperature**

1. Get the Thermometer Ready
  - If using a glass thermometer, wash with warm, soapy water and rinse
  - Shake the thermometer until the silver mercury inside drops below 96<sup>0</sup> F
  - Lubricate the silver bulb end of rectal thermometer with petroleum jelly
2. Position Your Baby. Use the position that works best for you. Here are two of the safest positions:
  - Put baby on his back on a firm surface. Hold baby's ankles and lift legs as if you are changing a diaper.
  - Or place baby on her stomach and spread buttocks so anus (opening where bowel movements leave baby's body) is easily seen.
3. Taking the Temperature
  - Gently slip the tip of thermometer into the anus ½ to 1 inch. The silver tip will no longer be visible.
  - Hold thermometer in place for 2-3 minutes or until the mercury stops rising. If using a digital thermometer leave in until you hear a beep.
  - Remove thermometer
  - Read degree of temperature exactly where the mercury stops.

**A rectal temperature above 100.4<sup>0</sup> in an infant less than 3 months of age should be reported to the physician.**

### **Navel Cord**

The navel cord should be cleansed thoroughly with rubbing alcohol 3 – 4 times daily or with diaper changes until it falls off, usually within 2 weeks. Do not use a bandage or binder on the cord. Occasionally when the cord falls off there will be a few drops of blood, but this will stop on its own and requires no treatment. After the cord falls off, the area can be bathed with soap and water.

### **Newborn Jaundice**

Most all babies develop some degree of jaundice and this is a little more pronounced in breastfed babies. It is rarely cause for concern. You should call for an appointment if the jaundice is present on the lower legs or feet or lasts for more than 10 days.

### **RASHES**

#### **Diaper**

Diaper rashes are usually due to either irritation from a wet diaper or to yeast which grows on the skin in moist areas. The following treatments are recommended:

- Change wet or soiled diapers frequently
- Use a washcloth with water only; avoid wipes and soaps
- Apply zinc oxide (Desitin) or other diaper ointment (A&D; Diaper Goop)

- Allow exposure to air by leaving diaper off; this is most convenient during naps when the child can be laid on a towel.

### **Newborn**

Many newborns have a migrating red rash over their bodies which remains for a few days. Newborns may also have many small white bumps on the nose called milia. Newborns can also develop acne in the first one to two months. All of these rashes go away without treatment. Do not squeeze the bumps.

If the rash is red and bumpy and fails to respond to the above measures, try an over-the-counter yeast cream such as Monistat, Gyne-Lotrimin applied to diaper area three or four times per day.

### **Safety**

The biggest threat to your child is accidental injury. Please always travel with a car seat and take other steps as needed to make sure your child's environment is a safe one.

### **Signs of Serious Illness in the Newborn**

While most illnesses suffered by newborn infants are caused by common viruses, newborns can also have much more serious bacterial illnesses. Early in the course of the illness it is difficult to differentiate between the two. Thus there are certain "worry signs" which are very important in newborns.

These are:

- Fever (rectal temperature above 100.4<sup>0</sup>)
- Significant decrease in feeding
- Significant change in activity (increased sleeping or lethargy)
- Protracted vomiting which is different from the usual spitting up

**If you child is under 3 months of age and any of these signs occur, call the physician immediately.**

### **Sleeping**

It is recommended that babies sleep on their backs on a firm mattress with no pillows. The side lying position is acceptable as long as the baby is positioned so he does not roll over on to his tummy. Try to keep the room at a comfortable temperature (about 72<sup>0</sup> F). Dress the baby in the same weight clothing that is comfortable for you.

### **Spitting UP**

Spitting up is common in most all babies and should not be thought of as abnormal. Spitting up that is more frequent or forceful probably should have some attention. The most frequent cause of spitting up is improper burping. Your baby should be burped well. Even if he burps one or two times, you should not stop at this point because he may have more stomach gas to get up. Babies also spit up because of overfeeding. You should probably not feed your child over four or five ounces at a feeding during the first month or two of life.

### **Thrush**

Thrush is vey common in babies. White patches from on the inside of the mouth. Thy look like milk, but do not wipe off. Thrush is caused by a yeast and is not dangerous. It can sometimes cause mild discomfort. An over-the-counter product called Gentian Violet is available for this condition. Just paint Gentian Violet inside the mouth thoroughly with a Q-tip. One application is usually all that is required. IF not effective, call the clinic during regular hours for a prescription.

### **Vaginal Bleeding**

Because of mother's hormones, occasionally infant girls may have slight bleeding form the vagina in the first few days of life. Once again this wills top spontaneously and does not require treatment.

