

eClinicalWorks

Well-Baby Checkup: Newborn

Your baby's first checkup will likely happen within a week of birth. At this newborn visit, the healthcare provider will examine your baby and ask questions about the first few days at home. This sheet describes some of what you can expect.

Jaundice

All babies develop some yellowing of the skin and the white part of the eyes (jaundice) in the first week of life. Your healthcare provider will advise you if you need to have your baby's bilirubin level checked. Your provider will advise you if your baby needs a follow-up check or needs treatment with phototherapy.

Development and milestones

The healthcare provider will ask questions about your newborn. He or she will watch your baby to get an idea of his or her development. By this visit, your newborn is likely doing some of the following:

- Blinking at a bright light
- Trying to lift his or her head
- Wiggling and squirming. Each arm and leg should move about the same amount. If the baby favors one side, tell the healthcare provider.
- Becoming startled when hearing a loud noise



Feeding tips

It's normal for a newborn to lose up to 10% of his or her birth weight during the first week. This is usually gained back by about 2 weeks of age. If you are concerned about your newborn's weight, tell the healthcare provider. To help your baby eat well, follow these tips:

- Breastmilk is recommended for your baby's first 6 months.
- Your baby should not have water unless his or her healthcare provider recommends it.
- During the day, feed at least every **2 to 3** hours. You may need to wake your baby for daytime feedings.
- At night, feed every **3 to 4** hours. At first, wake your baby for feedings if needed. Once your newborn is back to his or her birth weight, you may choose to let your baby sleep until he or she is hungry. Discuss this with your baby's healthcare provider.
- Ask the healthcare provider if your baby should take vitamin D.

If you breastfeed

- Once your milk comes in, your breasts should feel full before a feeding and soft and deflated afterward. This likely means that your baby is getting enough to eat.
- Breastfeeding sessions usually take **15 to 20** minutes. If you feed the baby breastmilk from a bottle, give **1 to 3** ounces at each feeding.
- Breastfed babies may want to eat more often than every **2 to 3** hours. It's OK to feed your baby more often if he or she seems hungry. Talk with the healthcare provider if you are concerned about your baby's breastfeeding habits or weight gain.
- It can take some time to get the hang of breastfeeding. It may be uncomfortable at first. If you have questions or need help, a lactation consultant can give you tips.

If you use formula

- Use a formula made just for infants. If you need help choosing, ask the healthcare provider for a recommendation. Regular cow's milk is not an appropriate food for a newborn baby.
- Feed around **1 to 3** ounces of formula at each feeding.

Hygiene tips

- Some newborns poop (stool) after every feeding. Others stool less often. Both are normal. Change the diaper whenever it's wet or dirty.
- It's normal for a newborn's stool to be yellow, watery, and look like it contains little seeds. The color may range from mustard yellow to pale yellow to green. If it's another color, tell the healthcare provider.
- A boy should have a strong stream when he urinates. If your son doesn't, tell the healthcare provider.
- Give your baby sponge baths until the umbilical cord falls off. If you have questions about caring for the umbilical cord, ask your baby's healthcare provider.
- Follow your healthcare provider's recommendations about how to care for the umbilical cord. This care might include:
 - Keeping the area clean and dry
 - Folding down the top of the diaper to expose the umbilical cord to the air
 - Cleaning the umbilical cord gently with a baby wipe or with a cotton swab dipped in rubbing alcohol
- Call your healthcare provider if the umbilical cord area has pus or redness.
- After the cord falls off, bathe your newborn a few times per week. You may give baths more often if the baby seems to like it. But because you are cleaning the baby during diaper changes, a daily bath often isn't needed.
- It's OK to use mild (hypoallergenic) creams or lotions on the baby's skin. Don't put lotion on the baby's hands.

Sleeping tips

Newborns usually sleep around **18 to 20** hours each day. To help your newborn sleep safely and soundly and prevent SIDS (sudden infant death syndrome):

- Place the infant on his or her back for all sleeping until the child is 1 year of age. This can decrease the risk for SIDS, aspiration, and choking. Never place the baby on his or her side or stomach for sleep or naps. If the baby is awake, allow the child time on his or her tummy as long as there is supervision. This helps the child build strong tummy and neck muscles. This will also help minimize flattening of the head that can happen when babies spend so much time on their backs.
- Offer the baby a pacifier for sleeping or naps. If the child is breastfeeding, do not give the baby a pacifier until breastfeeding has been fully established. Breastfeeding is associated with reduced risk of SIDS.
- Use a firm mattress (covered by a tight fitted sheet) to prevent gaps between the mattress and the sides of a crib, play yard, or bassinet. This can decrease the risk of entrapment, suffocation, and SIDS.
- Don't put a pillow, heavy blankets, or stuffed animals in the crib. These could suffocate the baby.
- Swaddling (wrapping the baby tightly in a blanket) may cause your baby to overheat. Don't let your child get too hot.
- Don't place infants on a couch or armchair for sleep. Sleeping on a couch or armchair puts the infant at a much higher risk of death, including SIDS.
- Don't use infant seats, car seats, and infant swings for routine sleep and daily naps. These may lead to obstruction of an infant's airway or suffocation.
- Don't share a bed (co-sleep) with your baby. It's not safe.
- The American Academy of Pediatrics (AAP) recommends that infants sleep in the same room as their parents, close to their parents' bed, but in a separate bed or crib appropriate for infants. This sleeping arrangement is recommended ideally for the baby's first year, but should at least be maintained for the first 6 months.
- Always place cribs, bassinets, and play yards in hazard-free areas—those with no dangling cords, wires, or window coverings—to help decrease strangulation.
- Don't use cardiorespiratory monitors and commercial devices—wedges, positioners, and special mattresses—to help decrease the risk for SIDS and sleep-related infant deaths. These devices have not been shown to prevent SIDS. In rare cases, they have resulted in the death of an infant.

- Discuss these and other health and safety issues with your baby's healthcare provider.

Safety tips

- To prevent burns, don't carry or drink hot liquids such as coffee near the baby. Turn the water heater down to a temperature of 120°F (49°C) or below.
- Don't smoke or allow others to smoke near the baby. If you or other family members smoke, do so outdoors and never around the baby.
- It's usually fine to take a newborn out of the house. But stay away from confined, crowded places where germs can spread. You may invite visitors to your home to see your baby, as long as they are not sick.
- When you do take the baby outside, don't stay too long in direct sunlight. Keep the baby covered, or seek out the shade.
- In the car, always put the baby in a rear-facing car seat. This should be secured in the back seat, according to the car seat's directions. Never leave your baby alone in the car.
- Do not leave your baby on a high surface, such as a table, bed, or couch. He or she could fall and get hurt.
- Older siblings will likely want to hold, play with, and get to know the baby. This is fine as long as an adult supervises.
- Call the healthcare provider right away if your baby has a fever (see Fever and children, below)

Fever and children

Use a digital thermometer to check your child's temperature. Don't use a mercury thermometer. There are different kinds and uses of digital thermometers. They include:

- **Rectal.** For children younger than 3 years, a rectal temperature is the most accurate.
- **Forehead (temporal).** This works for children age 3 months and older. If a child under 3 months old has signs of illness, this can be used for a first pass. The provider may want to confirm with a rectal temperature.

- **Ear (tympanic).** Ear temperatures are accurate after 6 months of age, but not before.
- **Armpit (axillary).** This is the least reliable but may be used for a first pass to check a child of any age with signs of illness. The provider may want to confirm with a rectal temperature.
- **Mouth (oral).** Don't use a thermometer in your child's mouth until he or she is at least 4 years old.

Use the rectal thermometer with care. Follow the product maker's directions for correct use. Insert it gently. Label it and make sure it's not used in the mouth. It may pass on germs from the stool. If you don't feel OK using a rectal thermometer, ask the healthcare provider what type to use instead. When you talk with any healthcare provider about your child's fever, tell him or her which type you used.

Below are guidelines to know if your young child has a fever. Your child's healthcare provider may give you different numbers for your child. Follow your provider's specific instructions.

Fever readings for a baby under 3 months old:

- First, ask your child's healthcare provider how you should take the temperature.
- Rectal or forehead: 100.4°F (38°C) or higher
- Armpit: 99°F (37.2°C) or higher

Fever readings for a child age 3 months to 36 months (3 years):

- Rectal, forehead, or ear: 102°F (38.9°C) or higher
- Armpit: 101°F (38.3°C) or higher

Call the healthcare provider in these cases:

- Repeated temperature of 104°F (40°C) or higher in a child of any age
- Fever of 100.4° (38°C) or higher in baby younger than 3 months
- Fever that lasts more than 24 hours in a child under age 2
- Fever that lasts for 3 days in a child age 2 or older

Vaccines

Based on recommendations from the AAP, at this visit your baby may get the hepatitis B vaccine if he or she did not already get it in the hospital.

Parental fatigue: A tiring problem

Taking care of a newborn can be physically and emotionally draining. Right now it may seem like you have time for nothing else. But taking good care of yourself will help you care for your baby too. Here are some tips:

- Take a break. When your baby is sleeping, take a little time for yourself. Lie down for a nap or put up your feet and rest. Know when to say "no" to visitors. Until you feel rested, ignore household clutter and put off nonessential tasks. Give yourself time to settle into your new role as a parent.
- Eat healthy. Good nutrition gives you energy. And if you have just given birth, healthy eating helps your body recover. Try to eat a variety of fruits, vegetables, grains, and sources of protein. Stay away from processed "junk" foods. And limit caffeine, especially if you're breastfeeding. Stay hydrated by drinking plenty of water.
- Accept help. Caring for a new baby can be overwhelming. Don't be afraid to ask others for help. Allow family and friends to help with the housework, meals, and laundry, so you and your partner have time to bond with your new baby. If you need more help, talk to the healthcare provider about other options.

Next checkup at: _____

PARENT NOTES: