

Baby Babble

Feeding Your Baby

According to the American Academy of Pediatrics, breast milk is the best food for babies during the first year. We strongly support breast-feeding because breast milk contains the proper nutrients for optimal growth. Some evidence suggests that it may protect a child against certain illnesses and allergies. Breast milk has such a high degree of digestibility that breast-fed babies tend to be less gassy, less constipated, and less colicky. Mothers taking medication should check with the prescribing doctor prior to breast-feeding since all medications have the potential of passing into breast milk to some extent. The hospital's lactation consultant can be very helpful in this area. Make sure you eat a balanced diet and take your prenatal vitamins. Nurse your baby for 10 to 15 minutes on each breast. Breast-fed babies are usually fed every two to three hours, which often takes place round-the-clock. If nursing is going well, the infant will appear satisfied after a feeding and frequently fall asleep. Also, expect to change six to as many as twelve wet diapers daily, as well as several "poopy" diapers.

If you are unable or opt not to breast-feed, don't despair! Being a good mom involves more than simply breast-feeding your child. Today's formulas are excellent; your baby will do fine! Generally, we recommend a milk-based formula, such as Enfamil, Similac, or Good Start, unless the baby demonstrates intolerance usually indicated by exaggerated vomiting. Often, there is a strong family history of lactose intolerance. In such cases, a lactose-free formula or soy-based formula may be used. Bottle-fed babies are fed every three to four hours. Some babies will take more, some less. Parents commonly ask, "How much formula should my baby be taking?" A maximum volume can be hard to predict. Some infants, especially large babies, consume considerable amounts of formula. **However, minimum feedings can be estimated on the basis of two to three ounces per pound per day.** For both breast and bottle, feed the baby on demand.

Please do not give cow's milk or baby cereals yet. Burp your infant after each breast or after every ounce initially, and for no more than three to five minutes. Then continue feeding. Spitting up with burping is normal for all babies.

Newborn Screenings

New Jersey's Department of Health requires that all newborns undergo a blood test that screens for certain metabolic problems, thyroid gland disorders, as well as certain abnormalities related to red blood cell function. In the case of inherited metabolic diseases, specific enzymes are not present that aid processing of nutrients or do not function properly. As a result, a baby's physical and/or mental development can be severely altered. The screening test for these conditions is state mandated and performed while your baby is still in the hospital, thereby allowing for very early treatment when needed. A hearing screening test will also be conducted prior to discharge that is required by the State of New Jersey to identify those newborns with possible hearing inadequacies. It is important to understand that this test is only a screening tool. The latest New Jersey Department of Health mandate

screens all newborns for potential congenital cardiac defects by using the pulse oximetry test to measure oxygenation.

Solid Foods

Introducing solid foods too early is detrimental to babies due to their immature digestive systems. Be aware that formula or breast milk plus cereal have never been proven to improve an infant's sleeping pattern and may contribute to making the baby gassy. An appropriate diet is discussed at each well-child checkup.

Vitamins

Vitamins guarantee that your child receives all the essential nutrients needed for proper growth. We will provide you with instructions for the administration of vitamins.

Baths and Umbilical Cords

The umbilical cord can fall off in one week or as long as three to four weeks. Keep the base of the cord clean, especially as it starts to detach. Avoid using alcohol regularly, although a Q-tip dipped in alcohol may be used to clean the base if covered in fecal material. The area around the cord should not look red or swollen. Avoid placing the baby in a bath until the umbilical cord has dried out and fallen off. After that, one bath per day is more than enough. Use only warm/lukewarm water and a small amount of mild soap. Avoid the eyes, and do not attempt to clean inside the baby's ear canals with Q-tips. A newborn baby's ear canal is very small and Q-tips are relatively large. They will tightly pack in the earwax, obstructing the vision of the examiner, and ultimately make it more difficult to remove the wax.

Sleeping

Frequent nighttime feedings and an irregular sleeping pattern are two of the most difficult issues for new parents. Newborns have no sense of night or day. They typically sleep between 11 and 23 hours, with the average sleeping time of approximately 16 ½ hours out of the 24-hour period, which also includes naps during the day. Sleeping through the night is defined as "sleeping for five hours" from midnight to 5 AM for four weeks, although most parents would probably disagree with this definition. Generally, by three to four months of age and sometimes sooner, babies will start to sleep through the night. The recommended sleeping position should be on the baby's back, on a firm surface, and without toys or bedclothes. This is believed to help prevent Sudden Infant Death Syndrome (SIDS). However, when you are both awake and playing, put the baby on his or her stomach for "tummy time" to strengthen the baby's muscles and help keep the head from getting too flat.

Keeping Baby Warm

Babies have a relatively large surface area and can get chilly easily. A good rule of thumb is to dress the infant with one layer of clothing more than you are comfortably wearing. Because a baby's head is approximately one quarter the size of the body, it represents a major source of heat loss. Therefore, hats help prevent heat loss and also should be used indoors if the ambient temperature is cool. Never place the baby in a location that exposes the child to an air current produced by an air conditioner.

Bladder and Bowel Movements

Well-fed babies usually wet their diapers about every three to four hours. A dry diaper for more than eight to ten hours may mean that the infant is not feeding enough. Newborns “poop” several times a day or once every several days. The blackish, tarry looking stool called “meconium” is often gone by the time the baby leaves the hospital. Generally, babies have frequent bowel movements in the first week of life. Their overactive gastro-colic reflex usually produces a stool after every feeding. The stooling pattern typically slows down after one to two weeks. It is not uncommon for a one- to two-month-old baby to have a bowel movement only once every two to three days. Stools are often very loose or pasty and may vary from day to day. The color will differ depending on the type of milk. Breast-fed babies produce a watered down, yellow or mustard-colored stool. Formula-fed babies have a loose, seedy, and mushy stool that is somewhat yellow, brown, or green in color. A consistently formed stool can be a sign of constipation.

Crying

Crying is a form of communication for babies, and you will learn to distinguish their different cries. Generally, infants cry when they want to be fed. Sometimes, they want to be changed or held. At other times, babies simply want to cry and let off steam. If you've checked the infant and can identify no source of possible irritation, let the child cry for 20 minutes. She will usually fall asleep long before then. If you wish to discuss crying with our one of our staff members, please call the office.

Colic is a prolonged period of inconsolable crying **unassociated** with other findings. It generally occurs about the same time each day, beginning around two to four weeks of life. Colic may last two to four months or even longer, unfortunately. The cause is unknown, but the good news is that it always goes away! Strategies to alleviate colic include a warm bath, white noise such as a vacuum cleaner or music, a crib vibrator, a snug swaddle, pacifier, or even a ride in the car. These distractions will often improve the baby's mood. **Never** shake a crying and cranky baby! Severe shaking can result in brain damage. Always support the head while holding your infant.

Teething

Many babies start to teethe at approximately four to six months. Although most infants aren't particularly bothered by teething, some can become very irritable and have difficulty eating and sleeping. Steps to ease the discomfort will be discussed in the office during routine checkups.

Diaper Rashes

Some babies get diaper rashes more often than others, depending on their skin sensitivity. In general, disposable diapers are more apt to cause rashes, often induced by the absorbent chemicals that they contain. If using cloth diapers, rashes may be provoked by the excessive wetness in continuous contact with the infant's skin. Commercial baby wipes frequently create a diaper rash as well. Expect to change approximately 8 to 12 diapers a day initially. Check with the office before using any ointments to treat diaper rash.

Fever

Babies normally run higher temperatures than older children or adults. The safest way to check a temperature in a newborn is under the arm (axillary temperature). Ear thermometers (tympanic thermometers) have improved dramatically over the last several years and quickly take a temperature. They tend to read higher from the ear that the child is lying on, so they become less accurate as the child's age decreases. Rectal thermometers are very accurate and fast measurements are taken by the rectal digital thermometer. Be extremely careful when using rectal thermometers to avoid inserting the tip too far into the rectum and take precautions to keep the infant from kicking the thermometer, which could possibly perforate the bowel. Typically, an axillary reading tends to be half to three-quarters of a degree **less than** one taken rectally. However, in most cases, the specific temperature measured is **not** the most important consideration. Thermometers that are placed on the forehead or incorporated within the nipple of a pacifier should not be used. For an infant, temperature greater than 100.4 degrees Fahrenheit is considered a fever and indicates an illness. Please notify our office as soon as possible if your child is less than two months of age and has a temperature of 100.4 degrees Fahrenheit or higher. Common sense suggests that visitors to your home should wash their hands before holding the baby. Anyone with a cold should be told to return at another time when they are feeling better.

Vomiting

Frequent spitting up and occasional vomiting commonly occurs. Recurrent, forceful vomiting or vomiting that produces bloody or greenish-yellowish material is not normal and should be reported to the office.

Colds

Babies breathe through their noses, therefore, any condition that affects the ability to breathe through the nose will impact sleeping and feeding. An occasional cough is normal, as well as sneezing which helps clear the newborn's nose. During the first two to three months of life, breathing can be very "snorty." This results from secretions pooled in the back of the throat, which are coughed or sneezed into the nasal passages. Although a bulb syringe used with saline drops may help remove excess mucus, overuse will cause nasal irritation, which may actually increase mucus production.

Circumcisions

Circumcision is one of the oldest operations known to man. A gauze pad covered with a lubricant, such as K-Y Jelly or Vaseline Petroleum Jelly, is usually draped over the penis for about five days to help shield it from the stool and prevent the tip of the penis from sticking to the diaper while healing. Infected circumcisions are very uncommon. The foreskin in an uncircumcised newborn should never be pulled back.

Baby Girls

Newborn girls may normally produce a whitish discharge. In some cases, if the baby has been exposed to enough maternal hormones prior to delivery, a "menstrual period" may ensue, resulting in a pink or mildly bloody "mini-period." Although perfectly normal, this may last for two to four days.

Eyes

Some babies may appear to be intermittently cross-eyed at birth. This condition should resolve by two to three months of age. Following delivery, an erythromycin ointment is applied to both eyes to prevent infection. The puffy eyelids noted soon after birth often result from local irritation caused by this medication. Babies also tend to develop obstructed tear ducts, which generally occur in one eye more than the other, but may occur in both eyes. This tends to produce excessive tearing often accompanied by a yellowish-greenish discharge. Warm water soaks with tear duct massage generally resolve the issue. Special eye drops may be required if the discharge persists. In addition, most babies become yellow (jaundiced) in color after birth. While sometimes difficult to recognize in the skin's appearance, it is easy to detect when looking at the whites of the eyes. If you notice the eyes are becoming excessively yellow, please contact our office.

Car Seats

Always place a baby in a correctly installed car seat that faces backward in the rear seat. Proper installation is explained in your seat's instruction manual. Do not face the seat forward until the child is at least one-year-old and weighs a minimum of 20 pounds. Never hold the baby in your arms or on your lap while riding in the car.

Car seat standards also mandate the use of a booster seat until a child is age eight or weighs 80 pounds. In addition, children should ride in the back seat until they reach 11 years of age.

Smoking, Ingestions, and Poisonings

Smoking around the infant increases the risk of SIDS, respiratory infections, allergies, and asthma. Never smoke in the car if accompanied by your baby.

If you think that your child may have swallowed a toxic substance, immediately contact the **New Jersey Poison Control Center at 1-800-222-1222**. This valuable resource center is equipped to offer immediate assistance. **Syrup of ipecac should NOT be administered to the child routinely** following a poisoning. Always check with the New Jersey Poison Control Center first! Significant poisonings are reported to our office by this state agency.