## **HOWARD NASS MD FAAP**

DIPLOMATE AMERICAN BOARD OF PEDIATRICS

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## NEWBORN CARE INSTRUCTIONS FOR

Birth Weight	Birth Length_

## NO ASSEMBLY REQUIRED

Congratulations on your newborn baby!

I have assembled some suggestions for caring for your newborn. You will get much well-meaning advice from friends and relatives, however, with the special relationship you are establishing with your baby, to trust your natural feelings is the most important advice that I can give you. When you first come home will be the special time for you to become acquainted with your newborn and for you to rest. Do not hesitate to delay visits of friends and relatives until visits are convenient for you.

**Feeding:** Feed your baby when he/she is hungry. Formula fed babies will feed every 3-4 hours at first and later at 4-5 hours. Breast fed babies feed

initially every 1 1/2 -2 ½ hours. Since babies express themselves the same way whether they are wet, tired, hungry, or bored, if they seem to act unhappy sooner than this period after the they eat, it is because they need caring other than feeding. Find a nice relaxed, comfortable place in your home to feed your baby, where you can hold your baby in your arms, and have it in close contact with you. Make sure that feeding time is a relaxed time, when you're not entertaining friends or relatives and trying to do two or more things at once. Sterile water may be given to the baby between feedings, but this is not necessary. Breast milk or formula should be given for the first 4-6 months alone and should be continued for the first year.

When feeding, your baby should be allowed to take as much as he or she wants and not to be pushed to finish the bottle or to be nursed for a prescribed amount of time. For the first four months or so always hold your baby when you feed him/her and whenever possible thereafter. Never prop the bottle. An infant too young to hold his/her bottle may choke if the bottle is propped. A baby going to sleep with a propped bottle is at risk for dental caries. Besides, propping the bottle eliminates the social interaction of feeding.

The decision to breastfeed or formula feed is a personal one. Do not allow others to make this decision for you. Breastfeeding does offer some advantages including immunity transmitted to the infant, a smaller risk of allergic (atopic) conditions as breast milk contains human protein as opposed to protein from a foreign source. Breast Milk contains substances which modify the immune response helping to prevent certain diseases of

the immune system, as well as substances which will help promote proper function of the brain and eyes. Breast feeding also promotes intimate emotional contact between infant and mother. Should you choose to breast-feed your infant, do your best to continue to nurse for at least 3 months.

Although nursing for any length of time is good for your baby, some of the immune benefits were only proven in studies in infants who nursed for a minimum of 3 months. Nursing as soon as possible after delivery, even in the delivery room itself, the frequency of nursing in the first few days of life, and having the baby room in with you rather than staying in the nursery (when you are feeling up to the task) are all factors that influence positively success at breast feeding. Most hospitals have lactation consultants to assist you as well.

Many people choose to formula feed for any number of reasons. Should you choose this option, you should be rest assured that today's infant formulas provide good nutrition for most babies. In fact most current infant formulas now contain DHA to promote brain and eye function.

<u>Vitamin Supplementation:</u> Effective October 2008 new recommendations include the provision of Vitamin D supplementation to all infants who are partially or fully breastfed within the first few days of life. This is partially due to lifestyle changes resulting in many mothers being Vitamin D deficient.

All new mothers who are breastfeeding should additionally continue to take their prenatal vitamins until their infant is 3 months old. Please check with our office regarding the possible need for Vitamin D supplementation for any other children that you may have.

**Bathing:** Your baby should receive sponge baths until the umbilical cord\_has fallen off and the naval area is dry. After the cord falls off an infant tub may be used. Use soap without perfumes in it such as ivory or unscented dove. Your baby should be bathed every few days. A daily bath is unnecessary, since young babies generally do not have many opportunities for getting dirty.

**Eye Care:** If the eyes have mild secretions, they may be washed with lukewarm water two or three times a day starting from the middle and wiping outward.

<u>Umbilical Cord Care:</u> Keep the umbilical cord clean and dry. A small amount of wet discharge may be present at its base. This is totally normal and represents a very low grade infection which is required for cord separation. Never pull the cord off or attempt to loosen it even if it appears to be hanging by a thread. It has been discovered recently that cleaning the umbilicus several times daily does not decrease the incidence of infection and is not necessary. It is not unusual to see a small quantity of blood on the diaper after the umbilicus has fallen off. Call our office if you notice any swelling or smelly discharge of the cord, or if you notice any red streaks next to the cord.

**Back to sleep:** One of the best ways to lower the risk of SIDS (crib death) is to put your baby to sleep on his or her back. Studies have shown that there is no increased risk of choking while in the back position, and sleeping on his or her side is no longer recommended. Babies should be placed on their stomachs "tummy time" when they are awake, however newborn infants spend most the day sleeping. The use of pillows and comforters as well should be delayed until after the first birthday. Please make sure that no one smokes anywhere around your baby as second hand smoke also is a significant risk factor for SIDS.

**Skin Care:** The most common reason for diaper rash is contact with wetness from bowel movements and urination. The best way to prevent diaper rash is to keep the diaper area as dry as possible. Diaper rash cream after a bowel movement such as Balmex, Desitin daily care, or Vitamin A & D ointment may be used to afford a layer of protection for the baby's skin.

<u>Bowel Movements:</u> Babies are very variable in their bowel movement patterns. Babies will have from seven or more bowel movements a day to one bowel movement every three days. Frequently babies will turn red and become fussy, and strain and act quite miserably for up to an hour before each bowel movement. This should not be of any concern to you; please let me know, but do not change type of formula, or administer medicine or suppository without my approval.

**Baby's Nature:** You will find that after you arrive home that your baby has his/her own personality. Along with its own personality, your baby has its own wake/sleep cycles. Some babies will sleep up to twenty hours a day, while others will be awake twelve to sixteen hours a day. Also when babies first come home they will have two or three periods when they are awake for a few hours at a time. Frequently this occurs in the middle of the night. During the first several months of life, babies waking in the middle of the night need to be attended, changed, and fed. Little by little their wake cycles during the night will disappear as they sense your willingness to be with them at night is not as great as during the daytime. Babies frequently have fussy periods even after they are fed and changed and have a bowel movement; they may continue to fuss- not infrequently this occurs in the evening. Do not let this upset you. It is also a good time for parents to take turns holding the baby. All babies may have frequent hiccupping and sneezing; although sometimes it seems to upset them, this is normal. In the first couple of months of life, babies breathe only through their nose. The breathing may sound somewhat noisy at times due to nasal secretions. A humidifier as well as saline drops and nasal aspirator may at times be useful.

**Going Outside:** If at all possible, try to keep your baby at home for the first two months of life. Please limit visitors to healthy close friends and relatives. Anyone who handles the baby should of course wash their hands first. This is due to your baby's immature immune system as well as for concerns of temperature regulation. Dress your baby the same way as you yourself would feel comfortable; do not overdress your baby. A baby may however

require a hat if it is slightly cool due to increased surface area percentage in a newborn's head, and resulting heat loss.

**Enjoying Your Baby:** One important reason for having children is to enjoy them. Over the coming weeks you will develop a sense of confidence in your relationship with your child. You will develop a feeling for his/her desires and needs as well as for your own. Babies begin their relationships with their parents before they are born, but certainly begin firm bonding and attachment soon after birth.

<u>Taking Baby Home:</u> Please buy a car seat and use it. Many hospitals check to be sure that you have a car seat and will demonstrate its use prior to discharge. At this age babies are extremely fragile, and require the protection that a car seat affords. Having a car seat also frees you to relax in the car while driving.

Office Visit: Baby's office visit should be within a few days after discharge if you are nursing, especially if this is your first baby. If you are using formula, baby's first visit may be at one to two weeks of age.

## **NOTES and QUESTIONS**

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