

TUSCALOOSA PEDIATRICS

657 Helen Keller Blvd. • Tuscaloosa, Alabama 35404 • (205) 333-8222

2 Week Old Checkup with Dr. _____

NAME: _____ DATE: _____ WT: ___LB___OZ LENGTH: ___IN HEAD: ___IN

NUTRITION: We recommend only breast milk or formula feeding until your baby is 4 months old. Most babies this age eat every 2 – 3 hours and take between 16 – 24 oz a day. Water and juices are not safe at this age as they can lower the salt in the body which can lead to seizures. If you are breastfeeding we recommend giving the over-the-counter vitamin, D-Vi-Sol, 1 mL daily to provide Vitamin D for healthy bones (formulas have this added already). A daily probiotic like Gerber Soothe drops can help some infants who are having problems with colic, reflux, and/or gas pain.

DEVELOPMENT: Here's what to expect from 2 weeks to 2 months:

- Movements gradually become smoother and more controlled.
- Lifts chin for a few seconds when lying on tummy.
- Cannot support head without assistance.
- Grasps whatever is placed in hand.
- May follow some moving objects with eyes.
- Explores surroundings with eyes.
- Turns in direction of some sound.
- Gives more precise meaning to crying (hunger, discomfort, excitement).
- Makes variety of gurgling and cooing sounds when happy and content.
- Makes eye contact.
- May quiet down in response to human face.

Every child is slightly different in their development. These are general milestones to be used as a guide for what you are to expect. Please discuss any concerns you may have with your doctor. "Tummy Time" while your baby is awake and supervised is important for his/her development.

SAFETY: Babies are able to wiggle and move soon after they are born. Always protect your baby from falls. Never leave him/her on changing table, bed, couch or other area where he/she may fall.

Always keep your baby slightly elevated (head above rest of body) when feeding, never feed a bottle lying flat.

Your baby should ride in an approved car seat at all times. The back seat facing the rear of the car is the safest place for infants. Never allow babies or small children to ride in the front seat or in front of an air bag. Always practice safe driving behaviors to protect yourself and your child.

Your baby's crib or bassinet should have a firm mattress. Always remove stuffed animals, fluffy comforters, etc. from your baby's sleep environment. Never use pillows in your baby's crib. Bumper pads are also not recommended due to risk of suffocation.

The American Academy of Pediatrics recommends always placing your baby on his back to sleep. This has been shown to be the safest position to decrease the risk of Sudden Infant Death Syndrome and suffocation. Side sleeping is NOT as safe as the back. If your baby has reflux you can elevate the head of the bed to avoid choking by placing a thick book under his/her mattress. We do not recommend allowing your baby to sleep in your bed as this greatly increases the risk of SIDS and suffocation.

It is important that parents are trained in infant and child CPR and choking. Please ask if you would like to be directed to training classes.

Keep your home and car smoke-free and ask all friends and relatives not to smoke around your baby. Smoke exposure increases the risk of developing asthma, ear infections, and SIDS.

We recommend that all family members and caregivers make sure they have had the whooping cough vaccine

(Tdap) to protect your baby from exposure. If your baby is less than 6 months old during flu season, we recommend that all family and caretakers receive the flu vaccine to protect your baby from exposure.

Avoid taking your baby to crowded places (such as the grocery store or Wal-Mart) or letting multiple people handle him/her during the first two months of life. This can greatly increase the risk of your baby becoming sick. Always practice good handwashing, especially before feedings and after diaper changes. Encourage others to wash their hands before holding your baby.

FEVER: Normal rectal temperature is 99.4 F. We consider fever in infants to be 100.4 F or greater rectally. We do not recommend axillary or ear temperatures because these are often inaccurate. We do not recommend routinely checking the temperature, but rather checking it when the child is acting ill (fussy, lethargic, not feeding well, or feels hot). **If your infant is less than 2 months old and has fever equal to or more than 100.4 F rectally, he/she should be seen by a doctor immediately.** It is very likely that your baby will be admitted to the hospital if he/she develops fever while less than 2 months old. Do not give Tylenol until the child is seen by the doctor. Motrin is not recommended until over 6 months of age.

COLIC: A colicky baby is an otherwise healthy but fussy baby. There are many factors that people feel contribute to this problem. Since some feel abdominal discomfort may contribute, you may try over the counter Mylicon (simethicone drops) 1/2 dropper every 4-6 hours for gas. A daily probiotic like Gerber Soothe drops is also recommended. If this does not help, we occasionally may switch the baby's formula. Please discuss formula changes with our office before making multiple random formula changes on your own. Colic tends to occur from 2 weeks to 2 months of age and then spontaneously resolves.

COLDS AND CONGESTION: If your infant should get a stuffy nose or sound congested, the first thing we recommend is to use the bulb syringe and over the counter saline nose drops. This will clear the air passage and make it easier for the infant to breathe. We do not recommend oral decongestants in young children because of adverse side effects. Sometimes congestion can be related to normal infant reflux so if your baby is happy, eating well, and sleeping well then reflux could be the cause of their congestion. This typically does not require treatment but talk to your doctor if you have concerns.

NEWBORN SCREENINGS: The blood obtained from your baby's heelstick both today and previously while he/she was in the hospital after birth is sent to a state lab to evaluate for multiple genetic diseases including cystic fibrosis, sickle cell disease, and many other rare diseases. Occasionally a good sample is not obtained and you may get called back to repeat the test. This does not mean your baby has an illness. If any results are positive, we will discuss the results with you at length as well as repeat the test.

TAKE CARE OF YOURSELF: The most important thing you can do for your baby is to take care of yourself. Sleep when your baby sleeps. Get help from family and friends whenever you need a break. Post-partum depression is a real illness and if you feel you may be experiencing symptoms of depression please let your doctor or one of us know. If you are taking any medications while breastfeeding please let us know so we can check if they are safe for your baby.

SUGGESTED READING:

- Caring for your Baby and Young Child (Birth to Age 5), American Academy of Pediatrics, Steven Shelov et.al.
- What to expect the 1st Year, Arlene Eisenberg et.al.
- Your Child's Health, Barton Schmitt, MD.
- American Academy of Pediatrics website – www.AAP.org
- Baby 411, Denise Fields and Ari Brown, MD (available for sale at our front desk, Amazon.com, or Barnes&Noble.com)
- Healthychildren.org website

THE NEXT VISIT: Your baby's next check up should be when he/she is 2 months old. At that time we will discuss nutrition, growth and development, safety, perform a physical examination, and provide immunizations.

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