

Baby 101

Eugene Pediatric Associates



Welcome to Parenthood!

- Newborns are a LOT of work! You've made it through an exhausting first month with your baby and things will be easier soon!
- Your pediatricians, behavioral health experts and social workers at Eugene Pediatrics are here to help – 24 hours a day, 7 days a week. Just call us at **541-HUG-KIDS**.
- Today's class is designed to address common concerns about 1-month-old babies – **please ask questions!**



Soothing Your Baby

- Bonding helps drive your baby's emotional and physical development. It's also part of what drives you to get up in the middle of the night, to learn to understand your baby's cries, and to provide your baby with endless love, protection and care.
- You cannot spoil a 1-month-old baby! Hold your baby as much as you can. Your warmth and familiar smell are natural comforts to your infant.
- Gently massage your baby. Touch calms babies and speaks to your infant without words.
- Talk, sing, or read aloud to your infant. Your baby was born loving the sound of your voice.



Why Is My Baby Crying?

- Crying is the only way that your baby can communicate with you right now. When you respond to it, you teach your little one to trust you. Don't let a 1-month-old "cry it out."
- It's normal for babies to cry for 2 to 3 hours each day. Some babies cry more, others cry less. Your baby might cry because they are hungry, tired, or need a diaper change — or for what seems like no reason at all.



Why Is My Baby Crying?

YOUR BABY MIGHT BE

TRY THIS

Hungry

Feed your baby, even if they just ate.

Gassy

- Make sure your baby isn't swallowing too much air while feeding.
- After each feeding, it's time to burp. Hold your baby against your shoulder, upright in your lap, or face down across your lap, and gently pat or rub your little one's back.

Due for a diaper change

Change your baby's diaper, even if it's just a little wet. Some babies can't stand having a wet diaper.

Cold

Place your baby skin-to-skin for the quickest warm-up. Or swaddle your little one snugly in a soft blanket.

Too warm

If your baby's skin feels warm, take off some layers of clothes. Still hot after 10 minutes? Check your baby's temperature — your little one may have a fever.

Tired

Wrap your baby in a blanket. Try rocking them to sleep.

Lonely

Try picking up and cuddling your baby near your heart.

Tense

- Rock or walk around while you hold your baby.
- Take your baby for a ride in the car or stroller.
- Put your baby near sounds, like running water, soft music, or white noise.
- Sing to your little one.



Breastfeeding Your Baby

- Breastfeeding: Breast milk is all the food your baby needs for at least the first 6 months. We encourage all new parents to breastfeed if possible. Even some breastfeeding is better than none!
- If you can, [breastfeed your baby](#) whenever they appear hungry. For the first few weeks, that means every 1 to 3 hours — day and night. Each feeding may last from 15 to 60 minutes, depending on whether your baby is awake and hungry or sleepy.
- Your newborn should feed 8 to 12 times every 24 hours until they are back to birth weight (usually by 2 weeks old). After that, you can start to compress feedings into daytime.
- Don't introduce a bottle of breast milk until nursing is well-established. That is usually by 4 weeks old.
- Refer to our website for details on safe storage of breast milk.



Benefits of Breastfeeding

- Benefits for your baby:
 - Breast milk gives your baby all the nourishment they need for the first 6 months of life.
 - Breast milk is easier to digest than formula.
 - Breast milk lowers your baby's risk for many types of illnesses, such as ear infections, diarrhea, asthma and diabetes, to name a few.
 - Breast milk reduces the risk of obesity later in infancy and during childhood.
 - Breast milk reduces the risk of sudden infant death syndrome (SIDS).
- Benefits for you:
 - Breastfeeding supports and strengthens your bond with your baby.
 - It helps your body recover from the rigors of pregnancy and childbirth.
 - It lowers your risk of developing certain health problems, such as breast cancer, ovarian cancer, rheumatoid arthritis and diabetes.
 - Breastfeeding may make it easier to lose pregnancy weight.
 - Breastmilk is easier to prepare than a bottle.



Formula Feeding Your Baby

- Infant formula can also give your baby the nutrition they need to grow up healthy and strong. If you plan to feed your baby both formula and breast milk, we recommend waiting 4 to 6 weeks, if possible, before introducing formula to build your body's capacity for milk production.
- Babies digest formula more slowly than breast milk. If you're not breastfeeding at all, your baby might need fewer feedings than a baby who nurses.
- Feed your baby 2 to 3 ounces at each feeding. It won't take long for you to be able to sense whether your baby is still hungry or full. *(Follow your pediatrician's instructions if your baby has a special feeding plan.)*
- Warm formula by setting the bottle in a bowl of warm water. Do not heat up formula in a microwave — it can easily burn your baby's mouth and throat.



When to Worry about Feedings for Your 1-Month-Old Baby

- Baby vomits every feed or projectile vomits often.
- Eats more than 6 oz per feeding.
- Eats less than 2 oz per feeding.
- Too tired to eat after 5-10 minutes.
- Cries throughout a feeding.
- Shows poor weight gain at your pediatrician's office.



Sleep on Back, Play on Tummy

- Sleeping on the back is important for your baby's safety and reduces the risk of sudden infant death syndrome (SIDS).
- Babies should sleep on a firm, flat surface designed for babies (like a bassinet or a crib).
- Tummy time strengthens your baby's neck and core but must be done while baby is awake and under adult supervision.
 - 1-month-old babies should spend 3-5 minutes a few times a day on their tummies.
 - Chest-to-chest positioning often comforts a baby during tummy time.

Sleep Safety

- Always put your baby down to sleep on her back.
- Use only a firm, flat surface designed for infant sleep (bassinet or crib).
- Use only cribs/bassinets that meet current [Consumer Product Safety Commission](#) standards.
- Don't place anything in the crib with the baby (no bumpers, blankets, toys).
- Avoid inclined sleepers/positioners – the baby's chin may fall to her chest and cut off her airway, or she may roll out of the sleeper.
- Never leave a baby sleeping in a car seat for long periods.
- Don't use a second-hand or garage sale crib/bassinet – it may not adhere to current CPSC standards.

Umbilical Cord Care

It's normal for the umbilical cord stump to change from yellow to brown or black. Once it darkens, it should fall off on its own, usually by 2 weeks of life. Avoid pulling or tugging at the umbilical cord to remove it.

- Watch for the following signs of infection around the umbilical cord stump. Call immediately if you notice:
 - Redness and swelling at the base of the cord where it meets the abdomen.
 - Bleeding, with more than a few drops of blood.
 - Yellowish or pus-filled drainage.
 - Foul odor.
- If your baby's umbilical cord stump does not fall off within 4 weeks, let us know.

Nail Care and Baths

- Trim your baby's nails as needed to prevent him from scratching himself.
- Use an emery board, clippers or small scissors (but be careful not to cut the skin).
- Baths can be daily as part of the bedtime routine, but you may decide to bathe only every few days as long as you always keep baby's face, hands and bottom clean.

Constipation and Spitting Up

- Babies may pass stool only once a week – as long as baby is not fussy, spitting up often, or passing hard stools, that is normal.
- It is normal for young infants to grunt and strain to pass a soft stool. If the stool is hard, babies can be given a 1/4 inch piece of glycerin suppository in their rectum and see their pediatrician.
- Consult your pediatrician if mucus or blood is seen in the baby's stool.
- Spitting up occasionally is normal, but forceful vomiting (“projectile”) is not normal and needs to be evaluated if it happens more than once.

Baby Safety

- Always support your newborn's head. Your little one is strong, but those tiny neck muscles will be weak for the first few months.
- Use a car seat that meets the National Highway Traffic Safety Administration's safety recommendations, and make sure it's installed correctly before you leave the hospital.
- Keep your environment smoke free.
- Always lay your baby down to sleep on their back.
- Never leave your child alone on a bed, sofa, or changing table — even for a few seconds.



Common Newborn Conditions

- **Colic.** Does your baby have regular episodes of crying that begin around the same time each night, last a few minutes to a few hours, and are difficult to soothe? It might be colic. Colic can be upsetting — *and exhausting* — but usually stops on its own within 3 months.
- **Cradle cap.** Your baby might develop thick, scaly patches on their head, called cradle cap. It's harmless and usually goes away on its own within a few months. Until then, try this home treatment:
 - Apply mineral oil to the scalp 1 hour before bath time.
 - Wash your baby's scalp with a gentle, mild shampoo.
 - Use a soft toothbrush to loosen the scaly patches before rinsing.
- **Eye discharge.** If the discharge is clear, carefully wipe your baby's eyes with a clean, soft washcloth and warm water. If it's yellow, it may be an eye infection, and you'll need to bring your baby in for an appointment.

Common Newborn Conditions

- **Nasal congestion.** Many babies make noise when breathing. If your little one is very congested, try saline drops:
 - Place 3 to 4 drops of saline in one nostril.
 - Suction that nostril with a soft rubber bulb syringe.
 - Repeat in the other nostril.
 - A cold-mist humidifier can also help your baby breathe easier. Don't add anything to the humidifier, and don't use rubs or patches on your newborn baby.
- **Umbilical hernia.** Look for the umbilical area pushing outward when your baby cries.
 - Most close on their own and no treatment is needed.
 - The hernia should be soft when your baby is relaxed. If your baby is inconsolable or the hernia stays hard, then see your doctor right away.

Conditions That Need Your Pediatrician's Attention

- **Prolonged jaundice.** This common newborn condition causes the skin and the whites of the eyes to appear yellow. By one month, your baby should no longer be visibly yellow. Call your care team if you think your baby has jaundice.
- **Eye infection.** Call your care team if you notice signs of an eye infection in your baby, including swollen eyes, red eyes, or yellowish discharge from the eyes.
- **Thrush.** White patches on your baby's cheeks, gums, or tongue could be an infection called thrush. Your baby might also refuse to eat or develop a diaper rash. If you're breastfeeding, you can get thrush, too. Signs include red scaly nipples and pain during or after nursing. Thrush is common and easy to treat — call your care team if you think you or your baby might have it.
- **Fever.** A temperature of 100.4 degrees rectally or higher is a fever. In a one-month-old baby, that deserves an immediate call to your pediatrician's office.



Postpartum Depression

- Postpartum depression (PPD) is more than just the “baby blues.”
- Please call your OB, midwife or pediatrician if you think you have PPD – this is the #1 complication of childbirth, and it’s nothing to be ashamed of!
- PPD/psychosis symptoms can include:
 - Severe anxiety.
 - Extreme sadness, frequent or uncontrolled crying.
 - Severe mood swings.
 - Extreme anger.
 - Feeling easily overwhelmed.
 - Intense feelings of shame, inadequacy, and guilt.
 - Inability to bond with your baby.
 - Poor sleep even when you have a chance to sleep.
 - Significant trouble concentrating.
 - Hallucinations, depersonalization, paranoia, agitation.



When to Call Us Urgently

Call Eugene Pediatric Associates at **541-HUG-KIDS** immediately if your newborn:

- Has a fever of 100.4 degrees or higher.
- Won't eat for extended periods of time.
- "Projectile vomits" often.
- Has fast, labored breathing or nasal flaring.
- Looks unusually pale or yellow.
- Your parent intuition tells you to worry.

We consider the following a medical emergency and recommend a **911** call if your baby is:

- Grunting with every breath.
- Is listless/lethargic and will not respond to you.
- Is gray or blue in the lips/tongue.

