

The logo for Kids Plus Pediatrics features the letters 'k', 'i', 'd', 's', and a plus sign, each inside a colored square: 'k' in green, 'i' in red, 'd' in purple, 's' in yellow, and '+' in blue. Below this, the word 'pediatrics' is written in a lowercase, sans-serif font.

pediatrics

1-Month Handout

1-MONTH DEVELOPMENT QUESTIONS

1. Does your baby turn her head when lying on her belly?
2. Does your baby grab an object if placed in his hand?
3. Does your baby respond to sound?
4. Does your baby seem able to see?
5. For boys: does he have a strong urine stream?

FEEDING

Your baby is growing! At this age, a baby only needs breast milk or infant formula with iron. (We usually give breastfed babies a vitamin D supplement daily.) Breastfed babies usually feed about 10 minutes at each breast during each feeding, and may feed as often as every 1.5–2 hours. At this age, bottle-fed babies take about 2 to 3 ounces of formula every 2 to 4 hours on average, but may take more. It's normal for babies to wake up at night to feed. We advise NOT to start cereal or baby food yet, unless specifically told to do so.

FEVER

A baby's temperature can vary a few degrees normally, but we consider a *rectal* temperature of 100.5 degrees Fahrenheit or greater to be a "fever." (Temperatures taken under the arm are not as accurate at this age.)

We take fevers very seriously at this age, so you should call us *immediately* if a baby 8 weeks or younger develops a fever.

Do not give your baby Tylenol or other fever reducing medicine at this age unless specifically directed by your Doctor. Call us first!

While it's fine for your baby to be around visitors, try to minimize exposure to sick people. We want to try very hard to keep babies from getting illnesses at this age! Be sure everyone washes their hands before touching the baby. Covering your mouth when coughing and sneezing also helps to reduce the spread of germs.

SLEEP

We support the American Academy of Pediatrics recommendation that babies sleep on their backs to decrease the risk of SIDS (Sudden Infant Death Syndrome). Healthy babies do not choke on their mucus or spit-ups while sleeping on their backs.

Here are a few other tips that can help prevent sleep problems in the future:

Place your baby in the crib when he's drowsy but awake.

It often takes 15-30 minutes of restlessness for a baby to fall asleep. If he's crying, rock and cuddle him, but when he settles down, try to put him in the crib before he falls asleep. Handle naps the same way. This is how your child learns to put himself back to sleep after normal awakenings.

Hold your baby for the fussy or crying periods for the first three months.

All new babies cry some during the day and night. Always respond to a crying baby. Gentle motion and cuddling seem to help the most. Babies cannot be spoiled during the first three or four months of life. If your baby cries excessively, the cause is most likely colic (see pg. 3). Even colicky babies have a few times each day when they are drowsy and not crying. On these occasions, place the baby in the crib.

Carry your baby for at least three hours a day when she isn't crying.

This practice helps reduce fussy crying.

Don't let your baby sleep more than three straight hours during the day.

Gently awaken and entertain her. Soon your baby will spend more time away after feedings.

Make the middle of the night feedings brief and boring.

You want your baby to think of night time as a special time for sleeping. Don't turn on lots of lights, talk to him, rock him, or provide him with any stimulation. If you must change your child, use as little light as possible, and do it quietly. However, during the day, provide extra play and attention.

Don't let your baby sleep in your bed.

This will help insure that you don't roll onto your infant when you are sleeping.

Choose a consistent bedtime and give the last feeding then.

Try to keep your baby awake for the two hours before bedtime. Going to bed at the same time every night helps her develop good sleeping habits.

BOWEL MOVEMENTS

Most babies will strain to pass bowel movements, and some will even cry. This is normal, and not a sign of constipation. Some babies have bowel movements with every feeding, others may go three to four days between stooling. As long as the stools remain soft, like clay, the baby is not constipated.

COLIC & CRYING

Colic is *unexplained* crying in a baby. It's not crying due to hunger, pain, or being tired, gassy, hot, or cold. Colic usually follows the rule of 3's: crying for more than 3 hours/day, for at least 3 days/week and for 3 weeks or longer. A lot of babies go through a period of increased crying which peaks between 2 weeks of life until about 3 months of age.

What can you do for colic? We recommend following a variation of the 5S's as described in *The Happiest Baby on the Block*:

1. **SWADDLING:** Swaddling in a blanket may help calm your infant. Some babies enjoy the comfort of being wrapped up so that their arms and legs. Be sure to wrap the blanket tightly enough so that it will not come loose, so they are close to their body similar to being in the womb.
2. **SIDE/STOMACH:** Just a position change may help to console your baby. Try holding him on his side or stomach and rubbing his back. But remember: we always recommend putting your baby to sleep on his back.
3. **SHHH:** Shushing babies seems to help relax them. Shushing must be louder than they are crying, or they won't notice. You can use radio static, a hair dryer, or a white noise machine too. All of those work nicely.
4. **ROCKING/WALKING/SWAYING:** Movement often can help to calm your baby. Be sure to properly support your baby's head and neck. Once he's calmer, try placing him in swing, properly restrained, to continue motion.
5. **SUCKING:** Sucking will often help to calm your baby. This can be accomplished by using the breast, a finger, or a pacifier.
6. **GO OUTSIDE:** A change in scenery will be good for both you and your baby.
7. **WARM BATH:** Some babies may like this, others may not.

Finally: get rest and help for yourself! Avoid getting exhausted, and try to get at least one nap. Ask relatives or friends to help with other children and chores. Caring for a colicky baby is at least a two-person chore. Babies usually outgrow colic within a few months, so, even though it might feel like it, it won't last forever! Remember that crying is not bad. It is a normal part of development for your infant and your baby's way of communicating his needs. You will soon learn the that cries sound different. One cry may mean hunger, another one may mean change my diaper or another one hold me. You cannot spoil a newborn.

HOT WATER

To minimize the risk of scalding, we recommend your hot water heater be set no higher than 120°F.

SMOKE & CARBON MONOXIDE DETECTORS

Houses should have at least one smoke detector on each level. Many safety experts recommend one in each bedroom, as well as a carbon monoxide (CO) detector for the house. Be sure to check the batteries at least twice a year to be sure they're still functioning. An easy way to remember this is to check the detectors when you change your clocks for daylight savings time (both spring and fall). Our family should have an escape plan in case of fire, including multiple exit sites, and a safe place to meet outside so you can be sure everyone is out safely.

We also caution against passive smoke exposure of any kind. Our recommendation for the health of your baby is to avoid exposing your infant to cigarette smoking. The more smoke your child is exposed to, the higher her chance of developing more colds, lung infections, ear infections, allergies, asthma problems, and cancer. The best thing for your child's health is for you not to smoke at all. Even if you don't smoke near your child, chemicals from smoking stay with you on your clothes and on your body. If you must smoke, smoke outside the house, and remove your coat or jacket when you come back in. Never smoke inside or in the car. Even if your child is in another room or not in the car at the moment, she will still be exposed to lingering, harmful chemicals later.

QUESTIONS & CONCERNS

If you feel you need additional advice between regular check-ups, you can post questions to our Facebook page or telephone us during office hours. Facebook, where we answer questions sometimes as quickly as in a few minutes, is a great place to ask about general, non-pressing issues. For more detailed and pressing health questions, it's best to call. Either way, we're always happy to provide counseling and guidance. (It's both our job and our pleasure!)

When calling after office hours, your call will be answered by an answering machine. If you have a concern that can't wait for regular office hours, please leave your name, your child's name (with spelling), and your phone number, and we'll return your call usually within an hour or so. If you have an emergency that requires an ambulance or paramedics, call 911 *first*. If you have an emergency that can't wait for a call back and need to have the doctor urgently paged (such as seizures, respiratory illness with labored breathing, suspected dehydration, or similar conditions), the recorded message will give you the answering service's phone number, and they can reach the doctor on call for the emergency.



AND REMEMBER...

We have a wonderful, 24/7/365 resource for parents at our **Kids Plus Facebook Page**. Like us on Facebook, and follow along with our great Kids Plus Social Media Community!

We look forward to seeing you at your 2-Month Well Visit!