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FEEDING IN THE NEWBORN PERIOD

During the first four to six days of life, feeding schedules may be erratic. The provider will discuss feeding advice with you on an individual basis in the hospital. Here are some guidelines you may find helpful:

* Newborn

BREASTFEEDING

Offer feeding every 2-3 hours during the day and every 3-4 hours at night. The baby may feed more often if she/he wants. Baby may feed as long as she/he wants on both sides up to 30 minutes per side. Most feedings will be 10-15 minutes per side. Alternate which breast is first with each feeding. Proper positioning of the infant's mouth around both the areola and nipple is essential to prevent sore nipples. Breast milk usually takes 3-4 days to come in. During this time, try to relax and not be too concerned about how much the infant is consuming. Infants are born with extra fluid supplies that hold them over for the first few days of life. Just work on good technique and things will work out in due time. Lactation consultants and hospital nurses are readily available to assist you with breastfeeding. Do not hesitate to ask! It is best to avoid bottles of water or formula in the first two weeks to avoid nipple confusion. However, certain situations (i.e. C-Sections, maternal post-partum conditions, and neonatal conditions) may arise that will require the use of supplemental formula. Most of the time, these infants do very well on the breast after the mom or infant recovers. In conditions that require a delay in breastfeeding, it is important to obtain and use an electric breast pump.

FORMULA FEEDING

For families choosing formula, we recommend starting a cow's milk-based formula. Bottle-fed infants should be offered 2-3 ounces every 3-4 hours initially and only given what is vigorously taken. The baby will increase intake on his/her own over time. Offer as much as the baby wants. DO NOT FORCE MORE! Allow your baby to sleep through the night if the baby wants. Limit daytime naps to no more than about 2 hours to encourage nighttime sleeping. Awaken your infant, play, change the diaper, and offer the feeding.

SKIN CARE

Bathe and shampoo twice a week initially. Use only mild soaps, such as Dove or Aveeno. The room should be warm and without any drafts/breeze. Avoid baby wipes if the baby has a rash or sensitive skin. Paper towels or wash cloths moistened with warm water work best. Avoid powders, especially near the face. Avoid much of anything to the face and ears. If desired, cotton balls soaked only with warm water can be used for cleaning. Never use Q-tips for cleaning any part of the ear. Don't worry about wax. For diaper rash, use a zinc oxide-based cream, like Desitin, Balmex or Triple Paste. Avoid fabric softeners – they may cause diaper rash. Use scent-free/dye-free detergents when washing clothes.

CORD CARE

We no longer recommend routine use of alcohol on the baby's umbilical cord. If the skin around the cord is red, call the office during regular office hours. The cord normally falls off by 1-3 weeks. Blood-tinged, clear, or light yellow fluid may ooze from the site when it begins to fall off and continue to ooze 3-5 days after it falls off. If it continues to ooze, clean it out with rubbing alcohol and call our office. No tub baths until the cord falls off and stops oozing.

CIRCUMCISION CARE

Apply A&D Ointment or Vaseline with each diaper change for 5 days following the circumcision. If the penis has oozing or bleeding beyond the first 8-12 hours please call the office during regular business hours. Wash and clean the penis with wet paper towels or a soft wash cloth only as needed. A yellow film may form on the tip of the penis. This will go away on its own. Call our office if there is increasing redness or any swelling after 48 hours.

SAFETY

The only safe way for a baby to be in a car is in an approved car seat, installed according to manufacturer's instructions. This is STATE LAW. Your local Fire Department can assist you with proper positioning of the car seat if needed. To reduce the risk of Sudden Infant Death Syndrome, your baby should sleep on his/her back on a firm mattress without sheepskin. Stuffed animals, crib bumpers, and thick blankets should be kept out of the crib. Do not put baby bottles in the microwave to warm – they heat unevenly and the baby could sustain a burn. Quit smoking and do not allow anyone to smoke around your baby. Smoking around your infant can increase the risk of Sudden Infant Death Syndrome, respiratory illnesses, and ear infections. Do not "clean" the pacifier by licking it off – doing so will give your baby germs.

VISITORS

Minimize visitors until the baby is 8 weeks old. It's fine to take your infant outdoors but avoid crowded areas. It's a good idea to have a "look but don't touch" approach until your child is 8 weeks old. Anyone who will be holding your infant should wash their hands first and avoid coughing or sneezing near him/her.

ELIMINATION

For breast-fed infants, regular and frequent stooling and urination habits become established after mom's breast milk comes in at about 3-4 days of age. It is normal for infants to stool and urinate infrequently in the first 3 days of life. Babies should have a wet diaper at least 3 times a day (in 24 hours) prior to the milk coming in. After the breast milk comes in, we expect 3-8 stools per 24 hours and wet diapers every 3-4 hours. For the first 2-4 weeks, keep a record of each diaper change indicating whether there was urine, stool, or both. Don't change a dry diaper. If you have any questions about stooling or voiding habits, please call our office during normal business hours.

NORMAL BABY THINGS

All babies do things that may concern their parents, but are completely normal for infants. All newborns lose somewhere between 5-10 percent of their birth weight in the first few days of life. They will regain this weight usually by 10-14 days. Sneezing, hiccupping, and "snorting" from mild nasal congestion are normal baby sounds and generally do not require any treatment. Many newborns turn "yellow" (jaundice) during the first week – call during normal business hours if the baby appears "yellow". Female infants can have a bloody or white vaginal discharge during the first 2 weeks. Both male and female infants can have swelling of the breasts, and may also have a milky discharge from the nipples. Do not try to express this liquid.

OFFICE VISITS

The first visit is generally at 2-3 days after hospital discharge. We'll then see you at 1 month, 2 months and so on. We have nurses available during regular business hours to answer any non-urgent questions. For emergencies, we are on call 24 hours a day.

WHEN TO CALL OUR OFFICE

Call with ANY fever over 100.4 rectally when baby is under two months of age. Call us especially if the baby "isn't acting right." All babies spit up some – call us if the baby has persistent or forceful vomiting. Excessive sleepiness is a concern as is refusal of bottle or breast for several feedings in a row. Call our office if the baby has crying that persists for more than 3 hours inconsolable, after feeding and/or holding infant.

RESOURCES

Caring for Your Baby and Young Child: Birth to Age 5 – America Academy of Pediatrics www.aap.org What to Expect the First Year – Heidi Murkoff, Sandee Hathaway, and Arlene Eisenberg Baby 411 – Denise Fields and Ari Brown The Happiest Baby on the Block – Dr. Harvey Karp The Nursing Mother's Companion – Kathleen Huggins

If you have any questions about this handout please contact our office at 847-676-5394