

Dr. Fitch's 2 month Well Baby Handout

Name:_	Date:	
	Weight:lbsoz (%) Height: in (%)	
	Head:in (%)	
Tylenol dose:	tsp orml (infant or children's)—4 hours	S

THINGS TO DO:

- Call to schedule your infant's 4 month well baby visit (call 4-6 weeks ahead).
- Parents and close contacts should get the TdaP (every 5 years) and flu vaccine (yearly). We offer this in the office if you would like to get it here.
- Visit our website: www.heritagepediatrics.com for news, announcements, educational materials, health recommendations, and information about our office. Check out my page under the physician tab.
- Follow us on Facebook!!

2 Pieces of Advice:

- 1. Relax. Learn how to calmly respond as a parent (I'm still working on this 20 years down the road). Whether our kids are 2 months, 2 years or a teenager, if we are stressed and anxious, our kids will pick up on this.
- 2. Give your permission to make mistakes as a parent. None of us are perfect. If we are beating ourselves up for a bad yesterday, we aren't going to have a good today.

FEEDING:

Feeding is variable at this age. While some are still feeding every 2-3 hours, others are spacing to every 4 hours in the day. Spacing out during the day may help your infant to go longer stretches at night. If every time you try to space your infant out, they are not ready simply continue on your current schedule. Breast milk or formula is all your infant needs for nutrition until they are 4-6 months old. Introducing solid food early could result in allergies, anemia or increased weight gain. We will discuss solid foods at 4 months. If you are breast feeding your infant may be more efficient, but you are still looking for wet diapers and time between feedings to determine if he / she is getting enough. Most infants taking a bottle will take 3-4 oz at each feed. However, this again is variable and can range from 2-8 oz. Don't prop bottles or allow bottles in bed. You should hold and talk to your baby during feedings. Never put anything in the bottles except for formula or breast milk. Overfeeding, as we discussed at 2 weeks, is defined



as increasing spitting up. While spitting up is normal and even expected in small amounts, please call us for the following: increasing amounts, sudden poor feeding, increased fussiness, waking more frequently at night.

WET & DIRTY DIAPERS:

Your infant should still be wet with most diaper changes. Normal frequency of bowel movements is 1-3 a day. However, they can still be with every feeding or every 3-5 days. Let our office know if the stools become explosive, your infant is fussy, you see blood, or if your infant is straining for hours and the stools are harder (little hard balls).

SLEEP:

Unfortunately, I still have no expectations for sleep at 2 months. I still hope your infant will go a 4-5 hour stretch at night so you can make it through a sleep cycle. As I mentioned at 2 weeks, you are welcome to try to push your infant at night for 10-15 minutes for 3-4 nights. I do expect that he / she can skip a feeding by 3 months (4-8 hours), go 8-10 hours by 4 months and go 10-12 hours by 6 months. Hang in there as there is sleep hope on the horizon. Many babies will start sleeping longer when they are in their own crib in their own room. So, though it's more convenient to have your infant in a bassinet by your bed when they are feeding very frequently, moving them to their own room may help to stretch out their sleep intervals. I recommend that you keep the room very dark (even when feeding) and quiet at night and bright with noise and more stimulation in the day. This will help to set your infant's circadian rhythm.

CRYING / COLIC:

Please refer to the 2 week handout for information and treatment options. Though infants can still be very fussy at this age, I don't expect the fussiness to escalate or begin. Your infant may have a bad day or two, but if he / she begins having bad days, you should call our office. This could indicate an illness, constipation, gastro esophageal reflux or a food allergy.

PLAYTIME:

Keep the baby, when awake, in the room with you to enjoy the surroundings. Let your baby listen to music. Read books. Hearing language from both mom and dad stimulates the brain and helps develop a love of reading. Encourage babbling and cooing. We encourage "tummy time" during wakeful times, even for the little ones who fuss when placed on their tummies. This promotes head and upper body strength and control. Moms and Dads need playtime too! Allow an afternoon or evening out for yourselves by leaving your baby with a trusted, competent sitter.



BATHING:

Your baby may enjoy bathing now with splashing, cooing and playing in the water. Be sure to pay close attention to the baby's genitals. For uncircumcised boys, retract the foreskin gently enough to cleanse the tip of the glans. If the foreskin is unyielding, do not force it to retract. For little girls, be sure to wipe from front to back when cleaning. Gently spread the outer labia to cleanse stool. You may apply moisturizing creams to the infant's skin which will be very helpful if your infant has a tendency to have dry skin. Water evaporates after 2 minutes, so pat dry and apply lotion. There is no need to bathe your infant every day; even every 2 to 4 days is adequate.

DEVELOPMENT:

- Smiles, coos, startles and turns to voice/noises
- Focuses on objects and follows things a little past midline
- · Lifts head up when on tummy or off your shoulder when you are holding
- Focuses on your face
- · Moves arms and legs well and equally

IMMUNIZATIONS:

Your infant will receive 3 vaccines today:

- (1) Pentacel #1 (Diphtheria, Tetanus, acellular Pertussis [DTaP], Haemophilus Influenza B [HIB] and inactivated Polio IPV)
- (2) Prevnar-13 #1 (Pneumococcal)
- (3) Rotavirus #1 (oral)

1-3% may have higher fever (101-103) and be really fussy. So, 97-99% won't. But, most will be off the rest of the day: need to be held more, won't feed as well, won't nap as well, maybe run a low grade 99-100 temp. Though your infant may sleep well tonight after being worn out from the day, he /she could also be up every 2 hours. I recommend giving Tylenol every 4 hours while awake.

Pertussis is the "whooping cough" which is very dangerous for infants who are unvaccinated and why we recommend all parents get the TdaP as well. The HIB and Prevnar are for serious bacterial infections like meningitis and pneumonia, but also ear infections and sinusitis. Rotavirus is the oral vaccine for a stomach virus which can lead to significant dehydration and hospitalization in infants in the first year of life.



SAFETY

Accidents kill more infants in the first year of life than any other cause. Keep your baby safe by following a few recommendations.

(1) Sudden Infant Death Syndrome (SIDS)

- •Have baby sleep on back.
- •Use firm crib mattress.
- •No blankets, pillows or stuffed animals in crib.
- •Keep environmental temperature comfortable.
- •No smoking around infant.

(2) Car Safety

- •Use an approved infant car seat
- •The infant should be placed in the back seat with the car seat rear-facing until your child is 2 years of age.
- •Never hold your infant in your lap while traveling in an automobile.
- •Have your car seat installation inspected by trained personnel.

(3) Burns

- •Always check water temp before bath
- Set water heater to < 120°F.
- •Never smoke or drink hot liquids when holding baby

- Avoid exposure to direct sunlight
- Avoid microwave for heating formula/breast milk

(4) Illness

- •Avoid ill contacts, encourage good hand washing.
- •NO medications unless instructed by provider.
- •Have your baby seen for fever ≥100.4°F(rectal), poor feeding, or worrisome symptoms such as inconsolable crying, vomiting or abnormal drowsiness.

(5) Falls

- •Do not leave unattended on bed, sofa or changing table.
- •When using an infant carrier, always make sure infant is securely fastened in.
- Use Straps on all infant furniture (car seats, carriers, high chairs, exercisers, etc.)

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Poison Control: (800) 222-1222

Clinic Hours:

Monday – Friday AM: 8:00 am - 12:30 pm /1:30 pm - 4:30 pm Friday PM & Saturday AM Urgent Care Clinics: 1:30-4:30 PM & 8:00 am until last patient is seen