



**HERITAGE**  
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## Dr. Fitch's 4 month Well Baby Handout

Name: \_\_\_\_\_ Date: \_\_\_\_\_


Weight: \_\_\_\_ lbs \_\_\_\_ oz ( \_\_\_\_ %)

Height: \_\_\_\_ in ( \_\_\_\_ %)

Head: \_\_\_\_ in ( \_\_\_\_ %)

**Tylenol dose: \_\_\_\_ tsp or \_\_\_\_ ml (infant or children's)—4 hours**

### THINGS TO DO:

- Call to schedule your infant's 6 month well baby visit (call 4-6 weeks ahead). *This should be on or after 6 months (insurance will not cover a flu shot even a day before 6 months).*
- 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](http://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!! 

### FEEDING:

- Most infants are eating every 3-4 hours at this point or 5-6 feedings a day. Your infant can get all he / she needs from breast milk or formula until a year of age.
- The first thing to know about solid food is that they don't need them. The purpose of solids is to introduce tastes and introduce the skill of the spoon. If you come back at 6 months and haven't started solids (particularly if your infant is sleeping well—see sleep below), that is no problem as you can learn these skills at 6 months.
- Second, I want eating to be fun for everyone. If your infant arches back and screams with every bite, it's not worth pushing it. If he / she makes funny faces and tongue thrusts the food out, that is normal and developmental (take pictures of that—a Kodak moment).
- Thirdly, once you start adding new foods, only add a new food once every 3-5 days. That way if your infant has a problem, it will be easier to determine what is the cause.
- Most will start with cereal as you can make it really soupy and then thicken it up as they get more used to solids. There is very little nutritional value in cereal (the iron is good for an exclusively breast fed infant), so breast milk or formula needs to continue to be the main nutrition. If the milk intake cuts in half with the introduction of solids, you need to back off and make sure your infant drinks milk first.
- Once your infant likes cereal and it's thickened up, you may start with fruits and vegetables. There is really no right or wrong way to introduce the solids. You don't even have to start with cereal, but it's easier since you can adjust the texture compared to stage 1



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baby foods. Many like to start vegetables before fruit (because fruit is sweet), and the yellow / orange vegetables tend to be less gassy than the green vegetables.

- At 4 months, when your infant is hungry, they probably won't be happy if you offer a bowl of mush. So, we usually offer solids after breast feeding or after finishing a bottle. If your infant isn't hungry right after drinking milk, you can offer solids in between feedings.
- I'm fine making or buying baby food. If you are buying baby food, look for baby food with no added sugars or salts. Sugar is addictive, but later we can delay introducing the better.
- We will talk more about texture and stage 2 foods at the 6 month visit.

### **WET & DIRTY DIAPERS:**

- Diapers should still be wet with most changes. Dirty diapers usually happen once or twice a day, but can still be very infrequent (3-5 days) if you haven't started solid foods.
- Once you begin solid food, their stool will probably have more texture. If your infant strains more to pass these, but they are still soft, this is normal. They are just learning to relax the bottom muscles with this increased texture.
- If your infant is really straining, having hard little balls, or you see blood, we will introduce measures to soften the stool. This may include a little watered down juice, moving to fruit in the diet, or adding stool softener to a bottle or baby food.
- Please call our office if bowel movements become a problem.

### **SLEEP:**

- Most infants are starting to sleep longer by 4 months. In fact most (90% or more) can go 8-10 hours at night without eating.
- Many/ most babies will start sleeping longer when they are in their own crib in a separate room from mom and dad.
- Though it's ok to see if cereal in the evening time will help your infant sleep longer, I also give you permission to let your infant cry for longer stretches of time.
- If your infant is well during the day, has fed well all day long (with good wet diapers) and is easy to console at night when they wake, I give you permission to let them cry for 15, 20, 30, 45, 60, even 90 minutes for 3 or 4 nights.
- If the 4<sup>th</sup> night is no better than the 1<sup>st</sup> night, I would go back to feeding your infant and you can try this process again in 1-2 weeks.
- Though it is certainly ok to go in and check on your infant, I think the quickest (not easiest) way to help them sleep through the night is this cold turkey approach. Since most infants give in by the 3<sup>rd</sup> or 4<sup>th</sup> night, I think Thursday night is a good night to start this training process as most will be sleeping by Sunday evening.
- As hard as it is to listen to your infant cry at this age, it's easier now to let them cry it out at 4 months since they develop more of a will and will hold out longer the older they get.
- This is the beginning of the habit forming age when an infant learns they get their way if every time they cry we run to pick them up.



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- Even if your infant feeds well during the night, they may not be hungry. He / she may just be getting into a habit of eating in the middle of the night. So, working on sleep at this age is really just the beginning of discipline, which means training.
- I know this is hard. So remember, I am not telling you to do this, but just giving you permission. But, please know I have used this method with my own children.
- Also remember the importance of a bedtime ritual (such as reading a story, singing a song, bedtime prayers, etc.). It should not be too long (about 20 minutes), and more importantly the child should not fall asleep during the bedtime ritual. If your baby goes to sleep in your arms occasionally, that's fine, but try to place him in the crib awake for bedtime and naps.
- Keep their room dark, dark, dark when they sleep and make their room/ house bright, bright, bright when they wake up (this, and a consistent sleep schedule, will help to set their circadian rhythm).

## PLAYTIME:

- At this age, your infant can entertain him / herself for short periods of time. Though it is good to hold and love on your infant a lot, it is also good at this age for them to see that they don't always get what they want when they want it.
- Remember as we said above, this is the habit forming age. Place your baby in a safe area on the floor or in a playpen and put bright toys (rattle, plastic cup, and blocks) where the baby can see and reach them. If your infant cries when you leave the room that is ok. Go do what you were going to do and they will see that you leave and come back.
- The American Academy of Pediatrics advises against the use of infant walkers. They are an established safety hazard.
- It is best to let your baby pull, wiggle and learn to roll and explore. The use of stationary play saucers is safe, however limiting to no more than 40 minutes per day is appropriate.
- Read books such as board books and listen to classical and children's music.

## CRYING:

Though most colic has resolved by 4 months, every infant will still have some fussy times. Sometimes even the best of parents get frustrated or angry with their babies. If you get this way, hand the baby to a family member or neighbor or put him / her in their crib. Whatever you do, remember...**Never shake your baby.**

## IMMUNIZATIONS:

Your infant will receive 3 vaccines today:

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



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- Please see side effects on the 2 month handout. You tend to see the same side effects you saw the first time. So, if you were in the 1-3% who had higher fever and were really fussy, you can expect to see the same today. Good news is that if you didn't see much of a reaction last time, you probably won't this time either (though there are always exceptions). Most will see more local reaction in one or both thighs (DTaP and Prevnar cause these local reactions).

- I do still recommend giving Tylenol every 4 hours while awake.

- Pertussis is "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 in infants in the first year of life.

## **DEVELOPMENT:**

- Holds head up well when sitting in your lap.
- Bears some weight on legs (when you hold over your lap).
- Beginning to roll over (may get to side and get stuck on arm at this age).
- Will track 180 degrees to voice or sights.
- Discovering hands, reaches for toy, grasps rattle.
- Smiles, laughs, vocalizes and makes eye contact.

## **TEETHING:**

- The average time to see signs of teething is 3-4 months. These include drooling (part of this is developmental as your infant's salivary glands begin making more saliva), putting hands to their mouth, and chewing on everything.
- Though honestly, an infant is teething from birth. I have had several infants with their first tooth at birth and a couple who didn't get their first tooth until 18 months (we do refer to a dentist if there are no teeth beyond 18 months).
- The average age to see the first tooth is 6-7 months.
- Other signs and symptoms of teething are debated. I believe you can see mild symptoms which include: mild fussiness, mild clear runny nose, temperature in the 99s, one or two loose stools, feedings being off a little, waking up 1-2 extra times at night (but easy to console and get back to sleep).
- More intense symptoms may indicate an illness. You are welcome to call our office to discuss.



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## **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)**

- The incidence of SIDS significantly decreases after 4 months of age. It is still recommended to place infants on their back for sleeping purposes; however, once they start to roll over on their own, it is not necessary to reposition infants as they sleep.
- Continue to follow the other recommendations of using a firm mattress and no stuffed animals, blankets or comforters in the bed with the infant.

### **(3) Car Safety**

- Use an approved infant car seat while traveling.
- 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.

### **(5) Falls**

- Do not leave unattended on bed, sofa or changing table. Baby is starting to roll.
- Never leave your baby alone with young sibling or pets.
- Gates are needed at the top and bottom of stairs.

### **(2) Choking**

- Baby is learning to grasp objects; good toys include soft, washable ones without removable parts or sharp objects that could cause choking.
- If a toy fits in a toilet paper roll it's too small
- Do not prop bottles or place them in your infant's crib.

### **(4) Smoke**

- Do not smoke around your baby.
- Smoking causes an increase in ear infections.
- Smoke outside of the home, wear a light overcoat that remains outdoors to decrease smoke particles on clothing.

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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**