Maternal Health

Arnot*Health*



Caring for Your Baby

Arnot Ogden Medical Center 600 Roe Avenue Elmira, NY 14905

"Caring for Your Baby"

1. Bathing

Bathe baby at your convenience. Sponge bathe until the cord falls off. Once the navel is completely healed you may do a tub bath. Bath should be given in a warm, draft free area. Don't use powder on baby as this can be inhaled into the lungs; and it may collect in genital area. Baby oil is not recommended as it may cause a rash. Use any mild, non-perfumed soap that you and the baby's father are not sensitive to. Check temperature of water with wrist or elbow. It should be comfortably warm to your skin. Begin the bath by washing the eyes, but avoid spilling water into ear canals. Shampoo scalp using baby shampoo to prevent tearing or irritation. If crusting or flakiness appears (cradle cap), scrub with soft toothbrush or baby brush. Don't miss skin folds and creases: neck, underarm areas, groin, etc. Baby will be slippery, but you will be able to hold him/her in the tub with a good grip. A towel in the bottom of the tub may help. For a comfortable grip, cradle the baby, hold his/her outer leg, then lower him/her into the tub leaving your other hand free to bathe him/her. Rinse thoroughly and remove baby from the tub. Dry thoroughly. Put recommended ointment on diaper area and dress baby.

2. Diapering

Change diapers whenever baby seems uncomfortable because of dirty diaper. Don't wake baby to change him/her. He/she will not be cold because of a wet diaper, if he/she is dry otherwise. For girl babies, always wipe front to back when cleaning diaper area. Clean baby with soap and water or baby wipes. Dry well and apply ointment generously afterwards. To help prevent diaper rash expose buttocks to air or sunlight at nap time one or two times per day, leaving diaper under the baby as a pad.

3. Dressing

Use your own comfort and common sense as a guide to dressing the baby. Remember not to feel hands and feet to judge whether baby is warm or cold. Feel the chest or neck. Hands and feet are normally cold in an infant because of immature circulation. If always kept too warm, baby loses his/her ability to adjust to changes in temperature and actually becomes cold easier.

4. Cord Care

Keep cord as dry as possible. The drier it stays, the sooner it will heal and the less likely it is to become infected. It takes about 10-14 days to dry up and fall off. Follow recommended cleaning guidelines of physician. Call if continuous bleeding or pus from the cord.

5. Circumcision Care

Keep circumcised area clean. If dirty, wash area with warm water then apply a generous amount of ointment. Ointment should be applied at every diaper change. It takes about 10 - 14 days to heal and gets a yellow color around the top. This is normal and should not be removed. Some red oozing is normal also, but a large amount of bleeding is not. The plasitbell will fall off in 5 to 8 days. Call if continuous bleeding or pus from the site.

6. Sleeping

Newborn babies sleep about 15-16 hours a day; however, babies sleep on a different schedule than adults. They take lots of naps. A two week old baby will only sleep for 3 or 4 hours before waking up to be fed. Babies can take even longer to learn to sleep through the night. It should be noted that very fluffy comforters, pillows, and blankets should be discouraged from use around the baby's face. To get all the air they need, babies need room around their nose and mouth. For this reason, placing a young baby on a waterbed is also discouraged.

7. Bulb Syringe

Bulb syringes are used to clean out the nose and mouth. Squeeze the bulb syringe before putting into the nose or mouth, then release to suck out the secretions. Repeat until nose or mouth is clear. Clean bulb syringe with warm water and liquid soap. Don't go deep into the nose and don't over use. Using too much can irritate the nose and cause more secretions.

8. Normal Characteristics/Growth and Development

The first job for parents and babies is to learn to love each other. Many parents think they will love their babies "at first sight". It may take time. Don't be upset is you have mixed feelings at first. Getting to know your baby is the first step to loving your baby.

The newborn baby can see beginning at birth, even colors, but can't focus for very long periods of time. The eyes may even look crossed at times in the first few months, as he/she doesn't have the coordination of eye muscles to make his/her eyes move together all the time.

Babies do smile early and first smiles are not because of gas. Even at one week of age, a baby recognizes something familiar about the mother who has fed him/her from birth. A newborn can also hear quite well and prefers the sound of speech. His sense of smell is also quite developed.

The baby responds to noises and can be easily startled. Some babies have frequent trembling movements in the early months. The trembling is because of the immaturity of the baby's nervous system and will pass in time.

The skin may be very dry, very red, or mottled in a pink and white pattern. You may see tiny white pimples on the nose, forehead, and chin. Also, tiny white lumps on the gums or roof of the mouth. Both of these are quite normal and will disappear in time.

Many babies have a bluish discoloration and coldness of the hands and feet. This is because of immature circulation and is normal.

Most baby's legs are normally slightly bowed at birth.

In early weeks of life, your baby's breathing may seem quite irregular to you. This is normal and no cause for alarm.

Almost all newborn babies, boys and girls, show some signs of breast enlargement because of hormones from Mom during pregnancy. Sooner or later, there may be a few drops of whitish fluid from the nipples. This is normal and you need to do nothing about it.

In girl babies, within the first ten days to two weeks, you may see a thick jelly secretion from the vagina. Sometimes, this may have small amounts of blood in it. Don't be alarmed...this is normal too, and is also because of hormones from Mom during pregnancy. It will stop in a few days.

You might be worried that you won't know what your baby needs. Don't be! Babies let you know what they need by crying. In a short time, you will be able to tell a "hungry cry" from a "sleepy cry".

Babies sometimes feel better when you lay them on their tummy and gently rub their backs. You might try wrapping the baby tightly in a blanket, putting baby in a wind-up bed or swing, or a ride in the car (in a safe infant car seat).

Babies also need to suck and may not get enough sucking with feedings. This doesn't mean you need to feed them more... just that they need to suck. Orthodontists, who straighten teeth, prefer the use of a pacifier over thumb sucking

9. Safety

This section is not intended to frighten you but to help prevent an accident.

- Always use car seats.
- 2. Never leave your child unattended near water. Drowning is the second leading cause of accidental death in children. Most drownings happen when a child falls into a pool or is left alone in a tub. Children have also drowned in toilets, washing machines, and diaper pails when they have fallen into them and can't get back out. Children can drown in less than 2 inches of water and in only a few minutes.
- 3. **Don't place your baby on any soft surface unattended**; like pillows, waterbeds, soft quilts, or comforters, especially under 6 months of age. Many deaths are caused by suffocation. The risk of suffocation is especially high if the baby falls asleep face down. Babies haven't the strength to lift their heads or turn themselves in bed.

9. Safety Con't

- 4. **Fill unused electrical sockets with plastic guards** to prevent children from sticking anything into them.
- 5. **Install safety gates** securely at the top and bottom of stairways and at the doorway of dangerous rooms, such as the kitchen or bathroom. Don't use the accordion type gate though, as they have large openings along the top edge, which a child's neck can be trapped in and he/she could strangle trying to get free.
- 6. Some house plants can be poisonous and all should be kept out of reach. If your child swallows any part of a plant, call for medical advice. Take your child and a sample of the plant to the hospital immediately.
- 7. **Medicines and poisonous items should be put out of reach**. Also, lock or use cabinet latches on cupboards that contain dangerous items (matches, cleaning supplies, liquors, knives, breakables, etc., even mouthwash can be harmful).
- 8. Use a diaper pail that locks to prevent the chance of your child being poisoned by the deodorizer inside or drowning in the liquid.
- 9. Never leave electrical appliances (hair dryer, curling iron, razors, or radios) plugged in. Always keep them out of reach of the tub or sink! Keep the electrical cord of appliances, that are kept plugged in, tucked away so the child cannot pull on them.
- 10. **Cribs should meet federal safety standards**. Slats should be no more than 2 3/8 inches apart. Don't place cribs near heavy pictures or near windows where children may reach and tug at the curtains or become entangled in cords. Crib bumpers should be made out of heavy plastic and tightly tied to the crib sides.
- 11. **Keep small object out of reach**. Babies will put anything in their mouths; pins, coins, nails, rattles, parts of toys, jewelry, crayons, small batteries, etc. Round and hard foods such as hot dogs, raisins, nuts, hard candies, raw carrots, grapes, and popcorn are especially dangerous and can be deadly to children under four.
- 12. If you are using diaper pins, get diaper pins with plastic safety shields.
- 13. **Always check the water temperature** before bathing baby. Water that feels comfortable to you may be too hot for your baby. Hot liquids are the most frequent cause of burns to children. Baby's water should be between 90-100 degrees. Protect against burns and bumps with a padded cover that fits over the tub spout.

9. Safety Con't

- 14. **Keep pot handles turned towards the back of the stove** and use back burners whenever possible to prevent child from grabbing and spilling hot liquid on themselves.
- 15. **Install smoke detectors** near all bedrooms and on every level of your home. Put Tot Spotter" rescue stickers on any top priority search rooms and your child's bedroom. Also, place a sticker on the bottom half of his/her bedroom door facing the hallway. Children under 5 are at greatest risk from fires because they panic and hide in closets and under beds where they can't be found.
- 16. **Never leave your child unattended**, whether it be on the sofa, changing table, in the stroller, walker, high chair, or car. It only takes a few seconds for a child to roll over, fall, reach for things that will do them harm, or be abducted.
- 17. Never shake your child, swing by the arms; or toss in the air. It could result in mental or physical damage or even death. This is known as the Shaken Baby Syndrome.
- 18. Always use safety restraining straps on high chairs, walkers, swings, etc.
- 19. Post a list of emergency numbers by all phones ambulance, poison control, police and fire departments, emergency room, doctor, work numbers, family or friend (neighbor), your own address and phone number.
- 20. Have a baby sitter you can trust when you leave your baby at home. Be sure your baby sitter knows where to reach you. Make sure that your baby sitter is old enough to handle the job.
- 21. Never leave young children or animals alone with your new baby. Little children may be tempted to pick up or hurt the baby when you aren't looking. Unsupervised animals can hurt your baby.
- 22. **Have a well stocked first aid kit** with bandages, first aid cream, activated charcoal and syrup of ipecac (in case of poisoning always contact a poison control center before giving anything).

10. Temperature

If your baby feels warm to your touch, you need to take his/her temperature. A temperature of 100 degrees or more is a fever. If your baby has a fever and is under three months of age, you should call the doctor (day or night). The doctor will tell you if the baby needs to be seen or if you can take care of the baby at home. The recommended method of taking temperature is under the arm. Check with the physician regarding rectal temperatures.

11. Jaundice

About half of all newborn babies show some jaundice (yellowish color to the skin and eyes) during the first week or so of life, starting on the 2nd or 3rd day. Most jaundice in newborn babies is not serious and goes away in a few days to a week. It will not reappear or cause any lasting effects on your baby. A few do need treatment and your doctor will talk to you if a blood test is needed. If treatment is needed, the baby is placed under a special fluorescent light ("billight"). After a few days, he/she will be ready to go home. Call if jaundice after 1 week old.

12. Bowel and Bladder

The baby usually urinates in frequent, small amounts at least 6 times a day. The urine is almost colorless, and should not be strong smelling. Call the doctor if wetting <6 diapers a day.

The baby's first few bowel movements will be black/green in color and look like sticky, hot tar. A breast fed baby's bowel movements will turn to a pale yellow color that is soft/loose and may be granular. A bottle-fed baby's bowel movements will turn to a yellow or yellow-orange color that is pasty or firm. Call the doctor if diarrhea becomes more watery, green in color, or increases in number throughout the day. Call the doctor if diarrhea becomes watery, green in color, or increases in number throughout the day. Call the doctor if there is no bowel movement in a few days.

13. Newborn Screening

Newborn screening is a quick and simple blood test that provides important information about your baby's health... it identifies the few babies who may have one of several birth defects. See Newborn Screening Pamphlet for more details.

14. Bottle Feeding

There is ready to feed (just pour out of can), concentrated liquid (just add water), and powder (just add water) formula. Read the label for specific instructions. Keep unopened bottles of formula in the refrigerator no longer than 2 days before using. Don't re-refrigerate, rewarm, or refeed formula baby leaves in bottle if it has been open at room temperature for an hour or more. Throw it away as bacteria grows quickly. Bottle and nipples should be sterilized before you use them the first time (to sterilize them, soak in boiling water for about 20 minutes) then clean after each use by thoroughly washing with detergent and brush, rinsing well, and allowing to air dry.

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15. Breast-Feeding

See Breast-feeding Basics book for details.

16. Calling the Doctor

You should call the doctor if your baby has any of the following or you have any questions or concerns:

- 1. Baby cries when moved, can't be calmed, or seems to be in pain.
- 2. Is unusually quiet, is limp, or loses his/her appetite.
- 3. Has trouble breathing or breathes quickly.
- 4. Baby has a convulsion or seizure.
- 5. Skin gets a rash or unusual purple spots.
- 6. Soft spots on head are bulging or sunken in.
- 7. If your baby is choking and is conscious, follow these steps:
 - Remain as calm as possible.
 - Turn baby face down on your thigh, support him/her with your arm and holding his/her chin in your hands. His/her head should be lower than his/her body. In this position give four taps rapidly to his/her back, between the shoulder blades, with the heel of one hand.
 - If the obstruction is not removed, turn baby over, still supporting him/her on your thigh. The baby's head should still be lower than his/her body. With the baby face up, push lightly on his/her chest four times. The thrusts should be given with two fingers firmly on the chest. To find the right spot to press, trace an imaginary line between the nipples and place your fingers one finger's width below that line. Make sure you are pressing on the bone that runs between the ribs.
 - If the baby remains conscious, keep alternating four back taps and four chest thrusts until object is removed.
 - **Never** put your hand in the baby's mouth unless you can see the object, or you may push it farther down. If you can see it, remove the object.
 - If your baby stops breathing, you must perform CPR. If you are untrained, call the Emergency Service **(911 or a hospital emergency room)** and get instructions. After breathing stops, it takes less than four minutes for brain damage to occur.

17. Feeding Techniques

A good rule of thumb (in the first few weeks) is to feed the baby an ounce of formula for each hour since the last feeding. Warm refrigerated formula but don't use the microwave. Test temperature of the formula by sprinkling a few drops on the back of your hand. Always hold the baby with his/her head up and never prop the bottle. Keep the bottle tipped up so that milk fills the neck and nipple to prevent baby from swallowing air.

Burping baby is necessary after about 1/2 oz. This helps to get rid of air that the baby has swallowed while feeding or crying. Rub or pat him/her on the back to help get the air bubble out. Support his/her head with your hand. Try to stay an ounce ahead of baby's need by putting an ounce of extra formula in the bottle. Don't force formula because overfeeding can cause the baby to be irritable, to throw up, have diarrhea and eventually be overweight.

18. Actions Taken with Common Problems with Bottle Feeding

Check nipple holes every so often . If too large, may cause gagging, sputtering, and throwing up or may not give enough sucking satisfaction. If too small, may cause baby to become too tired (trying so hard to suck) and swallow too much air around the nipple. It should take about 20-30 minutes for a relaxed feeding. When the bottle is turned upside down, with formula at right temperature, milk should flow, without shaking, in a slow steady drip. If it gushes, discard nipple. If it trickles or gushes, discard nipple.

Newborn babies do a lot of spitting because they don't have a good suck and swallow reflex yet; this gets better with every day of life. Spitting that happens after these early days is more likely to happen because of an overly eager baby who gulps down the milk or the nipple hole is too big. More frequent burping and not bouncing the baby right after feedings can often help this. A tense or hyper atmosphere during feedings can also give baby an upset stomach and make them spit up. Call the doctor if the baby throws up several times or is green in color.

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