Newborn Care Instructions and Tips

Feeding

Whether you have chosen to breast or bottle feed, it is important to feed your infant often in the first few weeks. Healthy, full-term infants will feed as often as every hour to three hours during the day, and may go as long as 5 hours between feedings at night if he/she is gaining weight well. Infants give cues when they are hungry which may include rooting (turning toward you with mouth open), sucking on their hands, and/or crying. They often have days and nights confused, but this should improve after the first few weeks. Until then, try to keep the room dark and quiet at night, and bright during the day.

Breast fed infants should feed for 15-20 minutes each breast until they improve enough to become efficient. Bottle fed infants should use the lowest flow nipple available for the brand bottle you have chosen and gradually increase with age.

Newborn Jaundice

Newborn Jaundice (yellow tint to the skin) is common in the first couple of weeks of life. Jaundice is caused by a combination of dehydration and red blood cell turnover that a newborn’s liver is unable to process as quickly as an older child’s may. The most noticeable area to see yellowing is in the whites of the eyes. Though this is more common in breastfed infants, it is important to continue breastfeeding unless otherwise instructed by your doctor. Infants will rid the body of bilirubin (which causes this jaundice) through the liver and excrete it in bowel movements. Therefore, in the first couple of weeks it is important that infants have a bowel movement every day, especially if they are jaundiced. Jaundice is only dangerous at very high levels. The upper threshold of normal levels changes with age, so you may be asked to return to the office more often in the first couple of weeks so that this may be monitored closely. The bilirubin is easily checked with a small amount of blood which will be sent to the lab.

Basic Infant Care

Infant fingernails are paper thin, but very sharp. To prevent scratches, it is best to file the nails for the first few months of life. Infant fingernail clippers often clip delicate infant skin and are best avoided until at least 6 months of age.

There is no need to bathe your infant every day for the first few months of life. In fact, until the umbilical cord falls off (around 3 weeks of age), babies should only be sponge bathed using either no soap at all or a sensitive-skin non-fragrant soap. After the umbilical cord detaches, it is fine to use a baby bath allowing the infant to sit in the water.

Umbilical cord care is simple! You may clean the cord with ethyl alcohol once daily if it appears dirty, but otherwise it requires no special care. Please call the office (864-454-2670) if you notice redness or swelling surrounding the umbilicus.

Please be certain to wash all the infant’s clothes and linens in a fragrant-free detergent prior to wear. Brand new clothes contain dyes that can be irritating to your baby’s skin.

Infant skin often peels or appears dry in the first few weeks of life. It is not necessary to use lotion at this time. The only areas that may need additional moisture are the wrists and tops of the ankles. These areas tend to crack, but this can be avoided with a small amount of petroleum jelly applied to these areas.

Bowel Movements/Urine Output

Infants should have at least one bowel movement per day for the first several days of life. Over several weeks they tend to slow down significantly. They may begin having one bowel movement per feeding and then slow to as infrequent as one every five days. This pattern is still considered normal as long as the most recent bowel movement was soft. Breastfed infants classically have yellow, runny, seedy stools. Bottle-fed infants will typically have a pasty texture. Normal colors include yellow, brown and/or green. They often seem to strain or even cry out during a bowel movement. As long as the bowel movement remains soft, this is normal and will improve with time. Infants should have one wet diaper the first day of life, two the second day and three the third day and every day thereafter. If your baby isn’t voiding this much, please notify the office so that hydration may be accessed.
**Illness**

Signs of illness can include, but are not limited to, refusal to eat, vomiting (not spit up—but vomiting) or crying inconsolably. If you become concerned that your baby is becoming ill, take a rectal temperature. Any temperature <97 or >100.4 rectally is a medical emergency in an infant <2 months. Please call the office immediately. This includes hours that the office is closed. Do not wait until the next day.

Until your infant is at least 2 months old, it is best to keep him or her away from large crowds in order to prevent illness. Friends and family should wash their hands prior to touching or holding the baby. It is fine if you wish to take walks with your infant or eat out as long as you patron establishments during off-peak hours.

**Colic**

Colic is most common in the evening hours from 3-weeks to 3-months of age. It usually involves a fussy period that resolves within a few hours. No one knows the cause of colic. It is appropriate to try gas drops if you wish. It is important to distinguish colic from reflux. Reflux is fussiness during or after feeding. You may see back-arching or spit-ups during this period as well. Reflux can happen during the day as well as night. If you believe your infant may be suffering with reflux, it is important to make an appointment to have your infant evaluated.

**Normal Findings**

Spit-up, hiccups and sneezing are normal. Mild congestion is also common. Infants often have a breathing pattern in which they breathe rapidly and shallowly, pause for a few seconds and then breathe slowly and deeply. This is normal in newborns.

**Circumcision Care**

Circumcisions take around a week to heal. Use petroleum jelly during that time on the wound with every diaper change. A couple of days after the circumcision, you may begin to gently retract the skin from around the glans penis one time daily to prevent adhesions.

**SIDS Prevention**

The most important step in Sudden Infant Death Syndrome prevention is to place your infant on his or her back to sleep. This has been proven to decrease the risk of SIDS by 50%. Another important step is to make sure your infant sleeps in a crib or bassinet with a firm mattress and only a tightly fitted sheet. No blankets, pillows, bumper pads or toys permitted in the crib when the baby is sleeping. Dress your baby a layer warmer than you would dress yourself in order to account for the lack of a blanket at night. Ideal room temperature is 68-72 degrees. Do not allow your infant to get too warm—as this is a risk factor also. Never allow anyone to smoke around your infant. We definitely DO NOT recommend co-sleeping with your baby—this includes in a bed, recliner, chair, sofa, etc.

**Books and Websites we Recommend**

*Caring for your Baby and Young Childs—Birth to Age 5*--American Academy of Pediatrics, Steven Shelow, MD

www.aap.org

**Never Hesitate to Call Us!!**

864-454-2670

If you ever have a question or concern, don’t hesitate to call our office. Someone will be available to offer an appointment, advice---or just an ear to listen!!! If you find you have a concern during times other than our regular office hours (8:30 am – 7:00 pm) – the Answering Service will contact a Pediatric On-Call Nurse affiliated with our office.