



Cornerstone Pediatrics

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2 Week Well Child

Name: _____ Date: _____

Weight: _____ *lbs* _____ *oz* Length: _____ *in* Head Circumference: _____ *cm*

Age: _____ Next Scheduled Appointment: _____

General Nutrition:

- For the first 6 months a simple diet of breastfeeding or iron-fortified formula is all your baby needs. Iron is needed to make new red blood cells helping to prevent anemia.
- There is no need to boil the water for the formula, unless you use well water.
- Your baby may have a routine of feeding every 2-4 hours, but some babies take longer to establish consistency. Keep nighttime feeding quiet and light low to encourage sleeping longer. The stomach holds about 4 ounces and empties every 3-4 hours.
- If your baby is wetting 6-8 diapers a day and gaining weight appropriately the babies feeding is adequate.
- Solid foods, juices and cow's milk given too early can lead to allergies, anemia and poor nutrition.
- Babies do not need extra water until at least 6 months of age and only in the summer. They are highly sensitive to water and can get water overloaded very easily.
- Babies should not be laid flat on their backs while feeding and bottles should always be held by a caregiver and not propped up.
- Never heat formula or breast milk in the microwave because the milk will heat unevenly and may burn your baby.
- Many babies spit up a portion of each feeding. As long as it is a small amount and the baby gains weight, this is harmless and usually ends by 6-9 months.
- Most babies do not need vitamin supplements.

Breastfeeding:

- Breast milk can pass along factors that help fight infection.
- Many medications can pass through breast milk, be sure to ask your doctor for safe choices.
- Breast milk is digested faster than formula usually leading to more frequent feedings such as 8-12 feedings a day.
- Babies should be burped every 5-10 minutes during feeding and after each feeding.
- Freshly expressed breast milk is good up to 48 hours if refrigerated and 3-4 months in a refrigerator freezer. Thawed milk may be refrigerated for up to 24 hours. Breast milk should never be refrozen. Avoid over heating or boiling breast milk as it can harm the proteins in the milk.
- If you are planning to use bottles occasionally, wait to introduce until after breastfeeding is well established. Although they may take bottles well at first, breastfed babies between 4-6 weeks may start refusing to bottle feed. If you plan to give your breastfed baby some bottles long term, offer

a bottle once a day. Increase the number if you see reluctance and continue bottles until the reluctance is overcome.

Formula Feeding:

- Formula is supplied as ready-to-feed, concentrate and powder. Be careful to follow the directions exactly when preparing the different formulas. Never dilute formula more than instructed. Prepared formula is good for up to 24 hours refrigerated.
- Test the temperature of heated formula by shaking well and dropping a few drops on the inside of your wrist. Room temperature formula does not need to be heated.
- Do not save formula from used bottles because bacteria from your baby's mouth may have mixed during feeding.
- Bottle fed babies take about 6-8 feedings a day. Average formula intake in 18-22 ounces a day for one week old babies then 22-26 ounces for one month old babies.
- Babies should be burped every 1-2 ounces during feeding and after each feeding.
- Let your baby decide when he/she is done feeding. Never force feed to finish what formula you have prepared. If your baby begins to finish the prepared amount, add an extra ½ to 1 ounce to the next feeding.

Weight:

- Your baby may initially lose up to 5-10% of their birth weight but should regain by 10-14 days.
- After initial weight loss your baby will gain on average ½ -1 ounce per day or about 2 pounds a month until 6 months.

Length:

- Your baby's length will increase 9-11 inches in the first 12 months.
- In the first 6 months length increases by about an inch a month.

Head Circumference:

- Head circumference increases by 2 cm a month from birth to 3 months.

Sleep:

- **Back to Sleep-** Make sure your baby is placed on his/her back on a firm mattress for sleeping. This reduces the risk of Sudden Infant Death Syndrome or SIDS.
- Never place pillows, toys or blankets under or around your baby.
- Place your baby in the crib when drowsy, before he/she falls asleep completely.
- Your baby may still sleep much of the day but during waking hours he/she is definitely becoming more alert and noticing his/her surroundings. Many babies do not sleep through the night for several months. By one month, a 3-5 hour sleep period may have shifted to the night and the baby is mostly sleeping between night feeds.

Bowel Movements (Stools):

- Stools are commonly yellow, seedy with curds of undigested milk, fairly runny, and have a musty odor.
- Around the third day after birth your baby's stool may be greenish brown to yellow brown, less sticky containing some milk curds.
- Occasionally the stool may be green. If your baby is content and gaining weight this is not an indication of trouble.
- Babies may show dramatic facial expressions, pass gas, strain and draw their legs up when passing stools. This is normal as long as the stools are soft and there is no pain. However, if your child passes small, hard, dry pellets, this might be true constipation.
- The number of stools decline after the age of 1 month from after most feedings to a variable number of stools per day. Occasionally even 1 large stool every 2-3 days. More important than

the number of stools is your baby's eagerness to eat, comfort, ability to be consoled and proper weight gain.

- **Constipation:**
 - Constipation virtually never occurs in **breastfed babies** drinking an adequate amount of milk. If your breastfed one-month old infant is producing less than one stool every 3 days, then the milk intake may not be sufficient. We should check the weight and see how breastfeeding is going.
 - If your baby is **formula-fed** and seems fine but is passing stools less than once every 3 days, then you may stimulate passing stool by inserting an infant glycerin suppository into your baby's anus. Call us if problems persist.
- **Breastfed Stools-** Yellow or golden, mild smelling and pasty in consistency resembling pea soup.
- **Bottle-fed Stools** – Pale yellow to light brown, firm and somewhat more offensive in odor.

Gas:

- All babies pass a lot of gas and do so noisily, but this does not necessarily mean that gas is giving the baby discomfort.
- When your baby cries and draws up his/her knees, this is not a sign of gas- it is just what a baby does when he/she cries.
- Swallowed air is mostly burped back by the baby, just as in older children and adults and does not cause pain.
- How to burp your baby:
 - Hold baby on your chest, upright and stroke or pat baby's back gently. Anything firmer is unnecessary and unpleasant for the baby.
 - Keep your burping sessions to shorter than 5 minutes (2 minutes usually is fine).
 - Not all babies will produce a burp after each feeding. Burping is really a moment for a peaceful, upright cuddle at the end of a satisfying feed.

Crying:

- At age 2 weeks, cries are almost always the sign of hunger. First offer feeding for crying babies.
- Some babies, usually older than 2 weeks, will become fussy in response to certain foods in the breastfeeding mother's diet. If you notice this try to avoid those foods for a week or two and try again. If you suspect a dietary cause of fussiness, the most common causes are cow's milk, citrus and tomatoes.
- When breastfeeding, you may eat or drink whatever you wish-all in moderation. Remember that alcohol and caffeine passes through breast milk. Onions and garlic may affect taste of breast milk causing your baby to protest. When a baby reacts negatively it will usually be when mom has ingested a lot of an offending product.
- Contact your Lactation Consultant if you have further questions about your diet and breastfeeding.
- By 4 weeks of age, your baby's cry can have different meanings as below:
 - Examine your baby's fingers /toes for any hair or thread that might have become wrapped around them.
 - Swaddling can comfort newborns, but less comforting after age 2-4 weeks as babies need to wiggle more.
 - Some babies need to work off steam at the end of the day, and crying is the only way they know to reduce tension. Try to hold your baby on your shoulder, rock your baby or use an infant swing, walk with the baby, play monotonous soothing noises (music, vacuum cleaner or fan), go for a car ride or a stroll.
 - If breastfeeding is well established and weight gain assured by 3 weeks of age, you may offer a pacifier.
 - Babies sometime get over-stimulated or over-tired and just need to be alone in their bed or infant seat for 10-15 minutes.

- At times your baby will cry no matter what you do. You need not feel obligated to stop the baby's crying. Stay close to the baby and stay calm. Never shake your baby!
- Quite a bit of fussing in the first six weeks simply indicates the baby's need to be held. Research shows that the more you hold and respond to your newborn, the more secure the older child will be – a lovely payback for those hours cuddling together.
- Crying generally increases until 6 to 8 weeks of age when babies are more adept at calming themselves.

Colic:

- Colicky babies may be quite fussy and cry for several hours at a time for no apparent reason, typically starting at age 2 weeks or older and resolving around age 12 weeks.
- The cause of colic is unknown. Some parents think it is from "indigestion" but the evidence here is not clear. There is no "fix" for colic. But babies outgrow it and it causes no harm to the baby.
- Fortunately, true colic is rare. Most fussing is caused by hunger, so always try feeding your fussy baby before anything else.
- You might be surprised how much colic turns out to be hunger. A hungry baby is very hard to sooth.

Development:

Gross Motor:

- Gradually developing better head control. Your baby will be able to lift his/her head off the bed when lying on stomach and will briefly move head away when held against your shoulder. In the next few weeks he/she will be able to turn his/her head from side-to-side when lying on the tummy.

Fine Motor:

- Still has automatic grasp reflex when objects touch his/her hand.

Oral Motor:

- Suckling tongue movements with extension and retraction of the tongue. Up and down jaw movements. Low approximations of lips.

Speech and Language:

- May be developing different cries for pain, hunger and fatigue, although these can be hard for parents to distinguish.
- Smiles, coos, and gurgles to voice by 2 months of age.
- Startle to loud sounds.

Social:

- By 1 month, your baby watches and quiets down as others speak to him/her. Baby opens and closes mouth as others speak and bobs head in response.

Physical:

- Many babies have a face rash on and off between 3-12 weeks that resolves on its own. This is from the effects of waning levels of maternal hormones that accumulated in the baby's body during the pregnancy.
- The umbilical cord should be off by one month.
- If circumcised, the penis will be fully healed by 2-4 weeks of age.
- **Cradle cap** – a build-up of skin tissue on the scalp may develop. It will eventually resolve on its own. If you wish, you can gently rub it off with a soft cloth during shampooing.

Play and Stimulation:

- It is important to play with your baby! A lot of your baby's pleasure comes from people interacting with them, such as when they are held, rocked, sung to and talked to.
- Babies enjoy security and comfort of a front pack carrier, which also leaves your hands free.

- Babies enjoy soft music and soft toys with bright colors and patterns. They like to watch mobiles with highly contrasting colors and patterns. Make sure and mount the mobiles securely about 12 to 24 inches away from their face.
- By one month of age give your baby some time on his/her tummy each day while awake and while you are watching carefully to help your baby's development.

Safety:

- **Crying and Shaking** – Never shake your baby. Shaking can badly damage your baby's brain. Put your baby in a safe place, like the crib or playpen and give yourself a time-out.
- **Choking** – Keep plastic bags, buttons, and other small objects out of your baby's crib and out of reach.
- **Burns** – Always check your baby's bath water temperature with your hand before placing your baby in it. Your water heater should not heat water about 120° F or 49° C. Use your smoke alarms and check it monthly. Protect your baby from damaging rays of sun. Keep your baby out of the sun completely, use shade, a brimmed hat and protective clothing. Do not use sunscreen on infants younger than 6 months.
- **Falls or injuries** – Even newborns will wiggle, move and fall. Never leave your baby unattended on the changing table, bed or sofa. Always keep the crib rails up when your baby is in the crib. The bars should be no more than 2 3/8 inches apart or the width of a regular soda can. Place washcloths or non-slip barrier on the bottom of the bathtub or sink to keep your baby from slipping. Avoid hanging toys or pacifiers with elastic, string or ribbon because they can strangle your baby. If using a string to attach your baby's pacifier to their clothes, make sure the string is less than 3 inches.
- **Car accidents** – Your baby should always ride in an approved properly installed infant car seat even on short trips. The car seat should face the rear of the vehicle until your child is 20 pounds and 1 year old. The safest place is in the center of the second or back seat. Do not place the car seat in the front of the vehicle. Never leave you baby alone in the car.
- **Smoke** – Second hand smoke can cause a greater risk of ear infections, chronic stuffy nose and respiratory infection. Second hand smoke lingers on clothes and everywhere the person has smoked such as the car or house. Falling ashes can burn your baby. Never smoke while holding your baby. For you baby's health, if you smoke, consider quitting.
- Make sure an adult is always with your baby when around young siblings or pets.
- Support your baby's head and avoid jiggling or shaking.
- Consider taking an infant CPR class through your local hospital or Red Cross.
- If there are guns in your home, always lock and keep unloaded and out of reach. Lock ammunition separately from firearms. Use safety locks. Make sure people, you and your children visit do the same.

Immunizations:

- Hepatitis B vaccine #1 (if not given in the hospital).

Lab Tests:

- Second newborn screen

Maintaining Body Temperature:

- In general, babies need one more layer of clothing than an older child or adult needs to maintain normal body temperature. Avoid overheating.

Fever:

- A fever is considered a rectal temperature greater than 100.4° F (38° C) rectally.
- The only reliable way to take your baby's temperature is rectally.
- Put a small amount of Vaseline™ on the end of the thermometer.

- Lay your baby on his stomach, with one hand on his bottom and your arm resting lightly on his back to keep him from rolling. Holding the thermometer in the other hand, gently insert the bulb (the silver part) into your child's rectum. You only need to insert it far enough to cover the bulb.
- After it stops, remove the thermometer and read the temperature.
- Make sure you clean the thermometer well after each use.
- If your baby has an elevated rectal temperature first try to undress your baby leaving only the diaper and recheck in ten minutes. If remains elevated you need to give us a call for additional guidance.

If your baby's temperature is over 100.4° F (38° C) rectally, please call your doctor.

Colds:

- Babies often sneeze, but this is not necessarily a sign of a cold. However, if your baby sounds congested, coughs and has some nasal drainage, a cold may have developed. Most colds are mild and don't interfere with normal feedings and sleep.
- Comfort measures include: elevate the head of the crib by adjusting crib (do not place pillow in crib to elevate); run cool-mist vaporizer and perform nasal toilet using bulb syringe aspirator.
 - *Nasal toilet* – Add 2-3 saline drops in each nostril prior to suctioning. Saline drops will help to loosen the mucus assisting with clearing secretions out of the nose. Saline drops can be bought over –the-counter or can be made by adding 1 teaspoon of salt to one cup of room temperature water.
- Avoid using decongestants.

Parenting Tips:

- Normal babies hiccup, sneeze, startle and have an occasional throw-up of a single feed.
- Hold, cuddle, sing and talk to your baby. Attend to all their needs. They cannot be spoiled at this age.
- Babies soothe themselves by sucking. Your baby's thumb, finger or a pacifier can help to satisfy this need. Select a pacifier constructed in one piece. Never tie the pacifier to the face or neck.
- Your baby's sleep-wake cycle may be confusing and tiring. Try to nap when your baby does.
- Remember to take time for yourself. Arrange to spend some time alone with your other loved ones. Each parent should spend some time alone with the baby each day. Accept others' help with the baby. This will allow you to spend some special time alone with your partner, older siblings and friends.
- Be careful when leaving your baby alone around young siblings.
- If you smoke, please try (again) to quit. It isn't easy, but you now have a brand new reason to stay healthy.
- Becoming a parent for the first time or adding a new member to your family is a huge challenge and huge change in your life. If you find yourself depressed or sad or over whelmed, please let your doctor or your baby's doctor know. We can help. For individual counseling, call your mental health provider.

Skin Care:

- Occasionally, a baby will have some dry skin. This can be treated with an emollient (cream or ointment that keeps the skin moisturized) such as Eucerin™ or Aquaphor™.

Call the office if your baby:

- Has a rectal temperature over 100.4° F (38° C) rectally.
- Coughing frequently.
- Refusing to eat.
- Does not look well or is unusually sleepy or inconsolable.

Important Phone Numbers:

- Cornerstone Pediatrics- (817) 596-3531
- Weatherford Regional Medical Center's Emergency Department – (817) 599-1111
- Cook Children's Emergency Department- (682) 885-4093
- Parker County Urgent Care- (817) 341-3016
- Tri Cities Urgent Care – (817) 984-7120
- Smoking Cessation- (877) 937-7848
- Poison Control- (800) 222-1222

Next Visit:

- 2 Month Well Child Check
- Schedule your appointment 3-6 weeks in advance.
- Arrive 15 minutes before you appointment to update chart.
- Remember to bring your shot record with you for the exam. The immunizations your child will receive at the 2 month visit will include:
 - DTaP – Diphtheria, tetanus and acellular pertussis
 - IPV – Inactivated poliovirus
 - Hib – Haemophilus influenza type B
 - PCV – Pneumococcal
 - RotaTeq – optiona, but recommended

If you have any concerns about your baby's health, please call. This handout is meant to be a guideline, not a substitute for the care of a competent health care provider. Please do not give any medicines without talking to your doctor first. We are happy to help you in any way we can. Immunizations Schedule is subject to change based on the recommendations of the Committee on Infectious Diseases.