



Cornerstone Pediatrics

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## 4 Month Well Child

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

Weight: \_\_\_\_\_ *lbs* \_\_\_\_\_ *oz* Length: \_\_\_\_\_ *in* Head Circumference: \_\_\_\_\_ *cm*

Age: \_\_\_\_\_ Next Scheduled Appointment: \_\_\_\_\_

### General Nutrition:

- Breast milk or iron-fortified formula continues to be your baby's main source of nutrition. Cow's milk given too early can lead to allergies, anemia and poor nutrition. Introduction of solid foods should be postponed until 6 months to help reduce the risk of allergies unless otherwise recommended at the well child check.
- Breast feed or bottle feed on demand.
- Babies should not be laid flat on their backs while feeding and bottles should always be held by a caregiver and not propped up. These can lead to choking and increased ear infections.
- Always cuddle baby during feedings.
- Babies will need fluoride by 6 months. Check whether the water you use is fluoridated. We will prescribe a fluoride supplement at six months if your household water is not fluoridated.
- Please do not give your baby honey during the first year. Honey can contain harmful bacteria that infants cannot process.
- Please do not give tomatoes or citrus until after 12 months of age.
- Please do not give hen eggs until 24 months of age.
- Please do not give peanuts, tree nuts, fish or seafood until 36 months of age.
- If your baby is wetting 6-8 diapers a day and gaining weight appropriately the babies feeding is adequate.
- 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.
- 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:

- Breastfed infants are simply fed as much as they want. Breastfed babies are getting enough milk if they are gaining weight and wetting 6 or more diapers a day.
- At 6 to 8 weeks your baby may experience a growth spurt. During this time do not get discouraged. Follow your infant's cues for feeding. Extra sucking will increase the milk supply sufficiently to meet the growing infant's needs. 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.
- 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 refrigerate 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.
- 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 passed through breast milk. Onions and garlic may affect the 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.

### **Formula Feeding:**

- Will take anywhere from 29 to 32 ounces a day for the next couple of months.
- 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.
- 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.

### **Solids:**

- Readiness for solids should be determined based on the infant's ability to sit unassisted, presence of hand to mouth, interest in food and decreased tongue thrust response.
- Feed solids with a spoon, never put in bottle. Oral development is a prerequisite for speech and among the most complex movements that your child will master. Throughout infancy oral development progresses from sucking and rooting to rhythmic biting and chewing.
- Start with iron-fortified rice cereal. Begin with 1 Tbsp. mixed with 2-4 Tbsp. of breast milk or formula. Build up to 3-4 Tbsp. 2 times a day by six months. As your baby gets used to the consistency of the cereal you can decrease the amount of breast milk or formula.
- Feeding should be enjoyable for parent and baby. The best time to start is often in the mid-morning. When your baby is hungry but not ravenous.
- Add new foods slowly- one new food a week. Start by feeding one new food for 3 to 4 days. Watch for rash, vomiting, or diarrhea with each new food. If any of these symptoms occur, stop the new food for one month and then try again.
- Start with single vegetables first then add in single fruits. After 6 months you can introduce meats.
- You do not have to use processed baby foods. You can use regular foods that have been pureed. You can freeze small portions of pureed fresh foods in ice cube trays for several months. Do not

refrigerate or re-freeze purees for future use. Wash fresh fruits and vegetables thoroughly with soap and water to remove pesticides. Organic foods do avoid pesticides but must be washed thoroughly to remove dirt and bacteria.

- Avoid empty calories such as puddings, punches, soft drinks and desserts.
- Please do not give honey, tomatoes, or citrus until after 12 months of age.
- Please do not give hen eggs until 24 months of age.
- Please do not give peanuts, tree nuts, fish or seafood until 36 months of age.
- It is common for babies to refuse food, offer a few more times or again at the next meal.

#### **Weight:**

- Your baby should continue to gain ½ to 1 ounce a day or about 2 pounds a month until 6 months. Birth weight should double between 4 to 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 1 inch a month.

#### **Head Circumference:**

- Head circumference will increase 1 cm a month from 4 to 6 months.

#### **Sleep:**

- Babies at this age show a wide variation in night sleep patterns. Some will sleep 8 or more hours other 6 hours and some will continue to wake every 3 to 4 hours. On average babies sleep 12 to 15 hours a day.
- **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.
- If possible, have your baby sleep in a crib in a room separate from yours.
- Establish a nighttime routine to help your baby learn sleep time.
- Babies often awake during the night at this age. If your baby awakens and cries, check for safety and comfort. Try to limit stimulation. Avoid picking up your baby up, feeding, playing or taking him/her to your bed. Babies at this age generally do not need to eat during the night.
- It is important for your baby to learn how to put him/herself back to sleep.

#### **Bowel Movements (Stools):**

- Consistency and color of stool will change and vary as new solid foods are introduced.
- 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 you 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.
- If you notice your baby has not had a stool in 3 to 4 days you can try to give 2-4 ounces of pear or apple juice mixed 1:1 with water once a day.
- **Constipation:**
  - Constipation virtually never occurs in **breastfed babies** drinking an adequate amount of milk. If your breastfed 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 more than a week or two.

**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:**

- Crying periods are less frequent now, when occur they are commonly from a minor problem that is easily resolved. This chronic "good mood" will persist for the next six months or so. Enjoy!
- Many infants have fussy periods in the late evening that may last 1 to 3 hours. Especially if no regular nap schedule is established, fussiness may increase.

**Development:**

**Gross Motor:**

- Your baby should start to roll over from front to back then back to front, turn head in all directions, lift head 90 degrees when lying on stomach or does push-ups if pulled to standing position. Should have mild head lag, if at all. Your baby should start to lift legs and bring them to their mouths. Able to bear full weight when standing and start to bounce up and down in their parent's lap.

**Fine Motor:**

- Grasp and hold rattle for more than a moment, pulls at clothes, plays with hands, hands lie open while at rest, often brings hands and many objects into the mouth. Later on your baby will transfer a toy from hand to hand.

**Oral Motor:**

- Decreased tongue thrusting indicating readiness for solid food.

**Speech and Language:**

- Begins to babble with strings of syllable-like vocalizations, laughs, squeals and gurgles. What fun!

**Vision:**

- More closely approximates that of an adult. Can see objects more clearly now. Eyes rarely look "crossed" anymore and can follow objects throughout 180 degrees. Encourage your baby to look at him/herself in a non-breakable mirror.

**Social:**

- Vocalizes moods, prefers familiar people and toys. May be displeased and cry when parent moves away. Initiates social contact by smiling and vocalizing. Smiles at caregivers and follow around the environment during activity.
- Should promptly look at objects in front of them facilitating more complex social interactions.
- Will start to recognize parents and responding to his/her needs.
- Distraction of immediate gratification is possible by talking, playing or using other social interaction to distract your baby.

### **Teething:**

- Teething may begin at this age though it can range from 1-12 months. It is normal for babies to drool even before teething starts. Teething may cause low-grade fevers, looser stools and fussiness. It does not cause high fever or diarrhea. Tips- offer frozen teething rings, washcloths or Tylenol™ for comfort.
- Clean your baby's teeth with a soft brush or cloth.

### **Play and Stimulation:**

- Hold, cuddle, sing, talk and read to your baby. Attend to all their needs. When awake, the baby should be part of the action of the family.
- High-contrast patterns are still the favorite. An unbreakable mirror attached to the inside of the crib shows babies the most amazing miracle they will ever see: themselves! Place the object about 12 inches from the baby and change frequently.
- Textured toys that make sounds, musical toys and simple interactive games such as peek-a-boo.
- Place your baby on his/her tummy with bright safe toys when awake to help make muscles strong. Continue to play "peek-a-boo" and "pat-a-cake".
- You can help your baby develop good muscle control by supporting the hips and lower body so he can sit upright. He may tire quickly at first, but later he will get stronger. Another good exercise is to hold your baby upright under the arms so he/she can support some of his/her weight on the legs.

### **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, powder, baby cleaners and other small objects out of your baby's crib and out of reach. Inspect all toys and throw away any which are small enough to choke on, are worn, have sharp edges, breakable or removable edges. Plastic bags, wrappers or balloons can cause suffocation. Toys should be at least 1.5 inches in diameter. Avoid small hard foods such as popcorn, peanuts and carrot sticks.
- **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 above 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** – Most babies will be rolling so be careful and watch your baby. Never leave your baby unattended on the changing table, bed or sofa. Place car seat or infant seat low to the ground and always have your infant buckled. Avoid lifting or swinging your child by the arms. This can dislocate the elbows. 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. Walkers are dangerous and are not recommended by the American Academy of Pediatrics. Walkers can lead to motor developmental delays. A stationary substitute or play saucer is fine. Place a gate at the top and bottom of any stairs in your home.
- **Crib Safety** – 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. Keep the crib away from windows and curtain cords. Remove mobiles when your baby can sit up. Lower the mattress as your baby grows.
- **Car Seat/ 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 your 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 your baby's health if you smoke consider quitting.
- **Child proof your house:** Do a search of your home on your hands and knees looking for potential hazards to your baby. Place safety covers on all unused electrical outlets. Put cords, plastic bags, small objects, household cleaners and household plants out of reach.
- Dog water bowls are potential drowning spots for your baby. Make sure they are out of reach.
- Make sure an adult is always with your baby when around young siblings or pets.
- Consider taking an infant CPR class through your local hospital or Red Cross.

#### **Immunizations:**

- DTaP- Diphtheria, tetanus and acellular pertussis
- IPV – Inactivated poliovirus
- Hib – Haemophilus influenza type B
- PCV – Pneumococcal
- Rota Teq – optional
  - After the immunizations your baby may develop mild fever, irritability, sleepiness, or leg swelling around injection site. Acetaminophen (Tylenol™ Infant Drops) may be used every 4 hours as needed. Give the dose based on your child's weight: check the bottle for proper dose. Call if symptoms are severe or last longer than 48 hours. If your child temperature is above 102° F or your baby does not look well he/she should be evaluated.

#### **Lab tests:**

- None unless warranted by exam.

#### **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:**

- Take your baby's temperature under the arm. If elevated do a rectal temperature for confirmation.
- A fever is considered a rectal temperature greater than 100.5° F.
- To take a rectal temperature:
  - 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 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.

#### **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 crib by adjusting crib (do not place pillow in crib to elevate); run cool-mist vaporizer and performing nasal toilet using bulb syringe aspirator.
  - **Nasal toilet** – Add 2-3 saline drops in each nostril prior to suctioning. Saline drops will help 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:**

- 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.
- To encourage your baby to sleep more at night, keep the nighttime interactions brief and dull. Play with our baby and have a great time, but try to remember playing with him/her (bouncing on knee, tickling, etc.) late in the evening will stimulate your baby. While your baby can sleep during the day, most adults cannot. Stop wild play well before bedtime and help your baby to calm down by singing, cuddling and other quiet play. Try to schedule a routine bedtime for your baby.
- 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.
- Many normal babies will engage in thumb sucking, ear pulling, hair pulling and head banging.
- 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 challenge and huge change in your life. If you find yourself depressed, sad or overwhelmed, 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 emollient (cream or ointment that keeps the skin moisturized) such as Eucerin™ or Aquaphor™.

**Call the office if your baby:**

- Has a fever. Under 3 months, for all rectal temperatures over 100.4° F. Over 3 months, for temperatures over 101-102° F.
- Coughing frequently.
- Refusing to eat.
- Vomits persistently or excessively.
- Falls hitting his/her head causes him/her to pass out, vomit or behave unusually.
- 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
- Tri Cities Urgent Care – (817) 984-7120
- Parker County Urgent Care- (817) 341-3016
- Smoking Cessation- (877) 937-7848
- Poison Control – (800) 222-1222

**Next Visit:**

- 6 Month Well Child Check
- Schedule your appointment 3-6 weeks in advance.
- Arrive 15 minutes before your appointment to update chart.

- Remember to bring your shot record with you for the exam. The immunizations your child will receive at the 6 month visit will include:
  - DTaP – Diptheria, tetanus and acellular pertussis
  - Hib – Haemophilus influenza type B
  - PCV – Pneumococcal
  - Rota Teq – optional

**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. Immunization Schedule is subject to change based on the recommendations of the Committee on Infectious Diseases.**