



320 Peninsula Blvd. Cedarhurst, N.Y. 11516
Phone: (516)569-2323 Fax: (516)569-4131

BABY CARE

BATHING

It's good to have a fairly regular time for bathing your infant. The room should be warm, with no drafts on the baby. Keep bathing supplies together to save yourself steps. Until the navel (and circumcision) is healed, wash him or her by sponging. After healing you can use a tub or bathinette. Use any mild soap (ie, Dove, Aquaphor/Eucerin baby wash) warm water and a soft cloth to bathe your baby. It is generally NOT necessary to bathe your baby every day. In fact, daily bathing can actually dry out a baby's skin.

Ears: Do not use "Q-tips" inside your infant's ears. Wax will come out by itself due to chewing, sucking and swallowing movements of the jaw.

Nails: Use a fingernail clipper or scissors for trimming. This may be necessary 2 or 3 times a week, since your baby's nails will grow very quickly. You may also file your baby's nails if you prefer.

Umbilical cord: Until the cord falls off and the navel heals, it must be kept clean and dry. Roll the front of the diaper down so that the cord is exposed to air and is not covered by a wet diaper. You do not NEED to clean the umbilical cord, but if you choose to, use a cotton ball soaked with alcohol to clean the cord, especially the base, (where it attaches to the skin) once or twice a day. Before and after it falls off, the cord may bleed a bit. That is perfectly normal.

Circumcision: This is a personal decision. Your personal and family preference is the most important factor in deciding whether or not to circumcise. Current scientific evidence, however, is beginning to suggest that circumcision may reduce the incidence of urinary tract infections. However, the risk of these infections is small and the decision regarding circumcision remains more personal than scientific.

DIAPER HYGIENE

Use a soft cloth with warm, soapy water for routine cleansing of the diaper area. "Baby Wipes" are also ok to use. Make sure any Baby Wipes you use are Unscented and Alcohol-free. A good basic diaper cream is zinc oxide (generic or Desitin, Balmex, Triple Paste, etc.) which can be used as a good protectant after thorough cleansing.

Dress your baby inside or outside of the house the same way you would dress yourself. The incorrect tendency is to overdress. **The same amount of clothing that you feel comfortable wearing is what your baby should wear.** The other rule of thumb is what your mother tells you to put on divided by three.

Never judge a baby's temperature by testing his hands or feet. His circulation is too immature for that. Feel your infant's neck or chest to gauge whether he is too hot or cold. Your home's temperature can be kept exactly at the same level as you would keep it for yourself. You do not have to heat the baby's room more warmly than you would for your own comfort. During winter, an ambient temperature of 65-70 degrees is perfectly acceptable. On hot, humid days, a fan or air conditioning is fine.

SHOES

Shoes are unnecessary until the baby starts to walk well. Even then, they are only needed for protection. Socks or pajamas are enough warmth. Inexpensive, but well fitting canvas sneakers are ideal. If you purchase expensive shoes for infants that allegedly provide "support", the only thing you are supporting are the shoe company's profits.

TAKING YOUR BABY OUTSIDE

Fresh air is wonderful for babies. We want you to go outside with your baby as soon as you can comfortably walk. Dress the baby appropriately (see the above section); but avoid crowds and sick people. **A baby's immune system is not fully developed until 2 to 3 months of age.** The problem is that infections cannot be localized and tend to spread rapidly throughout the entire body. Because of this, infants at this age with true infections require hospitalization, spinal taps, IVs and a host of other less than pleasant but necessary interventions. Therefore it is important to avoid crowds and sick people for the first three months especially. Anyone who is ill should not come near the infant. Anyone who handles the newborn should wash their hands well with soap and water.

CARS

Your automobile is the single most dangerous thing in your baby's life. She is significantly more likely to suffer serious or fatal injury there than from any illness or childhood disease. The baby is not safe in your lap or your arms. She is not safe in a flimsy plastic infant seat. She is safe only in a crash tested infant car seat. We will be happy to provide you with a list to choose from. It is currently against NYS law to have an infant (or child less than 4) in your car unless she is restrained in such a carrier. If you care about your infant's health, you will have one in the car awaiting her first trip home.

Older children should be placed in booster seats, so that they are tall enough to be safe in a shoulder harness type of seatbelt. The lap belt must be over the hips, not the stomach. The harness must be over the collarbone, not the neck or face. Children up to age 8-9 years, depending on size, will still need a booster seat. They are not safe in a standard shoulder harness unless they are tall enough. Children less than 12 years should only sit in rear seats.

SIGNS OF ILLNESS

A baby cannot tell you if he's sick or something hurts. Objective findings are difficult to come by. Three very good signs to look for are:

- Appetite change
- Personality change
- A rectal temperature more than 100.4.

Please let us know if any of these develop.

COMMON ANXIETIES:

FUSSY PERIODS

Your baby is 2 weeks old. You've fed him, bathed him, cuddled him, changed him and put him to sleep. You sit down to dinner, raise that first forkful of food to your lips and he starts crying. You go to him, soothe him and two hours later he's still fussing. He settles down, but the same thing recurs the next day and the next.

This is the normal fussy period. It begins at two weeks of age and ends at about three months. The reasons for it are unclear. The important thing to remember, however, is that this is very normal. Every infant goes through it to one degree or another.

When this happens, try to comfort and soothe him. **A baby of this age cannot be spoiled.** The more he is held, the closer he feels to you, the more skin to skin contact he has with you, the better off he and you will be.

STRAINING

Every infant occasionally seems to have difficulty having a bowel movement. They get "beet red"; they cry and grunt. They appear extremely uncomfortable, and it seems to go on for hours. They finally pass a soft "mushy" stool. Why are they so uncomfortable?

Passing a bowel movement is a learned process. We as adults have learned how to simultaneously push with our stomach muscles and to relax our rectums. A baby's tendency is to push with his stomach muscles but to tense his rectum shut. Until he learns to push and relax at the same time, straining is inevitable. Avoid trying to intervene by stimulating his rectum or giving suppositories. As long as his stool comes out soft, straining is very normal.

BOWEL MOVEMENTS

There is no "right" number of movements a baby must have per day. Once the mother's milk is in, breast-fed babies tend to have anywhere from 3 to 7 watery, yellow movements per day. Breast milk stools decrease in frequency at one to three months of age. At that age some breast-fed infants only pass one soft liquid stool per day (or less!).

An infant is constipated only if the stools are both infrequent and very hard. If this occurs, 1 to 2 ounces of half prune juice mixed with water twice a day may help. If not, please call us during regular hours for further advice.

SPITTING UP

Spitting up is normal. Every baby, bottle or breast-fed, spits up to one degree or another. Infants spit up because the valve responsible for keeping the stomach shut once it is full does not fully develop until 9 or 10 months. Until that time, picture a balloon that you fill with water but can't knot. Try carrying, holding or burping that balloon. The balloon will leak or "spit" just as your baby does. Increased spitting is of concern if your baby doesn't gain weight normally and has frequent respiratory or breathing problems.

PACIFIERS

A surprising number of people have strong feelings about pacifiers. There is nothing inherently good or bad about pacifiers. Babies have a great need to suck. They will suck on bed clothes, bottles, nipples, their hands, or anything they can get. There is no evidence that pacifiers deform the teeth. There is some recent evidence that pacifier use may actually *decrease* a baby's risk of SIDS. It is NOT a good idea to tie the pacifier to a string around the baby's neck. This is a great strangling hazard and must be avoided.