



♥
caring
for your
new baby



TriHealth
Pediatrics

Welcome!

Thank you for choosing TriHealth physicians to care for your new baby. We hope the information in this booklet will help you to be at ease and gain confidence in your new role as a parent.

It's a privilege to establish a relationship with you and your baby. We want to provide you with the best possible medical and well-baby care for your child. We look forward to watching your baby mature and grow.

Baby's Name _____

Date of Birth _____

Time of Birth _____

Weight _____

Length _____

Birth Hospital _____

Pediatrician/Family Practitioner _____

Notes _____



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When to Go Directly to the Emergency Department

Some situations need immediate medical attention. Take your baby directly to the nearest Emergency Department when he has:

- A rectal temperature of 100.4 degrees or higher or a too-low temperature of 97 degrees or lower
- Lips that look blue
- Trouble breathing
- Inability to wake up to feed



The First Week

For most parents, the first weeks at home with a new baby are challenging and tiring. Every new baby awakens several times during the night, and parents need a strategy for getting adequate rest. A good solution is to sleep when your baby sleeps, and take turns checking on and comforting your crying baby.

Do not expect to take care of your newborn alone. If you are a single parent and are not getting enough breaks or rest, ask a friend or relative for help.

As you spend time with your baby, you'll learn her preferences for feeding, sleeping and waking. You'll also come to know your baby's temperament.

What to Do When Your Baby Cries

Crying is often a normal part of being a baby. It's your baby's way of communicating hunger, pain, illness, gas, fatigue, a dirty diaper or other reasons. Sometimes a baby is fussy and cries a lot without any apparent reason. We refer to this as colic but don't really know its cause. Theories include an immature digestive system or intolerance for cow's milk found in formula or mom's diet. Colic usually begins after two weeks of age and goes away by itself at about 3 months. Sometimes the crying occurs at the same time every day, most commonly in the evenings.

What to Do When You're Overwhelmed

If you ever feel overwhelmed by your baby's crying and don't have another source of help, put your baby in the crib. Take some deep breaths and come back in five minutes. Never shake your baby.

If you still feel upset and unable to cope, contact the Parent Helpline at 513 961 8004. It's a resource of the Council on Child Abuse to support and calm parents.

Five "S" Strategies for Calming Your Baby

Try these five "S" techniques to calm your baby:

Swing: Place your baby in a swing or rock your baby in your arms as you sway side to side. Riding in a car or stroller may also help.

Swaddle: Wrap your baby in a sleep sack or thin blanket with her arms inside. Newborns seem to prefer having their arms tightly swaddled and their legs loosely swaddled. Once your baby is age 2 months or shows signs of rolling over, keep her arms outside the blanket.



Side/Stomach: Hold your baby in your arms on his side or stomach.

Shushing: Make "shushing" sounds, sing or provide white noise such as turning on a vacuum cleaner.

Sucking: Allow your baby to breastfeed or give her a pacifier.

When to Call Us

Call your doctor if your baby:

- Seems to be in pain
- Cries constantly for more than two hours
- Has symptoms such as vomiting, diarrhea or fever
- Spits up excessively
- Is not eating well

Don't hesitate to call if you have questions or if you are tired and frustrated by the crying and need suggestions.

Skin Conditions and What to Do ♥

Your baby's skin is sensitive, and minor rashes are very common. Most newborns develop dry, peeling skin for several weeks after birth. Use the following chart for advice on skin care and other external issues you may notice.

CONDITION	WHAT TO DO
Erythema Toxicum Rash	Let the rash, which is harmless, go away on its own. It's the most common rash among newborns in the first two days of life. The redness and bumps may increase over days but will disappear in about a week. 
Infant Acne	Many infants between 2 and 6 weeks old develop a red and pimply rash on their faces. This is called "infant acne" and usually requires no treatment. It usually clears up on its own by about 2 months. Do not apply lotion. Call our office if you see blisters or pus.
Chafed Cheeks	Red, chafed cheeks are common. You may apply a mild baby lotion lightly to your baby's face.
Diaper Rash	After cleaning the reddened area with water, allow it to air dry. Then, apply Aquaphor or another lotion or ointment. Call us if there are blisters or pus, or if the rash is bleeding. Do not use powder.
Cradle Cap	Yellow, flaky scabs or scales on the scalp don't require treatment. However, dandruff shampoo such as Selsun Blue, Head & Shoulders or Tegrin may reduce cradle cap.
Swollen Breasts	Both male and female babies may have enlarged breasts for several weeks, due to their mothers' hormones. A white, milky fluid sometimes drains from the baby's nipples. This is normal and will disappear without treatment. If your baby's breasts appear red and sore, call our office.



CONDITION	WHAT TO DO
Eye Discharge	Newborns' eyes frequently accumulate small amounts of mucus. If this occurs, gently wipe the mucus off with sterile cotton balls and plain water. Massage gently and rub downwards along the inner corner of the eye closest to the nose. This will often correct the discharge. If your baby's eyes become red and swollen, or drainage becomes thick or discolored, call our office.
Vaginal Discharge	Girls sometimes have a thick white (and sometimes bloody) vaginal discharge, due to mom's hormones. This is normal and can be cleaned with a wet, soft cloth (no soap) and gently wiping the area downwards toward the rectum.
Circumcision	During diaper changes, apply petroleum jelly or antibiotic ointment to the exposed tip of the penis to prevent sticking to the diaper. Continue this for several days. Clean a soiled circumcision by dripping warm water over the tip of the penis. If necessary, very gently wipe it with a soft cloth. Once the penis heals, no additional care is needed. During your baby's one-month exam, you will learn how to retract and clean the foreskin to prevent scar tissue from developing.
Umbilical Cord	A small piece of umbilical cord can remain attached to your baby's belly button for a week to a month after birth. It will fall off on its own. A small amount of bleeding is typical after the cord detaches; this shouldn't concern you. If you note redness of the area, drainage, pus or a foul odor, call our office to schedule an immediate appointment. 



Bathing and skin care are an important part of getting to know your baby.

Guidelines for Bathing

Follow these tips when bathing your baby:

1. Try to set a regular time for bathing your baby, as part of a daily routine. Give sponge baths until the umbilical cord is healed. Then bathe your baby in a small tub containing a few inches of warm water.
2. Never leave your baby unattended.
3. Be sure to check the water temperature before immersing your baby. Adjust your water heater to 120 degrees Fahrenheit or lower to prevent the possibility of burns.
4. Limit bathing to two to three times per week to prevent drying out your baby's skin.
5. Wash your baby's face with plain water, mild, unscented soap, and a soft cloth. To clean around baby's eyes, use a cotton ball or soft cloth dipped in cool water. Don't try to clean inside your baby's nose or ears, but clean outer areas with a moist washcloth or cotton ball.
6. Wash your baby's head with a mild, non-tearing shampoo, such as Johnson's Baby Shampoo. Work from front to back to keep suds out of your baby's eyes. Wash baby's body (including folds in baby's skin and face) with a mild soap. Rinse well and pat dry.
7. Do not use powder after a bath, because inhaled powder can cause serious respiratory problems.
8. Trim your baby's nails with safety nail clippers or by gently filing. This may be necessary several times a week and is easiest to do while your infant is asleep.

Sun Protection

Protecting your child's skin from exposure to natural sunlight is extremely important. It's best to keep your baby in shaded areas. When you can't avoid sun exposure, dress your baby in light clothing and a bonnet or hat. When outdoors, apply sun screen with SPF of 30 or higher frequently in babies older than 6 months old. Ask your doctor if you wish to apply sun screen sooner.



Feeding: Breast and Bottle Feeding

Feed your baby by ♥

Breastfeeding

OR

Bottle
(formula or pumped breastmilk)

🕒 **8 to 12 times every 24 hours** 🕒

Feeding time is your baby's most pleasant experience. It provides nourishment and close contact with you. Choose a comfortable position so you can relax as you feed your baby.

Breast milk is the most natural source of nutrition for babies. If that's not a good option for you, infant formulas also provide excellent nutrition. We support whatever you decide is best for you in feeding your baby.

If your baby is born prematurely or has digestive problems, discuss with your doctor specific nutritional requirements for your baby.

Newborns don't typically follow a schedule for eating, especially in the first week. Most babies eat every two to four hours, but you'll learn what your baby's pattern will be. Your baby's need to suck may exceed the amount she needs to get adequate nutrition. You may want to try a pacifier to help satisfy the need to suck in between feedings.

During your baby's first few weeks, you'll notice she is asleep more than awake. During the daytime, after three or four hours of sleep, wake your newborn for feedings. It may help to awaken her with a diaper change or total undressing. At night, take advantage of the extra sleep if your baby sleeps more than three hours. If you're finding it hard to awaken your baby for feedings during the day, call our office.

Breastfeeding

Some key benefits of breastfeeding are that it boosts your baby's immune system and it decreases your baby's risk of sudden infant death syndrome (SIDS). It's also a cost-effective way to feed your baby. In addition, it will help you heal from pregnancy and delivery and burn up to 500 calories a day.

If you are new to breastfeeding, don't hesitate to ask for help. Hospital maternity nurses are there to support you, and you can call TriHealth Breastfeeding Help Line at 513 862 7867, option 3. As always, you may call our office to speak with one of our nurses. It usually takes many weeks after a baby is born to establish a routine between mother and baby, so try to be patient. During the first few days after birth, your breasts will produce colostrum, a thick, yellow milk with high nutritional value.

Over the first five days, your breasts will become firmer and harder and your breast milk comes in. Breast milk becomes a creamy white that flows faster.

For the first few days, offer your baby both breasts every two to three hours, if possible. Frequent nursing in the early days encourages an early and abundant supply of breast milk. Your baby should nurse on each breast for a maximum of 10 to 15 minutes.

Under normal circumstances, formula is not necessary between feedings and water should not be given to a newborn. When difficulties occur with breastfeeding, supplemental formula is often helpful, and your doctor may even suggest it. If used properly, supplemental formula will not interfere with breastfeeding.

There is no need to restrict your diet when breastfeeding. A well-balanced diet with plenty of fluid intake is recommended. It is best to keep alcohol and caffeine to a minimum. We discourage smoking while breastfeeding. Consult your pharmacist or our office to inquire about safety of taking medications while breastfeeding.

Is your baby eating enough?



The answer is yes if your baby...

- Has one wet diaper on Day 1 following birth, two wet diapers on Day 2, three on Day 3, four on Day 4 and six every day after
- Poops during the first 24 hours of life. Stools will be yellow and loose by Day 4 or 5 for a breastfed baby
- Appears alert and satisfied between feedings and doesn't continuously cry
- Occasionally spits up formula or breast milk when burping



Breastfeeding Techniques and Positions

Once your baby is born, you'll be spending a lot of time breastfeeding. So, make yourself as comfortable as possible. Follow these guidelines:

1. Place your baby skin to skin and use pillows to support you.
2. Choose a position that feels good to you. You can switch from feeding to feeding. Effective positions include:



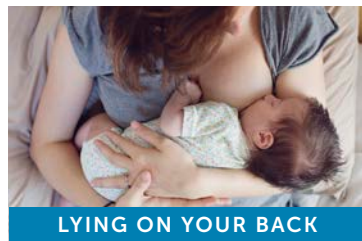
CROSS CRADLE



CRADLE



LYING ON YOUR SIDE



LYING ON YOUR BACK



CLUTCH/FOOTBALL



3. Once in position, help your baby latch on so it doesn't hurt you, and your baby gets maximum milk from sucking. Make sure your baby opens his mouth wide. Then, get as much of your areola (dark area around the nipple) in your baby's mouth as possible.
4. Each time you feed your baby, alternate which breast you start with. The first side will get the strongest sucking action from your baby, which helps to produce more milk. Alternating breasts will keep your milk production balanced.
5. Burp your baby after one side or more often, if needed.

How to Store Breast Milk

After pumping (expressing) breast milk, store it in a sterile, plastic container.

STORAGE PLACE	USE OR FREEZE MILK BY	STORAGE TEMPERATURE
Counter at room temperature	4 hours	66-78°F (19-26°C)
Cooler with ice packs	24 hours	59°F (15°C)
Refrigerator	4 days	39°F or lower (4°C)
Freezer	6 to 12 months	0-4°F (-18 to -20°C)

If your baby doesn't drink a whole bottle of breast milk in one feeding, you can use the milk later the same day. Use thawed breast milk within 24 hours.

Bottle Feeding

You can bottle feed your baby using breast milk you've pumped or with formula. Formulas come in powder, liquid concentrate and ready-to-use forms. They are made from cows' milk or soy protein. Always choose a formula with iron.

As a general rule, newborns usually take two ounces or more every two to three hours. The volume of formula per feeding and the time between feedings will typically increase as a baby grows older.

Steps for bottle feeding:

1. **Clean bottles** in a dishwasher or with warm, soapy water. If you get water from a well or cistern, boil bottles and nipples for the first three months.
2. **Fill the bottle** with **lukewarm tap water first**, then add powder or liquid concentrate. If you use well or cistern water, boil the water beforehand for 10 minutes and let it cool to lukewarm. Never microwave bottles containing formula or breast milk. This could cause uneven heating and burn your baby's mouth. To warm a bottle, place it under warm running water or immerse it in a pan or bowl of warm water.
3. **Feed your baby** as you hold her in a cradle position, skin to skin. Tilt the bottle so the nipple is always filled with milk or formula.
4. **Burp your baby** after every ounce or so, or burp as needed.

Other Important Nutrients for Your Baby

Your doctor may recommend certain supplements to your baby's diet of breast milk or formula:

Fluoride. If your baby is breastfed or takes formula with non-fluoridated water, ask your doctor about fluoride supplements at 6 months.

Vitamins. Certain infants require vitamins with iron and/or fluoride. If your baby gets less than 16 ounces of formula per day, you'll also want to give a vitamin that has vitamin D. Discuss this with your doctor during your office visit.

Introducing Solid Foods

Babies thrive well on breast milk or formula alone until 4 to 6 months of age. Your doctor will discuss introducing cereal and baby foods at your well child visits. Signs that your baby is ready to eat solids include the ability to sit upright in a highchair and no longer thrusting the tongue outward when putting a spoon near the mouth.

Potty Talk: Answering Questions about Bowel Movements

Pay attention to the frequency and appearance of your baby's stool. Your baby should poop in the first 24 hours, before going home from the hospital. After that, what's normal can vary. Your baby may poop after every feeding, once a day or a couple of times a week.

All babies sneeze, hiccup, cough, snort, cry and strain or grunt with bowel movements. These are normal behaviors. Your baby is not constipated as long as his stools are soft.

Poop Report

DAY	WHAT POOP SHOULD LOOK LIKE
0 to 3	Black, tarry appearance. This is called meconium and is normal.
1 to 4	Breastfed baby will have greenish poop. Formula-fed baby will have yellow, green or brown poop.
4 and beyond	Breastfed baby will have yellowish, watery stool. Formula-fed baby will continue to have yellow, green or brown poop.

Call us if you notice blood in your baby's stool, if it looks red or white, or if it's hard and formed.

Changing Diapers

Try to change your baby's diaper as soon as you notice wetness or a bowel movement. Cloth and disposable diapers are both fine for your baby.

With each diaper change, wipe your baby's bottom with a wet, soft cloth or a baby wipe that doesn't contain alcohol. Sometimes, baby wipes can cause a rash.

Diarrhea

Diarrhea is usually caused by an infection in the intestine, mostly due to a virus. There is no cure for viral diarrhea, so you simply have to wait for your baby to work through the illness.

If your baby has diarrhea, her stools are usually watery, yellow, brown or green. The stool may contain mucus or undigested food material.

The most important concern is to prevent your baby from becoming dehydrated. Give her plenty of fluids. If your baby has begun eating food, stick to a bland diet.

Additional suggestions for treating diarrhea at home include:

- If breastfeeding, offer your breast more frequently.
- If formula feeding, offer more frequent feedings to ensure adequate fluid intake. Do not dilute the formula.
- Avoid juices; they can make diarrhea worse.
- For infants older than age 1 year, you may offer Pedialyte to help encourage hydration if the infant will not accept breast milk or formula.
- Give probiotics, which contain healthy bacteria that can replace unhealthy bacteria in the GI tract.
- For an older child, offer more fluids than usual but avoid juice. Milk, water, Gatorade or sports drinks are all fine.

When to Call Us

Call us if:

- There is blood in the stool
- Diarrhea is accompanied by vomiting or fever
- Your baby has abdominal pains
- Your baby acts sick or listless, or has a rash
- His mouth or lips are dry and he isn't urinating as often as usual
- Symptoms persist for more than a week

What to Do When Your Baby is Ill

Having a sick child can be quite distressing for parents. Don't hesitate to call our office if your baby shows these signs of illness:

- Lack of appetite, poor feeding
- Jaundice (yellow skin color)
- Rash with fever
- Fever greater than 100.4 in an infant less than 2 months of age
- Repeated vomiting
- Bloody diarrhea
- Excessive crying
- Little activity and difficulty waking up
- Difficulty breathing

If you think your child needs immediate medical attention, call 911 or take him to the Children's Hospital Medical Center Emergency Room closest to you.

Some insurance plans require you to contact your child's doctor before going to an emergency facility; therefore, we urge you to contact us first unless it's a true emergency. After hours, someone from our office will be on call to advise you on what to do.

Taking Baby's Temperature

A rectal temperature is the most accurate. Follow these steps:

1. Clean the end of the digital rectal thermometer with soap and water.
2. Put a small amount of petroleum jelly (Vaseline®) or other lubricant on the tip.
3. Remove your child's diaper and lay her on her back on a safe surface like a changing table or bed.
4. Hold her legs up and gently place the thermometer into your baby's anal opening.
5. Turn on the thermometer and hold it until it gives you a temperature reading.

ILLNESS: Fever, defined as temperature > 100.4

SYMPTOMS: Fever is a symptom that shows your baby's immune system is working to fight illness. Under age 2 months, a baby with a fever needs urgent evaluation. Over 2 months in age, notice if your child is still active and feeding. If so, there is less need to worry.

HOME REMEDIES: Keep your baby lightly dressed, often only in a diaper. Open the window a crack to keep the room cool (<70F). Give acetaminophen (Tylenol) every four hours by mouth, or give ibuprofen, if older than 6 months, every 6 hours. Consult your pharmacist or our office for help with dosing.

WHEN TO CALL US: With fever, always call if you are worried, your child is less than 2 months old, baby appears seriously ill, or fever has lasted more than 72 hours. Call for fever with any of these: a rash or purple spots, convulsions/seizures, crying that can't be consoled, stiff neck, severe headache, difficulty breathing, crying if touched, earache, sore throat, swollen glands, excessive drooling or abdominal pain.

ILLNESS: Colds/upper respiratory infections

SYMPTOMS: Fever, sneezing, sore throat, cough, congestion or stuffy nose, clogged ears, clear-to-green nasal drainage, fatigue, general aches and pains.

HOME REMEDIES: Treat symptoms because there is no cure for viruses. Run a vaporizer or humidifier in your baby's room. Use a bulb syringe to suction out mucus you can see in her nose. Try saline nose spray or drops to soften the mucus in your baby's nose before suctioning with a bulb syringe. Give acetaminophen (Tylenol, Temptra) for irritability, if over 2 months of age. Do not use over-the-counter cough and cold medicines for children under age 6, unless your doctor instructs you otherwise.

WHEN TO CALL US: Call if your child is less than 2 months old, is wheezing or has difficulty breathing, has earache, difficulty swallowing or severe sore throat, is drinking less or is dehydrated, has thick green nasal drainage that persists longer than seven days.

ILLNESS: Earaches/ear infections

SYMPTOMS: Fussiness, fever, pulling at the ears (especially with a cold), pain when the ear is touched, poor feeding, disturbed sleep, muffled hearing or drainage from the ear.

HOME REMEDIES: Ibuprofen (Motrin, Advil), elevating baby's head with the sore ear facing upward, putting a warm compress on the ear of an older child.

WHEN TO CALL US: Call immediately for ear pain with stiff neck, severe headache, or screaming even after giving ibuprofen. Also call if your child acts very ill or disoriented. We can prescribe antibiotics or ear drops to stop infection and relieve pain.

ILLNESS: Sore throat

SYMPTOMS: Difficulty swallowing, excessive drooling, swollen lymph nodes, red-looking throat

HOME REMEDIES: Acetaminophen or ibuprofen, • Liquids and bland foods • Cold soft foods like ice cream or crushed popsicles, salt water gargle (add 1 tsp. salt to about 4 oz. of water) • Throat lozenges

WHEN TO CALL US: Call if your child has sore throat with fever and no cold symptoms, difficulty swallowing, excessive drooling, rash with sore throat, swollen or sore lymph nodes in the neck, symptoms lasting more than 72 hours, recent exposure to strep

ILLNESS: Vomiting

HOME REMEDIES: Take steps to prevent dehydration: offer nothing to eat or drink for one to two hours after baby first vomits, then offer one to two ounces of formula every hour. If vomiting continues, offer one ounce or less at a time. If vomiting persists, offer Pedialyte instead of formula. For a breastfed baby, use a bottle to limit and keep track of the volume per feeding.

WHEN TO CALL US: Call if your baby is vomiting: after every feeding; forcefully with "projectile" vomiting; accompanied by fever, diarrhea, or abdominal pain. Also call if vomit contains material that looks like coffee grounds, if weight loss occurs, or if baby is listless, has dry lips and mouth, is not urinating as much as usual, or refuses any liquids. Don't let symptoms persist more than 24 hours.

Safe Sleep

Follow the ABC's of safe sleep for babies:

Alone – Your baby should sleep without blankets, stuffed animals, positioners, bumpers, siblings or parents. We recommend putting your baby's crib in your room next to your bed so you'll be able to feed, comfort and watch him more easily.

Back – Babies should sleep on their backs, not on their stomachs. Your baby will not choke if she lies on her back. Ask your doctor about sleep position if your child has any medical problems. To help prevent the back of your baby's head from appearing flattened, change your baby's position frequently while awake. Regular tummy time will also help with this.

Crib – A bassinet or crib with slats no more than 2 3/8" apart is the ideal place for your baby to sleep. Don't let your baby sleep on a pillow or waterbed. If your baby falls asleep in a car seat, stroller, swing or other carrier, move him to a firm sleeping surface as soon as possible. To create a safe crib environment, avoid toys that dangle over the crib with a string. Place your baby's crib away from mini blinds or drapery cords.

For more safe sleep guidelines, see CradleCincinnati.org/safe sleep.



Stimulating Your Baby's Development

Close contact and interaction with you and other loved ones help your baby develop. Here are some ideas:

Tummy Time

To help develop your baby's neck strength and head control, place your baby on her abdomen for short periods while she is awake.

Skin-to-Skin Time

Place your baby on your chest skin to skin for these benefits:

- Promote bonding
- Improve breastfeeding and milk production
- Help maintain baby's temperature and blood sugar
- Provide pain relief for baby after shots or blood tests

Take a Walk

Fresh air and sunshine will stimulate your baby and make him sleep better later on. The outdoors also provides lots of new sights and sounds.

Read to Your Baby

Even if she doesn't understand the words, she'll begin developing listening skills. This is also a great time for bonding.

Look in a Mirror

Show your baby his reflection in a mirror. This will help him focus and track images. Touch different parts of his face and name them. In time, he'll learn the words.

Take a Class Together

- TriHealth offers a Tummy Time four-week class for you and your baby to make tummy time fun, interactive and a positive step toward visual development and sensory processing. The class meets Thursday mornings from 10 to 10:45 a.m., at Bethesda North Hospital. Call TriHealth Women's Healthline at 513 475 4500 for fees or to register.
- Let your baby learn to love water. TriHealth Fitness & Health Pavilion in Montgomery offers Aquababies for you and your child who is age 3 months to 3 years. Call 513 985 0900 for more information or to register.

85% OF
YOUR BABY'S
BRAIN IS
BUILT BY
AGE 3

THE BEST THING YOU
CAN DO TO HELP
YOUR BABY'S BRAIN
GROW IS EASY...

TALK!

Your words are food for your baby's brain. The more words a child hears in the first three years of life, the stronger the connections in his brain will be. Experts call it plasticity —it means that your baby's brain will learn more, more easily in these years than at any other time in his life.

HOW CAN YOU TALK MORE?

Talk all the time. Talk to your baby from the day you bring her home. Every word you say makes a connection in her brain. The more connections her brain builds, the smarter she will be.

Keep your ears open. When your baby coos or makes his first sounds, it's his way of trying to answer you. Don't miss those moments. Look him in the eye and answer back. When you do that, you are telling his brain to try again and make another word.

Sing and talk together. Make the things you do every day into times to learn. When you feed or change or bathe your baby, talk about what you're doing. Name the parts of his body. Count his fingers and toes. Make up silly songs about what you're doing. Rhyming words and music help growing brains recognize patterns and sounds.

No screens. A smartphone or a tablet or video is not a substitute for a human voice talking to a baby. Doctors say children under 18 months should have no screen time.

Answer with a sentence. Make the sentence fragments your baby starts to say into full sentences to help her learn more words. When your child says "Uppie, uppie," answer with, "Do you want daddy to pick you up?" Now you are up so high, what can you see?"

Keeping Baby Safe

See page 22 for safe sleep practices or visit [CradleCincinnati.org/safesleep](https://www.CradleCincinnati.org/safesleep).

Car Safety

Use an approved infant car seat and precisely follow manufacturer instructions on how to install it. Do not place a rear-facing infant seat in a front passenger seat that has an air bag. The safest position for an infant car seat is the center of the rear seat.

To make sure the car seat you have is safe for your baby's age and size, have it inspected. Greater Cincinnati has more than 40 car seat inspection sites, most at local fire departments. Children's Hospital Medical Center has detailed information on Child Passenger Safety and a listing of area inspection locations. Visit [CincinnatiChildrens.org/CCIC](https://www.CincinnatiChildrens.org/CCIC).

Home Safety

Now that you have a baby in the home, notice common household items that may be harmful to your baby. Take action to protect your baby from these potential hazards:

- Adjust your water heater to 120 degrees Fahrenheit or lower to prevent burns.
- Do not use infant walkers.
- Do not leave your baby unsupervised around water, even for a minute. Infants have drowned in bathtubs, home aquariums, pet water bowls, scrub buckets and backyard pools.
- Keep medications, vitamins, alcohol, cosmetics, mouthwashes and cleaning supplies in a locked cabinet or out of baby's reach. If your baby ingests a harmful substance, call Poison Control at **513 636 5111** or **800 222 1222**. Store these numbers in your cell phone.
- Install smoke detectors on every floor of your home.
- Put safety latches on drawers and cupboards.
- Secure stairs with gates.
- Do not attach strings or cords that dangle from a pacifier. Be careful to avoid any dangling cords in the home such as those hanging from drapes and mini blinds.
- Avoid dressing your baby in hooded sweatshirts or jackets with drawstrings around the neck. Do not place a necklace around an infant's or young child's throat.
- Keep plastic bags and balloons away from babies and young children.
- Install a carbon monoxide alarm in your home.

Preventing Smoke Exposure

Protect your baby from smoke exposure. Second-hand and even third-hand smoke can increase your baby's risk of Sudden Infant Death Syndrome (SIDS).

For help to quit smoking, check with your insurance counseling services or call the Ohio Tobacco Quit Line at **800-QUIT-NOW** (784-8669).

Keeping Mom Well

As you care for your new baby, don't forget to take care of yourself.

Accept Help

When family or friends offer help with laundry, dishes, housekeeping or grocery shopping, accept it! Those tasks will all be yours again soon enough. Be grateful for the help and use the energy you save for you and your baby.

Do Something You Enjoy

You may not have considered taking time for yourself, but it's important. Find someone to watch your baby, and try these or other enjoyable activities:

- Take a walk outside or go to a park. Walking just 10 minutes a day outside will level your blood sugar, elevate your mood and decrease symptoms of depression.
- Have lunch with a friend.
- Go on a date with your spouse.
- Read a book in a quiet spot.
- Go see a movie.
- Take a yoga class.

Designate a Friend Who Can Give You a Break

Ask a special friend if you can call on her or him to give you a break if you urgently need help or need to get out. Maybe it's for 30 minutes or a couple of hours. Your friend may not be available every time, but it's good to know you have a backup if you need one.

Eat Healthy

Whether or not you are breastfeeding, your body is recovering from a major event. Drink lots of water and eat a balance of high-protein foods, grains, vegetables, fruits and low-fat dairy products to maximize your energy and healing.

Address Postpartum Depression

Due to rapid changes in hormones after delivery, more than half of new moms experience postpartum sadness or depression. Symptoms include tearfulness, fatigue, sadness, feelings of guilt and difficulty thinking clearly. If you feel this way, here are some tips to cope with the postpartum "blues":

- Acknowledge your feelings. Discuss them with your partner or a close friend. If you are feeling trapped and overwhelmed by your new responsibilities, discuss that, too.
- Get adequate rest, and sleep when your baby sleeps.
- Get help with household chores and baby care so you can have some time for yourself.
- Mix with other people. Don't let yourself become isolated. Get out of the house at least once every week.
- If you don't feel better by the time your baby is 1 month old, talk to your physician about the possibility of counseling or medication for your depression.

Get a Postpartum Massage

Take advantage of a postpartum massage, designed to:

- Reduce musculoskeletal pain
- Decrease postpartum depression
- Stimulate the uterus to return to its pre-pregnancy size and position
- Contribute to rehabilitation of abdominal skin, muscles and organs
- Stimulate chemicals in your body that improve breastfeeding
- Promote structural realignment of your spine and pelvis

To schedule an appointment, call the TriHealth Fitness & Health Pavilion at **513 246 2633**.

Self-test for postpartum disorders

Circle the answer that most closely describes how you have felt in the past seven days.

1. I have been able to laugh and see the funny side of things.

As much as I always could: **0** Not quite as much now: **1**
 Definitely not quite so much now: **2** Not at all: **3**

2. I have looked forward with enjoyment to things.

As much as I ever did: **0** Some less than I used to: **1**
 Definitely less than I used to: **2** Hardly at all: **3**

3. I have blamed myself unnecessarily when things went wrong.

Never: **0** Not Very Often: **1** Some of the time: **2** Most of the time: **3**

4. I have felt worried and anxious for no good reason.

Not at all: **0** Hardly Ever: **1** Sometimes: **2** Very Often: **3**

5. I have felt scared or panicky for no good reason.

Not at all: **0** Not Very Often: **1** Sometimes: **2** Quite a lot: **3**

6. Things have been getting the best of me.

I have been coping as well as ever: **0**
 Most of the time I have coped quite well: **1**
 Sometimes I haven't been coping as well as usual: **2**
 Most of the time I haven't been able to cope at all: **3**

7. I have been so unhappy that I have had difficulty sleeping.

Not at all: **0** Not very often: **1** Sometimes: **2** Most of the time: **3**

8. I have felt sad or miserable.

Not at all: **0** Not very often: **1** Sometimes: **2** Most of the time: **3**

9. I have been so unhappy that I have been crying.

Not at all: **0** Not very often: **1** Sometimes: **2** Quite a lot: **3**

10. The thought of harming myself has occurred to me.

Never: **0** Hardly Ever: **1** Sometimes: **2** Quite often: **3**

Total: _____

Add your circled scores for each question. If your score is 10 or greater, you may have postpartum depression or anxiety. Speak with your health care provider

TriHealth Services and Helpful Online Resources

TriHealth Breastfeeding Help Line **513 862 7867**, option 3

Call with questions about breastfeeding or to schedule an appointment with a lactation consultant. The Help Line is answered Monday through Friday, 8:30 a.m. to 4:30 p.m., and Saturday, 8 a.m. to noon.

TriHealth Women's Healthline **513 475 4500**

Call for information and fees on interactive, online classes on breastfeeding, and caring for your newborn and yourself after childbirth. Also call about the following classes or visit TriHealth.com/classes to learn more:

- TotSaver CPR – Learn CPR and what to do in a medical emergency
- Fast Track to Fatherhood – Open forum on newborn care and dealing with changes and stresses of being a new father
- Today's Grandparents – Learn current trends in childbirth, infant care and home safety

Online Resources:

The American Academy of Pediatrics – AAP.org

Cincinnati Children's Hospital – CincinnatiChildrens.org

FamilyDoctor.org

HealthyChildren.org

Keep Your Little Passengers Safe!



BAG in the BACK

Safe Habits Save Lives.

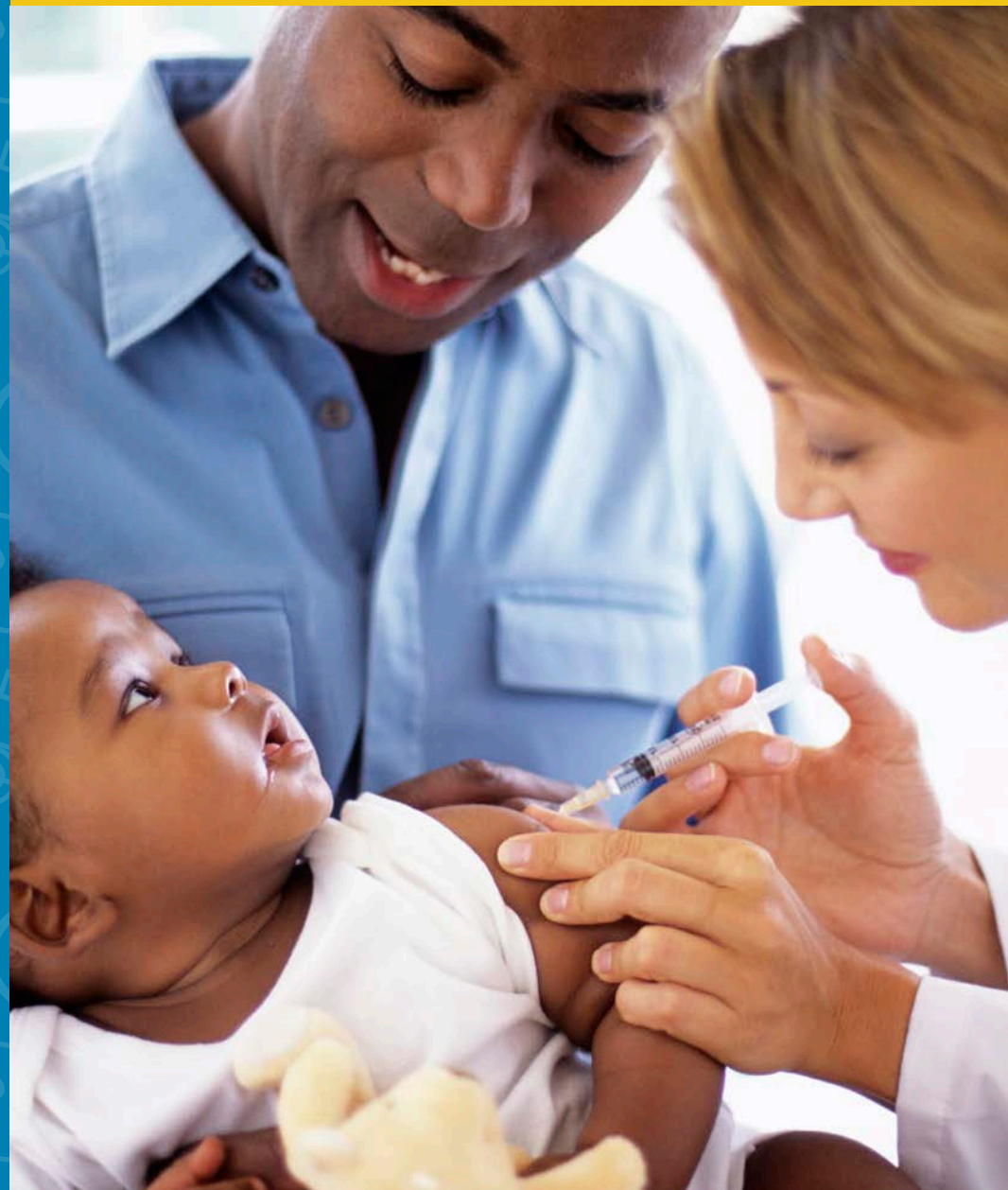
Put your Bag in the Back or an essential item in the backseat of the car EVERY TIME to ensure you never unknowingly leave a child in the vehicle.



A message from
The Sofia Foundation for Children's Safety.
For more information visit us at www.bagintheback.org

Immunization Schedule

Fold me out to see a full immunization schedule for children from birth through 4-6 years of age.





TriHealth
Pediatrics