



caring
for your
new baby

A guide to your little one's care,
growth and development



TriHealth
Pediatrics

WELCOME AND CONGRATULATIONS ON THE BIRTH OF YOUR NEW BABY!

Thank you for choosing TriHealth Physician Partners!

Our goal is to provide the best possible medical and well-baby care and we look forward to watching your baby mature and grow. We hope you find the information in this booklet helpful as you take on this new role as a parent.

Talk to our office staff about signing up for *MyChart*!

By becoming your baby's proxy, you'll be able to log in to schedule appointments, send non-urgent messages to your physician and nurses, request refills, see lab/test results and more!

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Keeping Baby Safe

Safe Sleep ABCs



A
ALONE

Place baby alone in crib to sleep.



B
BACK

Place baby on their back to sleep.



C
CRIB

Use a firm, flat mattress and fitted sheet. Keep the crib empty.



For more safe sleep guidelines, visit [CradleCincinnati.org](https://www.CradleCincinnati.org).

Car Safety

Use an approved infant car seat and follow manufacturer instructions for installation. Do not place a rear-facing infant seat in a front passenger seat that has an airbag. The safest position for an infant car seat is the center of the rear seat.

To ensure your car seat is safe based on your baby's age and size, have it inspected. There are over 40 inspection sites located throughout Greater Cincinnati (most at local fire departments). Visit [CincinnatiChildrens.org/CCIC](https://www.CincinnatiChildrens.org/CCIC) for a list of inspection sites and detailed information on Child Passenger Safety.

Every person who is driving a child in a car seat should practice the 'Bag in the Back' habit. Put an essential personal item (i.e. purse, cell phone, shoe, backpack, etc.) in the back seat forcing you (or your child's caregiver) to open the back door every time you get out of the car. This will decrease the chance of leaving your child in the car and the potential for vehicular heatstroke.

Staying Warm on Cold Days

How do you keep your child safe and warm in the car on those cold days? Follow these tips:

- Bulky clothing such as winter coats and snowsuits should NEVER be worn underneath the harness of a car seat.
- Dress your child in thin layers starting with close-fitting layers on the bottom (long-sleeve bodysuits, leggings). Then add longer pants and a warmer top (thermal knit, thin fleece). In very cold weather, long underwear is also a safe layering option.
- Hats, mittens and socks or booties provide extra warmth without interfering with car seat straps.
- Use a blanket OVER the car seat straps. The top layer should be removable, so your child doesn't get too hot after the car warms up.
- Car seat covers can be used ONLY if they do NOT have a layer under the baby. Nothing bulky should ever go underneath your child's body or between their body and the harness straps. Be sure the cover is approved by the car seat manufacturer and fits appropriately.

Keep Your Little Passengers Safe!



"Winter Car Seat Safety Tips from the AAP."
HealthyChildren.Org,
25 Jan. 2023, www.healthychildren.org/English/safety-prevention/on-the-go/Pages/Winter-Car-Seat-Safety-Tips.aspx.

Home Safety

Take action to protect your baby from potential hazards in the home:

- Install smoke detectors on every floor and a carbon monoxide alarm in your home.
- Adjust your water heater to 120 degrees Fahrenheit or lower to prevent burns.
- Do not use infant walkers. Stationary activity centers (play yards, playpens) without wheels are safer options.
- NEVER leave your baby unsupervised around water.
- 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.
- Put safety latches on drawers and cupboards and secure stairs with gates.
- Avoid items that could get wrapped around your child's neck (i.e. strings or cords that attach to a pacifier, dangling cords such as those hanging from drapes and mini blinds, hooded sweatshirts or jackets with drawstrings around the neck, necklaces, etc.).
- Keep plastic bags, balloons, small hard foods, round rubbery objects and other choking hazards away from babies and young children.

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).



Baby Care Wisdom

For most parents, the first few weeks at home with a new baby are both exciting and exhausting. As you spend time with your baby, you'll learn his/her preferences, temperament and establish a routine for feeding, sleeping and waking.

Here are some tips from our physicians on creating a strong foundation for your baby's health and wellness:

- **You Can't Spoil Your Newborn**

It's impossible to hold or respond to your baby too much especially in the first three months. Your constant attention helps your baby's brain and emotions develop. After three months of age, if you have concerns or questions about how much to hold your baby, talk to your pediatrician.

- **Well-Baby Checkups**

Schedule and keep your well-baby visits to ensure that your baby is growing and developing normally. This is a great opportunity to discuss everything from sleeping to eating to bowel movements. It's ideal if both parents are present and that you come prepared with a list of questions for your pediatrician.

- **Immunizations**

Vaccination is one of the best ways to protect your baby, family and community from outbreaks of serious and sometimes life-threatening illness. The vaccines we recommend are part of the Centers for Disease Control and Prevention (CDC) vaccination schedule and have been extensively tested for safety and efficacy. Visit [cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html](https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html) for additional information.

When to Go Directly to the Emergency Department

Some situations require immediate medical attention. Take your baby directly to the nearest Emergency Department if he/she has symptoms such as:

- For babies under age 2 months, a rectal temperature of 100.4 degrees or higher OR 97 degrees or lower
- Lips that look blue
- Difficulty breathing
- Inactivity or difficulty waking up

Feeding

Feeding time is your baby's most pleasant experience as it provides nourishment and close contact with you. In general, babies eat 8-12 times every 24 hours. To ensure your baby is eating enough, use the below graphic as a guide and note, your baby's need to suck may exceed the amount she needs to get adequate nutrition. Pacifiers are a great tool to help satisfy the need to suck in between feedings; however, you should speak with your child's pediatrician before introducing a pacifier.

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



If your baby was born prematurely or has digestive problems, discuss specific nutritional requirements with your pediatrician.

Feed your baby by

Breastfeeding

OR

Bottle

(formula or pumped breastmilk)



8 to 12 times every 24 hours



Breastfeeding

Breastfeeding boosts your baby's immune system, decreases the risk of SIDS and speeds healing from pregnancy and delivery. Breastfed babies who get less than 32 ounces per day of vitamin D-fortified formula may require a supplement. Please discuss with your pediatrician. Questions about breastfeeding? Contact TriHealth's Breastfeeding Help Line (513 862 7867, option 3) or call your pediatrician's office to speak with one of our nurses.

Bottle Feeding

You can bottle feed your baby using pumped breast milk or formula. While breast milk is the most natural source of nutrition for babies, infant formulas (made from cows' milk or soy protein) also provide excellent nutrition. Formulas come in various forms (powder, liquid concentrate, ready-to-use). Always choose an FDA-approved formula with iron.

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.

Tips 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.
3. **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.
4. **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.
5. **Burp your baby** after every ounce or as needed.

Introducing Solid Foods

Babies thrive well on breast milk or formula alone until 4 to 6 months of age. Your pediatrician will discuss introducing cereal and baby foods at your well-baby visits.

Sleeping

Although the average newborn sleeps 14 to 17 hours a day, it may not feel like it. Babies tend to sleep more during the day and are eager to feed during the night. Here are some general guidelines as you're waiting for your baby to sleep through the night:

Birth to Three Months

Some newborns may require as little as 11 hours and others may prefer as many as 19 hours. Try to rest when your baby rests.

Three to Six Months

At three to four months of age, your baby will likely sleep between 12 and 15 hours a day, including naps. If your infant is among the many 3- to 6-month-olds able to sleep five hours at a stretch, congratulations! This is considered "sleeping through the night" for this age group.

Six to Nine Months

By 6 months old, many babies no longer need to eat at night. Many of their 12 to 15 hours of sleeping each day will occur after dark. They may also take naps during the day.

While it's best to follow the baby's lead in the early weeks, parents need a strategy for getting adequate rest. A good solution is to sleep when your baby sleeps and, if possible, take turns checking on and comforting your crying baby.



Potty Talk

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

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

Diarrhea

Diarrhea is usually caused by a viral infection in the intestine. Stools are typically watery yellow, brown or green and may contain mucus or undigested food material. There is no treatment for viral diarrhea. While your baby works through the illness, it is important to ensure he or she stays hydrated. Give plenty of fluids and, if your baby has begun eating food, stick to a bland diet.

When to Call Us

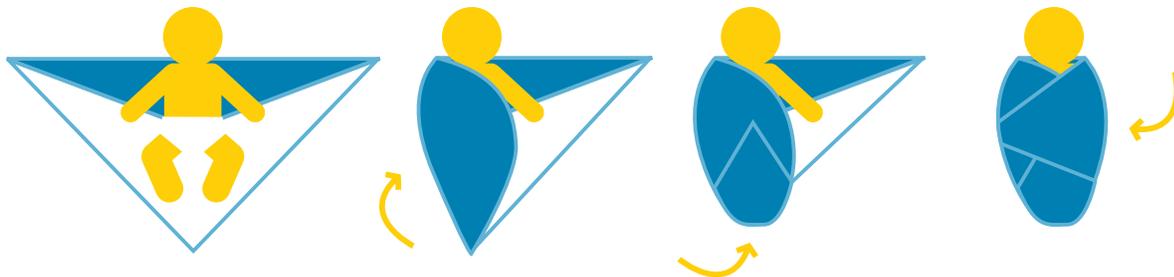
- There is blood in the stool
- Diarrhea is accompanied by vomiting or fever
- Your baby has abdominal pains
- Your baby acts sick or listless, or has a rash
- His mouth or lips are dry, and he isn't urinating as often as usual



What to Do When Your Baby Cries

Crying is a normal part of being a baby. It's how they communicate hunger, pain (illness, gas) or discomfort (dirty diaper), fatigue and a host of other reasons. Some babies become fussy and cry for no apparent reason. This is referred to as colic which typically begins after two weeks and most often goes away by the time the baby reaches 3 months of age. When food, sleep and a clean diaper don't seem to do the trick, try these five "S" strategies to calm your baby:

- **Swing:** 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

- Your baby appears to be in pain
- He or she cries constantly for more than two hours
- Your baby has symptoms such as vomiting, diarrhea or fever
- He or she spits up excessively or is not eating well

Bathing and Skin Care

Tips for bathing your baby:

1. **Establish a regular time for bathing your baby.** 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 in or near water.**
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, tear-free shampoo** (i.e., 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** as inhaled powder can cause serious respiratory problems.

Skincare and Sun Protection

Your baby's skin is sensitive and minor rashes are very common. Most newborns develop dry, peeling skin for several weeks after birth. To prevent scratches, 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.

Protecting your child's skin from exposure to natural sunlight is extremely important. When this can't be avoided, dress your baby in light clothing and a bonnet or hat. When outdoors, frequently apply sunscreen with SPF of 30 or higher in babies older than 6 months old.

If you have concerns about skin conditions or if you wish to apply sunscreen prior to 6 months of age, please contact your pediatrician's office.

Well Care as Your Baby Grows

As your baby grows, he or she will visit the doctor for well care and recommended immunizations. The wellness roadmap below will help guide you on any age-based well care needed as your child grows.



Wellness guidelines provided by Bright Futures, a national health promotion and prevention initiative, led by the American Academy of Pediatrics. Based on the needs of your child, the physician may adjust these recommendations.

What to Do When Your Baby is Ill

Having a sick child can be quite distressing for parents. Call our office if your baby shows these signs of illness:

- Lack of appetite, poor feeding
- Jaundice (yellow skin color)
- Rash with fever
- Fever of 100.4 degrees or greater in an infant/child older than 2 months of age. For a baby under 2 months of age, please go to the nearest emergency department
- Repeated vomiting
- Bloody diarrhea
- Excessive crying

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.

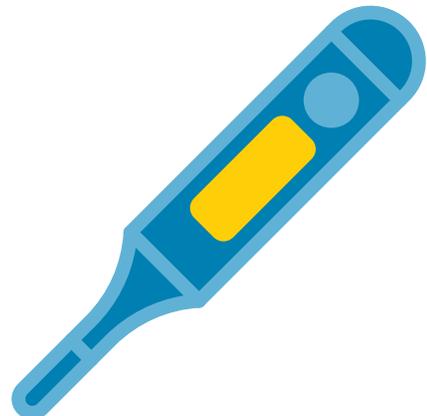
Some insurance plans require you to contact your pediatrician before going to an emergency facility; therefore, we urge you to contact us first unless it's a true emergency. After hours, someone from our office will be on call to advise you on what to do.

Log into your child's MyChart and use the Symptom Checker feature for care options for common conditions such as red/pink eye; ear pain; fever; upper respiratory symptoms; diarrhea, vomiting and constipation.

Taking Baby's Temperature

A rectal temperature is the most accurate in children up to 3 years of age. 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.



What to Do for Common Illnesses

ILLNESS	SYMPTOMS	HOME REMEDIES	ALWAYS CALL IF
Fever	<ul style="list-style-type: none"> • Defined as temperature of 100.4 degrees or greater • Shows your baby's immune system is working to fight illness • Under age 2 months, a baby with a fever needs urgent evaluation • Over age 2 months and child is still active and feeding, there is less need to worry 	<ul style="list-style-type: none"> • Keep your baby lightly dressed, often only in a diaper • Keep the room cool (less than 70F) • Give acetaminophen (Tylenol) every four hours by mouth • For babies/children older than six months, you can give ibuprofen (Motrin) every 6 hours • Consult your pharmacist or your pediatrician's office for help with dosing 	<ul style="list-style-type: none"> • Child is less than 2 months old • Child appears seriously ill • Fever has lasted more than 72 hours • Fever accompanied by any of the following: 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
Colds/ upper respiratory infections	<ul style="list-style-type: none"> • Fever • Sneezing, congestion/ stuffy nose • Sore Throat • Clogged ears • Clear to green nasal drainage • Fatigue • General aches and pains 	<ul style="list-style-type: none"> • Remedies are intended to treat symptoms • 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 • Give acetaminophen (Tylenol) for irritability, if over 2 months of age • Do not use over-the-counter cough and cold medicines for children under age 6 years unless instructed by your pediatrician 	<ul style="list-style-type: none"> • Child is less than 2 months old and is wheezing or has difficulty breathing • If difficulty swallowing or severe sore throat and drinking less or is dehydrated • Has thick green nasal drainage that persists longer than seven days

ILLNESS	SYMPTOMS	HOME REMEDIES	ALWAYS CALL IF
Earaches/ ear infections	<ul style="list-style-type: none"> • Fussiness, fever, pulling at the ears (especially with a cold) • Pain when the ear is touched • Poor feeding • Disturbed sleep • Muffled hearing • Drainage from the ear 	<ul style="list-style-type: none"> • If child is over 6 months, you can give ibuprofen every 6 hours • Elevating baby's head with the sore ear facing upward • For an older child, place a warm compress on the ear 	<ul style="list-style-type: none"> • Call immediately for ear pain with stiff neck, severe headache, or screaming even after giving ibuprofen • If child acts very ill or disoriented
Sore Throat	<ul style="list-style-type: none"> • Difficulty swallowing or excessive drooling • Swollen lymph nodes and/or red-looking throat 	<ul style="list-style-type: none"> • Acetaminophen or ibuprofen, • Liquids and bland foods • Cold soft foods like ice cream or crushed popsicle • For older children, saltwater gargle (add 1 tsp. salt to about 4 oz. of water) or throat lozenges 	<ul style="list-style-type: none"> • Sore throat with fever and no cold symptoms • Difficulty swallowing and/or excessive drooling • Rash with sore throat, swollen or sore lymph nodes in the neck • Symptoms lasting more than 72 hours • Recent exposure to strep
Vomiting	<ul style="list-style-type: none"> • Typically symptom of another condition/ illness (i.e. stomach flu, food poisoning or motion sickness) • Do not let symptoms persist for more than 24 hours 	<ul style="list-style-type: none"> • Give half the regular amount of formula or breastmilk every 1-2 hours. Avoid solid foods and baby foods in kids who are vomiting • 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 	<ul style="list-style-type: none"> • Vomiting after every feeding and/ or forcefully and "projectile" • If accompanied by fever, diarrhea, or abdominal pain • Vomit contains material that looks like coffee grounds • Weight loss occurs • Baby is listless • Baby has dry lips and mouth • Urinating less than usual • Refuses any liquids

Acetaminophen and Ibuprofen Dosing

Tylenol = Acetaminophen

Dosing: Every 4-6 hrs as needed (No more than 4 doses in 24 hours)

Infant's and Children's Tylenol are the SAME concentration - one just has a dropper and one has a cup

Weight	Tylenol 160mg/5mL
8 lbs	1.5 mL
9-10 lbs	2 mL
11 lbs	2.25 mL
12 lbs	2.5 mL
13 lbs	2.75 mL
14-15 lbs	3 mL
16-17 lbs	3.5 mL
18 lbs	3.75 mL
19 lbs	4 mL
20 lbs	4.25 mL
21-22 lbs	4.5 mL
23-24 lbs	5 mL
25 lbs	5.25 mL
26 lbs	5.5 mL
27 lbs	5.75 mL
28-29 lbs	6 mL
30 lbs	6.25 mL
31 lbs	6.5 mL
32 lbs	6.75 mL
33 lbs	7 mL
34 lbs	7.25 mL
35-36 lbs	7.5 mL
37 lbs	7.75 mL
38 lbs	8 mL
39 lbs	8.25 mL
40 lbs	8.5 mL
41 lbs	8.75 mL
42-43 lbs	9 mL
44 lbs	9.25 mL
45 lbs	9.5 mL
46 lbs	9.75 mL
47 lbs	10 mL
48 lbs	10.25 mL
49-50 lbs	10.55 mL

Ibuprofen = Advil, Motrin

Dosing: Every 6-8 hrs as needed (No more than 4 doses in 24 hours)

Infant's and Children's Ibuprofen are different concentrations

Weight	Infant's Ibuprofen (50 mg/1.25 ml)	Children's Ibuprofen (100mg/5mL)
8 lbs	<i>Do NOT give under 6 months of age</i>	<i>Do NOT give under 6 months of age</i>
9-10 lbs	<i>Do NOT give under 6 months of age</i>	<i>Do NOT give under 6 months of age</i>
11 lbs	<i>Do NOT give under 6 months of age</i> 1.25 mL	2.5 mL
12 lbs	<i>Do NOT give under 6 months of age</i> 1.25 mL	2.75 mL
13-14 lbs	<i>Do NOT give under 6 months of age</i> 1.25 mL	3 mL
15 lbs	<i>Do NOT give under 6 months of age</i> 1.25 mL	3.25 mL
16 lbs	<i>Do NOT give under 6 months of age</i> 1.875 mL	3.5 mL
17 lbs	<i>Do NOT give under 6 months of age</i> 1.875 mL	3.75 mL
18 lbs	<i>Do NOT give under 6 months of age</i> 1.875 mL	4 mL
19 lbs	<i>Do NOT give under 6 months of age</i> 1.875 mL	4.25 mL
20 lbs	<i>Do NOT give under 6 months of age</i> 1.875 mL	4.5 mL
21 lbs	<i>Do NOT give under 6 months of age</i> Two droppers to the 1.25 mL mark	4.75 mL
22 lbs	<i>Do NOT give under 6 months of age</i> Two droppers to the 1.25 mL mark	5 mL
23 lbs	<i>Do NOT give under 6 months of age</i> Two droppers to the 1.25 mL mark	5.25 mL
24-25 lbs	<i>Do NOT give under 6 months of age</i> Two droppers to the 1.25 mL mark	5.5 mL
26-27 lbs	<i>Do NOT give under 6 months of age</i>	6 mL
28 lbs	<i>Do NOT give under 6 months of age</i>	6.25 mL
29 lbs	<i>Do NOT give under 6 months of age</i>	6.5 mL
30 lbs	<i>Do NOT give under 6 months of age</i>	6.75 mL
31 lbs	<i>Do NOT give under 6 months of age</i>	7 mL
32 lbs	<i>Do NOT give under 6 months of age</i>	7.25 mL
33 lbs	<i>Do NOT give under 6 months of age</i>	7.5 mL
34 lbs	<i>Do NOT give under 6 months of age</i>	7.75 mL
35-36 lbs	<i>Do NOT give under 6 months of age</i>	8 mL
37-38 lbs	<i>Do NOT give under 6 months of age</i>	8.5 mL
39 lbs	<i>Do NOT give under 6 months of age</i>	8.75 mL
40 lbs	<i>Do NOT give under 6 months of age</i>	9 mL
41 lbs	<i>Do NOT give under 6 months of age</i>	9.25 mL
42 lbs	<i>Do NOT give under 6 months of age</i>	9.5 mL
43 lbs	<i>Do NOT give under 6 months of age</i>	9.75 mL
44 lbs	<i>Do NOT give under 6 months of age</i>	10 mL
45 lbs	<i>Do NOT give under 6 months of age</i>	10.25 mL
46-47 lbs	<i>Do NOT give under 6 months of age</i>	10.5 mL
48-49 lbs	<i>Do NOT give under 6 months of age</i>	11 mL
50 lbs	<i>Do NOT give under 6 months of age</i>	11.25 mL

Caring for Yourself – It's OK to Ask for Help

They say it takes a village to raise a child so you should not expect to do it alone.

- Single parenting and not getting enough breaks or rest? Ask a friend or relative for help.
- Feeling overwhelmed by your baby's crying and don't have another source of help? Put your baby in the crib and walk away. Take a few deep breaths and come back in five minutes. Never shake your baby.
- When you're tired, frustrated and need some additional support, contact your pediatrician's office or the Council on Child Abuse's Parent Helpline (513 961 8004)



Stimulate Your Baby's Development

Your Baby's Brain Lights Up with Every Word You Say! From the moment your baby arrives, his brain is ready to absorb new words, sights, sounds and sensations. The more talking, singing and interacting you do, the stronger your newborn's brain will be. *About 85 percent of your baby's brain is developed by age 3. The input you provide in these early years will build a foundation for a lifetime.*

In the following pages, you will find tips and suggestions on how to engage your baby's brain – Start now for a brighter future!

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.

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.

Read to Your Baby

Read to your baby every day, whether using books at home or signs when you are driving down the street or walking through a store. As you read books, point to pictures and talk about what you are seeing and reading. This will help your child learn how books work, understand that pictures represent real things and encourage a love of books and reading.

Enroll for a free monthly book!

Dolly Parton's Imagination Library of Ohio mails one free book each month to your child from birth to their 5th birthday! It's easy to enroll! Go to **OhioImaginationLibrary.org** or scan the QR code to start your child's free monthly book delivery.



Talk, Sing, Read and Play

A positive tone, descriptive words and full sentences enhances learning so talk, sing or read to your baby every chance you get:

- Talk to your baby as you describe what you're making for dinner, give some attention to the family pet or walk through a grocery store. When you talk with your baby, she is hearing sounds of your language and learning what words mean as you point and name things. Encourage, listen, and respond to your baby. She will babble using the sounds she has heard.
- Sing your baby a lullaby when you tuck him in for the night or make up a song to greet him in the morning. Sing old favorites like "The Wheels on the Bus" and "The Itsy-Bitsy Spider" as you drive around town to introduce new vocabulary and word sounds.
- Develop your baby's hand muscles by encouraging her to pick up crackers and Cheerios, touch her nose and toes and pick up toys. Let her hands run through sand in the backyard or through yogurt on her tray at mealtime. These are first steps to build coordination for turning the pages of books and holding pencils and crayons.
- Play with your baby using different noises for toys like trucks, dolls, and animals. Try a simple game of peek-a-boo while grocery shopping. Different pitches, tones and volumes help your baby develop language basics. Playing also helps babies become aware of their bodies, develops a sense of humor, and creates brain connections for future learning.
- There are excellent websites that provide more ideas for playing with your baby.
 - News, information, and research on the positive impacts of play is available at **learningthroughplay.com**. This site includes a link to "Let's Play" where you can filter activities based on the age and interests of your child. This site also provides ideas for crafts, inside and outside activities, and simple household and natural materials that can be used to encourage play.
 - The Lego Foundation's "Prescription for Play" site provides a free guide you can download with resources on stimulating baby's development through play. Go to **Lego.com/en-us/prescription-for-play-care-giver** to download the guide.
- Computers, tablets, smartphones, and television can take away from important face-to-face interaction with your child. The AAP recommends no screen time until 18-24 months of age except for video chatting with family and friends.

Developmental Milestones in Your Baby's First 18 Months

At each visit, your pediatrician will review specific milestones for development with you. These milestones, adapted by the Centers for Disease Control and prevention (CDC), provide guidelines to measure your baby's growth and physical development.

Categories of development can be divided into social and emotional connections, language and communication, thinking and problem-solving, physical development.

Your pediatrician will discuss activities you can do at each stage to spur brain growth and development. Use these visits as opportunities to share concerns about the way your child plays, learns, speaks, acts or moves.

If you and the pediatrician are concerned about possible delays:

1. Ask for a referral to a specialist.
2. Call Ohio's early intervention program to find out if your child can get services to help.

Your Baby at Months

Social/Emotional

- Begin to smile at people
- Briefly calm themselves (may bring hands to mouth and suck on hand)

Language/Communication

- Coo, make gurgling sounds
- Turn head toward sounds

Learning, Thinking, Problem-Solving

- Begin to follow things with eyes and recognize people at a distance
- Begin to act bored if activity doesn't change

Movement/Physical Development

- Hold head up and begin to push up when lying on tummy
- Make movements with arms and legs

Your Baby at **4** Months

Social/Emotional

- Smile and laugh spontaneously
- Play with people and possibly cry when playing stops
- Copy some movements and facial expressions, like smiling or frowning

Language/Communication

- Begin to babble with expression and copy sounds they hear
- Cry in different ways to show hunger, pain or tiredness

Learning, Thinking and Problem-Solving

- Respond to affection
- Use hands and eyes together, such as seeing a toy and reaching for it
- Follow moving things with their eyes from side to side

Movement/Physical Development

- Hold their heads steady, without support
- Push down on their legs when feet are on a hard surface
- Roll over from tummy to back
- Hold a toy and shake it, and swing at dangling toys
- Bring hands to mouth
- Push up to elbows when lying on stomach

Your Baby at **6** Months

Social/Emotional

- Know familiar faces and begin to know if someone is a stranger
- Enjoy playing with others, especially parents
- Respond to other people's emotions and often seem happy

Language/Communication

- Respond to sounds by making sounds
- Respond to their own name
- Begin to say consonant sounds (jabbering with "m," "b")

Learning, Thinking and Problem-Solving

- Look around at things nearby
- Bring things to their mouths
- Show curiosity about things and try to get things that are out of reach
- Begin to pass things from one hand to the other

Movement/Physical Development

- Roll over in both directions (front to back, back to front)
- Begin to sit without support
- When standing, support weight on legs and maybe bounce



Your Baby at 9 Months

Social/Emotional

- Sometimes be afraid of strangers
- Sometimes be clingy with familiar adults
- Have favorite toys

Language/Communication

- Understand “no”
- Make a lot of different sounds like “mamamama” and “bababababa”
- Copy sounds and gestures of others
- Use fingers to point at things

Learning, Thinking and Problem-Solving

- Watch the path of something as it falls
- Look for things they see you hide
- Play peek-a-boo
- Pick up things like cereal o’s between thumb and index finger

Movement/Physical Development

- Stand, holding on
- Get into a sitting position
- Sit without support
- Pull to stand
- Crawl



Your Baby at **12** Months

Social/Emotional

- Be shy or nervous with strangers
- Cry when mom or dad leaves
- Have favorite things and people
- Show fear in some situations
- Repeat sounds or actions to get attention
- Put out an arm or leg to help with dressing
- Play games such as peek-a-boo and pat-a-cake

Language/Communication

- Respond to simple, spoken requests
- Use simple gestures, like shaking head “no” or waving “bye-bye”
- Say “mama” and “dada” and exclamations like “uh-oh!”
- Try to say words you say

Learning, Thinking and Problem-Solving

- Explore things in different ways, like shaking, banging, throwing
- Find hidden things easily
- Look at the right picture or thing when it’s named
- Copy gestures
- Start to use things correctly (for example, drink from a cup and brush hair)
- Bang two things together
- Put things in a container and take things out of a container
- Poke with index (pointer) finger

Movement/Physical Development

- Pulls up to stand
- Walks holding on to furniture
- Sits down without help
- Able to feed themselves

Your Baby at **15** Months

Social/Emotional

- Imitate household activities
- Point to things they are interested in
- Pull people to show them things

Language/Communication

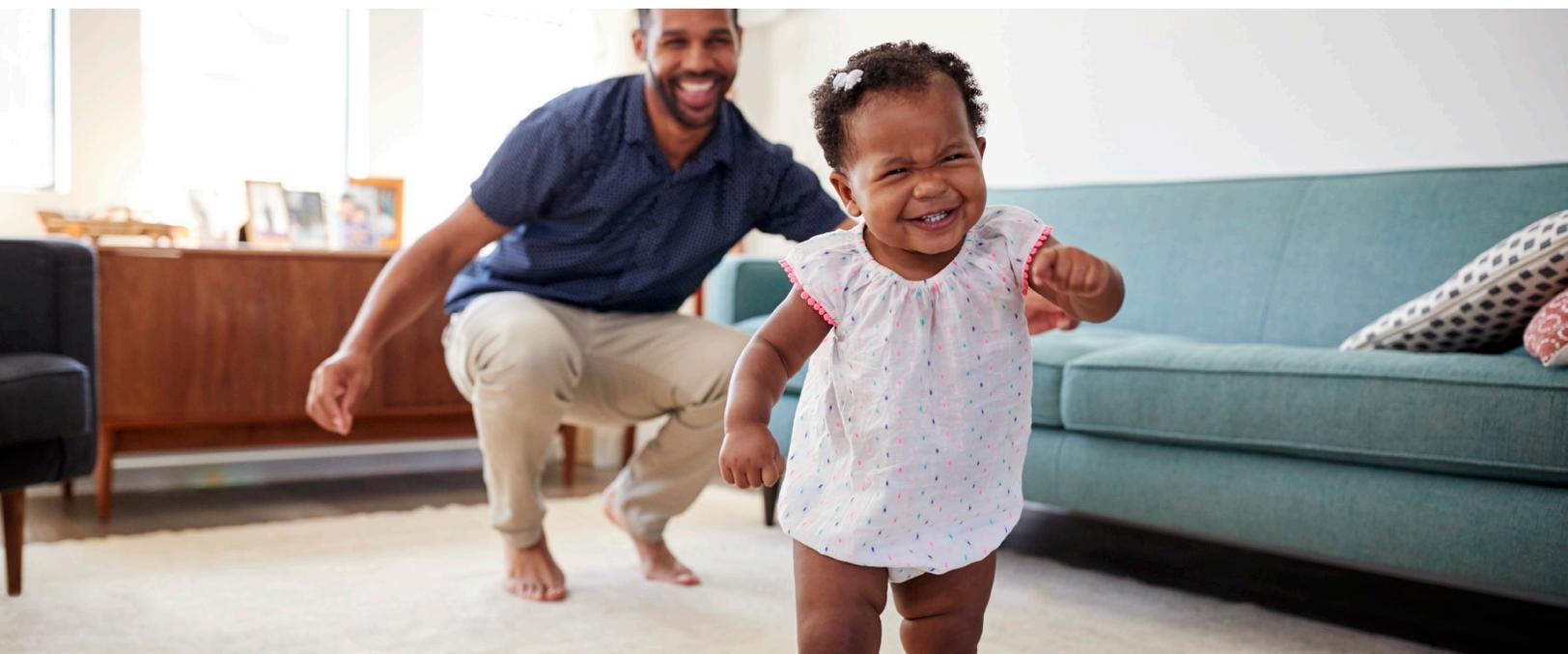
- Say at least three words
- Understand phrases like “supper time” or “bye-bye”
- Understand and follow simple commands
- Point to one body part

Learning, Thinking and Problem-Solving

- Stack one block or toy on top of another
- Turn a container upside down to dump out items
- Use a spoon and a cup
- Scribble spontaneously

Movement/Physical Development

- Walk across a room without falling or wobbling
- Run stiff-legged
- Remove some items of clothing



Your Baby at **18** Months

Social/Emotional

- Have occasional temper tantrums
- Play simple pretend, such as feeding a doll
- Cling to caregivers in new situations
- Point to show others something interesting
- Explore alone but with a parent close by

Language/Communication

- Beginning to say single words
- Say and shake their heads "no"
- Point to show someone what they want

Learning, Thinking and Problem-Solving

- Point to get the attention of others
- Show interest in a doll or stuffed animal
- Scribble on their own
- Follow one-step verbal commands without any gestures. For example, sit when you say "sit down."

Movement/Physical Development

- Walk alone
- Walk up steps and run
- Help undress themselves
- Drink from a cup and eat with a spoon

Reminders and Resources for a Healthy, Happy Child

Words to Say to Your Child

What you say as a parent, and how you say it have a strong impact on your child's self-image. Positive words and a kind, gentle, encouraging tone build a child's sense of worth and confidence. Judgmental words and a harsh or negative tone, on the other hand, can make a child feel unloved and unworthy.

Here are some words that reinforce your love and encouragement for your child:

1. I'm grateful for you.
2. I am proud of you.
3. I believe in you.
4. Great job!
5. I'm glad you tried something new.
6. I know you did your best.
7. You make me happy.
8. I love spending time with you.
9. You give the best hugs.
10. That's a great question.
11. I'm excited to spend time with you.
12. That was a really good choice.
13. That was really brave.
14. I'm listening.
15. I love you.
16. I will never stop loving you.
17. I knew you could do it.
18. Great idea!
19. You're amazing!
20. Thank you!



Words Not to Say to Your Child

In response to unwanted behaviors, say “no” firmly. Do not yell, spank or give long explanations.

1. **Hurry up.** Instead, say things that encourage her to get to her goal: “Grandma will be so happy to see you!”
2. **Shut up.** This gives the message that your child’s voice doesn’t matter. And it’s just a matter of time before he starts saying “shut up” to you or someone else.
3. **Stop crying.** Kids don’t always know how to express themselves and crying can be a way to vent their feelings. Try giving a hug or encouraging words like “Take a deep breath so you can tell me what’s wrong.”
4. **Calm down.** Saying this probably won’t make it happen. A hug and encouragement to take a deep breath often create the calming effect you want.
5. **You’re fine.** If you say this when your child is upset, it implies your child’s feelings are wrong. Try instead, “How can we make this better?”
6. **Because I said so.** You probably didn’t like it when your parents said it, and you swore you wouldn’t say it to your child. Still, it’s tempting after the fourth or fifth “Why?” Do your best to give an explanation, even if it’s “Dad and I don’t think that would be best for you.”
7. **Don’t make me stop this car.** If it’s an empty threat, your child will quickly catch on and you will lose your authority.
8. **Wait until Mommy/Daddy get home.** This gives away your power to face a situation. It’s best to handle it in the moment.
9. **I’m disappointed in you.** Don’t hurt your child with these words. Make sure your child understands your disappointment is with her action and not with her as a person.
10. **Leave me alone.** This implies that your child’s needs don’t matter. Instead, ask your child to allow you to finish what you are doing.
11. **Big boys/girls don’t do that.** It may be crying or something else, but don’t use your child’s age as an excuse for why you are unhappy with him.
12. **You better do what I say or else.** Disciplining with fear tends to backfire. Instead, say “Please do this because...”

TriHealth Services and Helpful Online Resources

We are honored to serve as your pediatrician. Throughout your newborn's life, we are here for you! From simple questions to any ongoing health concerns, our physicians are committed to your baby's health and wellness! Our physicians are committed to providing compassionate, high quality care from birth until adulthood.

We'll be with you every step of the way. Many resources are available to you through our website: [trihealth.com/services/primary-care/pediatrics](https://www.trihealth.com/services/primary-care/pediatrics) or scan the QR code.



Visit [trihealth.com/classes](https://www.trihealth.com/classes) for information on our in-person and online classes.

These include:

- Breastfeeding
- Infant/Mother Care and Safety Class
- TotSaver CPR
- Fast Track to Fatherhood
- Today's Grandparents
- Big Brother/Big Sister Class
- Tummy Time!™
- Exercise Classes at the TriHealth Fitness and Health Pavilion
- Aquababies water classes