**Feeding**
Be sure to feed your baby often in the first few weeks. Healthy, full-term newborns may feed every 1-3 hours during the day and go up to 5 hours between feedings at night.

Newborns give cues when they are hungry. These cues include rooting (turning toward you with mouth open), sucking on the hands and crying.

Breast-fed infants should feed for 15-20 minutes at each breast until they become more efficient. For bottle-fed infants, use the lowest flow nipple for your bottle. Over time, you can slowly move to faster flow speeds.

**Jaundice**
Jaundice (yellow tint to the skin) is common in the first few weeks. Jaundice is a combination of lack of fluids and red blood cells that a newborn's liver cannot process quickly. The most visible sign is yellowing in the whites of the eyes.

Jaundice is more common in breastfed infants. If your newborn has jaundice, keep breastfeeding unless your doctor says otherwise.

Infants will get rid of bilirubin (the yellow pigment made when breaking down red blood cells) through the liver and then in bowel movements. Thus, in the first couple of weeks, make sure that infants have a bowel movement every day, especially if they have jaundice.

Jaundice is only dangerous at very high levels. The normal range for bilirubin changes with age. That means you may need to take your baby to the office more often at first to check the bilirubin level. We check levels by taking a small amount of blood, which then goes to the lab.

**Fingernail Care**
A newborn's fingernails are thin, but sharp. To prevent scratches, file the nails for the first few months. Fingernail clippers can easily break your baby's delicate skin, so avoid them for at least 6 months.

**Bathing**
Many people think newborns need a bath each day. But that is not the case for the first few months of life. In fact, until the umbilical cord falls off (around 3 weeks of age), you should only sponge-bathe your baby. Either use no soap or a fragrance-free soap for sensitive skin.

After the umbilical cord falls off, you can give a traditional baby bath and let your infant sit in the water.

**Umbilical Cord Care**
If the cords seems dirty, clean it with ethyl alcohol once a day. If not, no special care is needed. Please call our nurse if you see redness or swelling around the umbilicus.

**Skin Care**
ALWAYS wash your baby's clothes and linens in a fragrance-free detergent before they are ever used. These fabrics can contain dyes that irritate your baby's skin.

Infant skin often peels or appears dry in the first few weeks. The only areas that may need lotion are the wrists and tops of the ankles. These two areas tend to crack. To prevent cracking, place a dab of petroleum jelly on these areas.

**Bowel Movements**
Newborns should have at least one bowel movement a day for the first several days. Over time, bowel movements will reduce in number. Your baby may have one bowel movement per feeding and then slow to just one movement every five days. This pattern is normal as long as the most recent bowel movement was soft.

Breastfed infants tend to have yellow, runny, seedy stools. Bottle-fed infants have a pasty stool. Normal colors include yellow, brown and green.

Babies may strain or cry out during a bowel movement. As long as the bowel movement is soft, do not be alarmed. This condition is normal and will ease with time.

**Urine Output**
Newborns should have one wet diaper the first day of life, two the second day, and three the third day and every day thereafter. If your baby isn't producing this much urine, call our office to see if lack of fluids may be a problem.
**Illness**

Signs of illness include refusing to eat, vomiting (different from typical baby spit-up) or endless crying.

If you think your baby is ill, take his or her rectal temperature. Any temperature lower than 97 F or higher than 100.4 F is an emergency in an infant younger than 2 months. Call our office at once—even if it is closed!

To help prevent your baby from getting sick, avoid crowds for the first 2 months. Have friends and family wash their hands before touching or holding your baby. It is OK to take walks with your newborn or to eat out (but do so during off-peak hours).

**Colic**

Colic is most common in the evening from 3 weeks-3 months of age. It usually involves a fussy period that stops within a few hours. You can try using gas drops to ease your baby’s pain.

No one knows the cause of colic. Be sure you know the difference between colic and reflux, though.

**Reflux**

Reflux is fussiness during or after feeding. You also may see back arching or spit-ups. Reflux can happen during the day or night. If you think your infant has reflux, call our office for an appointment.

**Normal Behaviors**

Spit-up, hiccups and sneezing are normal. Mild congestion also is common. Newborns often take rapid, shallow breaths, followed by a pause for a few seconds, and then slow, deep breaths. This pattern is normal.

Newborns often confuse night and day for the first few weeks. Until then, keep the room dark and quiet at night and bright during the day.

**Circumcision Care**

Circumcisions take around a week to heal. Use petroleum jelly during that time on the wound with every diaper change. A few days after the circumcision, you may begin to gently pull away the skin from around the glans penis once a day to prevent adhesions.

**Sudden Infant Death Syndrome (SIDS)**

To prevent SIDS, ALWAYS place your infant on the back to sleep. Doing so cuts the risk of SIDS by half!

Also, make sure your infant sleeps in a crib or bassinet with a firm mattress and only a tight-fitting sheet. No blankets, pillows, bumper pads or toys should be in the crib when your baby is sleeping.

Dress your baby a layer warmer than you would dress yourself to make up for not using a blanket at night. Ideal room temperature is 68-72 F. Do not let your infant get too warm, which can increase the risk of SIDS.

DO NOT co-sleep with your baby. That means sharing the same bed, chair, sofa, etc. New guidelines urge parents to have their baby sleep in their bedroom for at least 6 months and up to a year. For safety reasons, they still should not co-sleep.

**Call Us with Concerns**

If you ever have a question or concern, please call our office. Someone will be able to offer an appointment, advice or just an ear to listen! If you have a concern when our office is closed, our answering service will contact an on-call pediatric nurse.

**To Learn More**

To learn more on newborn care, we recommend *Caring for your Baby and Young Child: Birth to Age 5* by Steven Shelow, MD (published by the American Academy of Pediatrics).