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Congratulations again on your new baby. We hope the next few days will give you a chance to rest while you get to know your newborn. Please call our office today to schedule your newborn's first appointment. They discharge physician will let you know if you need a 24-48 hour or 2 week appointment. If the attending it is advisable to also schedule your two week appointment at the same time.

Below are answers to some questions most frequently asked by new parents during their first days home. We hope these answers will put your mind at ease. If after reading this you still have concerns, please do not hesitate to call.

Reminder: Remember to contact your human resource department for forms to add your baby to you insurance. Most insurance companies require that they baby is added within 30 days from his/her birth.

JAUNDICE. Two-thirds of all infants appear slightly yellowish, or jaundiced, during their first week. However, if your baby's yellow color becomes prominent on the chest or legs, please call our office. Often when this happens an infant will become more sleepy, feed poorly, and have fewer wet diapers. Please call office if you notice changes.

FEEDING. Most newborns will eat every two to four hours. By the third day an infant will have a wet diaper with almost every feeding. Bowel movements tend to be more varied. Some will have a stool after every feeding while some will have one a day. After one month of age, babies who are breastfed may only have one stool every 4-5 days. A breastfed baby's stool is yellow, watery, and seedy. A formula-fed baby's stool is firmer and may vary in color. Constipation is when the stool is pellet-or log like-dry or hard. It is not uncommon for the infant to strain and turn red in the face during a normal bowl movement. As long as the baby is feeding well, not too fussy, and is not projectile (vomit that shoots across the room), there is no need to worry. Many babies will spit up after feeding, especially if they did not burp well or ate too much. Please call our office if your baby is not feeding well, experiences projectile vomiting, or is not having 6-8 wet diapers a day.

HICCUPS. Most healthy newborns have frequent hiccups. They may be so violent that they cause the babies entire body to shake and shudder for 5-10 seconds. Hiccups cause no medical problems and they become less frequent as the weeks pass. If you're uncomfortable when your baby hiccups, you can give them a few sips of water or try and extra burp to end them sooner.

SKIN CONDITIONS. Small white spots on the babies face are called "milia." They are the result of plugged sweat glands. Newborns may get a rash that looks like bug bites – a raised white center surrounded by a red area. Both conditions are normal and will disappear without treatment. Also, at about 3-4 weeks of age, your infant may develop acne, especially on the face. Again, this does not respond to treatment and is generally gone by 3 months of age.

EYES. Newborns frequently have watery eyes or whitish discharge from their eyes, usually from a blocked tear duct. If this discharge becomes thick and yellow/green please call our office.

UMBILICUS (NAVEL). The stump from the umbilical cord will fall off any time between 1-3 weeks after birth. As the stump moves around and falls off, it may bleed a little. If the area at the base of the cord seems moist or oozy, gently dry the area with a plain Q-tip 2-3 times a day. Keep the diaper folded down off the stump. Such care will help to keep it free from infection. Keep in mind that this is rotting tissue and that foul odor is not uncommon. If the drainage continues for more than 5 days after the stump has fallen off or if there is a large amount of bleeding, pus, or redness on the surrounding skin, please call our office.

CIRCUMCISION. If you have a newborn boy who was circumcised, his penis will still be quite red and raw. As it heals there may be a moist, yellow coating on the head of the penis. It is best to continue to apply Vaseline to this area until it has healed in 4-7 days. This offers some protection from stool and urine and keeps the area from sticking to the diaper.

VITAMINS. A breast-feeding mother should continue taking her prenatal vitamins. When breast-fed babies are a few months old we may prescribe vitamin D and fluoride supplements. Some bottle fed babies who are fed non-city water may be given a fluoride supplement.

GAS. Excessive gas and accompanying stomach pains are normal in newborns. Episodes of sharp pains and pressure of gas can occur anytime but are the most common in early evening. A breast-feeding mother should evaluate what she's eating: large amounts of tea, coffee, and chocolate can contribute to the problem. Formula fed babies may need a switch in formula if the gas becomes excessive, but don't switch without talking with someone in our office.

BREATHING. Infants frequently breathe noisily after naps and first thing in the morning because of mucus that collects in the back of the throat after lying down. They breathe through this mucus and their breathing rattles. Sneezing is also normal and does not mean a baby has a cold or allergies. If along with the congestions, your baby has nasal drainage or a cough, please call our office for instructions. In homes where parents smoke, newborns are stuffier and studies have shown that they have more frequent colds, ear infections, wheezing, and pneumonia. It is important not to smoke anywhere in the house or car. Many newborns will breathe rapidly for a few breaths, pause for a few seconds, and then breathe rapidly again. This pattern is called periodic breathing and is normal.

FEVER. It is not necessary to take your newborn's temperature regularly. If your baby is irritable, lethargic, not feeding well, or is luke warm to the touch, it would be wise to check his/her temperature. A rectal temperature or temporal artery is the most accurate in a baby. If it is 100.4 F, please call our office immediately until your baby is older than 3 months old.

SLEEPING. The American Academy of Pediatrics recommends that all healthy infants sleep on their backs to reduce the risk of SIDS (Sudden Infant Death Syndrome). This is most important during the first six months of life. Second hand smoke also increases a baby's risk of SIDS. We also recommend the use of a firm, flat mattress in a safety approved crib. To prevent the development of a flat area on your infant head, be sure to rotate the direction your baby faces while in the crib.

We hope that the above information will be helpful and will put your mind at ease by addressing some of your concerns. Please call the office if you have any questions. Don't forget to use a car seat every time your travel with your baby. Our staff looks forward to seeing you and your baby in the office.