

EDINBURGH POSTNATAL DEPRESSION SCALE (EPDS)

Baby's Name: _____ Baby's Date of Birth/Age: _____

Date: _____

If you are pregnant or have recently had a baby, we would like to know how you are feeling.

Please check the answer that comes closest to how you have felt in THE PAST 7 DAYS, not just how you feel today. Here is an example, already completed.

I have felt happy:

() Yes, all the time (*) Yes most of the time () No, not very often () No, not at all

This means: "I have felt happy most of the time" during the past week.

Please complete the other questions in the same way.

In the past 7 days:

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

- () As much as I always could
- () Not quite so much now
- () Definitely not so much now
- () Not at all

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

- () Yes, most of the time
- () Yes, sometimes
- () Not very often
- () No, not at all

2. I have looked forward with enjoyment to things:

- () As much as I ever did
- () Rather less than I used to
- () Definitely less than I used to
- () Hardly at all

***8. I have felt sad or miserable:**

- () Yes, most of the time
- () Yes, quite often
- () Not very often
- () No, not at all

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

- () Yes, most of the time
- () Yes, some of the time
- () Not very often
- () No, never

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

- () Yes, most of the time
- () Yes, quite often
- () only occasionally
- () No, never

4. I have been anxious or worried for no good reason:

- () No, not at all
- () Hardly ever
- () Yes, sometimes
- () Yes, very often

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

- () Yes, quite often
- () Sometimes
- () Hardly ever
- () Never

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

- () Yes, quite a lot
- () Yes, sometimes
- () No, not much
- () No, not at all

11. Does any household member smoke?

() Yes () No () Unsure

Is smoking done indoors and/or in cars?

() Yes () No () Unsure

Does anyone your baby is around regularly smoke?

() Yes () No () Unsure

***6. Things have been getting on top of me:**

- () Yes, most of the time I haven't been able to cope at all
- () Yes, sometimes I haven't been coping as well as usual
- () No, most of the time I have coped quite well
- () No, I have been coping as well as ever

Administered/Reviewed by _____ Date _____

*Source: Cox JL, Holden JM, Sagovsky R. Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale (1987). *Br J of Psychiatry*, 150:782-786.

Ht:

Date:

Wt:

Head:

1 Month Visit

You've finished running the "First Month Marathon!" Congratulations! Month Two is better, but it is still a half marathon! You and your baby will start to settle into a more consistent routine. You are getting to know your baby's needs and cues. Feeding should be much easier. Maybe you are getting a little sleep . . . maybe!

Development

1. At this age, your baby should be able to raise her head slightly when lying on her tummy, fix her gaze on an object, follow movement with her eyes and startle to noise. She is about to develop her wonderful smile!
2. Most infants sleep 16-20 hours per day, but rarely sleep more than 3-4 hours at a time. By 1 month of age, many will sleep 4-5 hours without awakening. Babies wake more frequently if they sleep in your bed; not to mention the increased risk of Sudden Infant Death Syndrome.
3. Crying may increase in the first months of life. Soon you will be able to distinguish the type of cry (hunger, wet, etc), but keep in mind that sometimes an infant cries for no reason. 2-3 hours a day of crying can be very normal. Crying itself is not harmful to your baby. Some infants will calm when walked or rocked; others when swaddled. Picking up a crying baby will not spoil him at this age. He needs your help to calm at this age. If you feel he is excessively fussy, call us.
4. Tummy time is important for the muscle development of your baby. Tummy sleeping is not recommended but playtime in that position is.

Injury Prevention

1. Always use a rear facing car seat. The back seat in the middle is the safest location for the car seat but certainly not the most convenient. Never should a car seat be placed in front of an air bag. Follow your manufacturer's instructions for securing it into your car and have its placement inspected. There are many locations and agencies that can inspect it.
2. Never leave your infant unattended. They can stretch and push with their legs, scooting themselves off of surfaces. Always supervise siblings and pets with the baby.
3. Do not place pacifiers on strings with your baby while sleeping.
4. Warm bottles in warm water not in the microwave. Microwaving may leave hot spots in the center causing severe scald injuries to the mouth. In addition, the microwave destroys the antibodies preserved in breast milk.
5. Placing the infant to sleep on his back (NOT the tummy OR the side) reduces the risk of Sudden Infant Death Syndrome. Please read the handout to learn more.
6. Never shake your baby as this can cause permanent brain injury, even death. We ALL get frustrated by fussiness and crying. Put your baby down, walk away, take a break, and come on back. It is OK to let your baby cry in his crib for 10-15 minutes while you recharge.

Nutrition

If you are breastfeeding, continue to take your prenatal vitamins, drink plenty of fluids, and eat regular nutritious meals. All babies spit up, but if it is becoming more forceful or seems painful, please let us know. Do not begin solid foods until four months of age.

Illnesses

Oftentimes the symptoms of an illness are subtle. When ill, your infant may sleep more or less than usual, develop a poor appetite, cry for unusual amounts of time or develop a fever. A temperature of 100.5 or greater rectally is considered a fever for infants less than 2 months old. Contact our office immediately for any fever at this age. Do not give acetaminophen (Tylenol) unless instructed by the physician to do so.

Bowel Habits

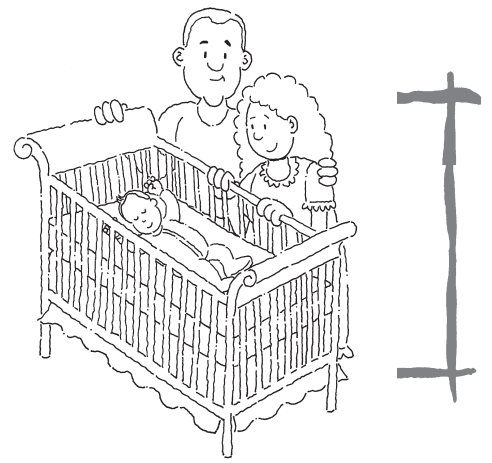
Many babies have a bowel movement every time they eat. Some babies go only once daily and some only every few days. All babies strain and grunt to some degree with bowel movements. Constipation is when your baby has hard pellets of stool. If your baby is constipated, try giving 1 ounce of juice diluted with 1 ounce of water once daily to soften up the stool.

Next Visit

We will see you at your baby's Two Month Well Check. When we see him next, he'll be all smiles!

He will get his first vaccines: three shots and an oral liquid vaccine. It would be a good idea to buy some children's acetaminophen (Tylenol) prior to the next visit. We will talk a lot about what to expect.

Safe Sleep and Your Baby: How Parents Can Reduce the Risk of SIDS and Suffocation



About 3,500 babies die each year in the United States during sleep because of unsafe sleep environments. Some of these deaths are caused by entrapment, suffocation, or strangulation. Some infants die of sudden infant death syndrome (SIDS). However, there are ways for parents to keep their sleeping baby safe.

Read on for more information from the American Academy of Pediatrics (AAP) on how parents can create a safe sleep environment for their babies. This information should also be shared with anyone who cares for babies, including grandparents, family, friends, babysitters, and child care center staff.

Note: These recommendations are for healthy babies up to 1 year of age. A very small number of babies with certain medical conditions may need to be placed to sleep on their stomach. Your baby's doctor can tell you what is best for your baby.

What you can do

- **Place your baby to sleep on his back for every sleep.**
 - Babies up to 1 year of age should always be placed on their back to sleep during naps and at night. However, if your baby has rolled from his back to his side or stomach on his own, he can be left in that position if he is already able to roll from tummy to back and back to tummy.
 - If your baby falls asleep in a car safety seat, stroller, swing, infant carrier, or infant sling, he should be moved to a firm sleep surface as soon as possible.
 - Swaddling (wrapping a light blanket snugly around a baby) may help calm a crying baby. If you swaddle your baby, be sure to place him on his back to sleep. Stop swaddling your baby when he starts to roll.
- **Place your baby to sleep on a firm sleep surface.**
 - The crib, bassinet, portable crib, or play yard should meet current safety standards. Check to make sure the product has not been recalled. Do not use a crib that is broken or missing parts or that has drop-side rails. For more information about crib safety standards, visit the Consumer Product Safety Commission Web site at www.cpsc.gov.
 - Cover the mattress with a tight-fitting sheet.
 - Do not put blankets or pillows between the mattress and fitted sheet.
 - Never put your baby to sleep on a sofa, a cushioned chair, a water bed, a cushion, or a sheepskin.
- **Keep soft objects, loose bedding, or any objects that could increase the risk of entrapment, suffocation, or strangulation out of the crib.**
 - Pillows, quilts, comforters, sheepskins, bumper pads, and stuffed toys can cause your baby to suffocate. Note: Research has not shown us when it's 100% safe to have these objects in the crib; however, most experts agree that these objects pose little risk to healthy babies after 12 months of age.
- **Place your baby to sleep in the same room where you sleep but not the same bed.** Do this for at least 6 months but preferably up to 1 year of age. Room sharing decreases the risk of SIDS by as much as 50%.
 - Keep the crib or bassinet within an arm's reach of your bed. You can easily watch or breastfeed your baby by having your baby nearby.
 - The AAP cannot make a recommendation for or against the use of bedside sleepers or in-bed sleepers until more studies are done.
 - Babies who sleep in the same bed as their parents are at risk of SIDS, suffocation, or strangulation. Parents can roll onto babies during sleep, or babies can get tangled in the sheets or blankets.
- **Breastfeed as much and for as long as you can.** This helps reduce the risk of SIDS.
 - The AAP recommends breastfeeding as the sole source of nutrition for your baby for about 6 months. When you add solid foods to your baby's diet, continue breastfeeding until at least 12 months. You can continue to breastfeed after 12 months if you and your baby desire.
- **Schedule and go to all well-child visits.** Your baby will receive important immunizations.
 - Recent evidence suggests that immunizations may have a protective effect against SIDS.
- **Keep your baby away from smokers and places where people smoke.** This helps reduce the risk of SIDS.
 - If you smoke, try to quit. However, until you can quit, keep your car and home smoke-free. Don't smoke inside your home or car, and don't smoke anywhere near your baby, even if you are outside.
- **Do not let your baby get too hot.** This helps reduce the risk of SIDS.
 - Keep the room where your baby sleeps at a comfortable temperature.
 - In general, dress your baby in no more than one extra layer than you would wear. Your baby may be too hot if she is sweating or if her chest feels hot.
 - If you are worried that your baby is cold, use a wearable blanket, such as a sleeping sack, or warm sleeper that is the right size for your baby. These are made to cover the body and not the head.
- **Offer a pacifier at nap time and bedtime.** This helps reduce the risk of SIDS.
 - If you are breastfeeding, wait until breastfeeding is going well before offering a pacifier. This usually takes 3 to 4 weeks. If you are not breastfeeding, you can start a pacifier as soon as you like.
 - It's OK if your baby doesn't want to use a pacifier. Some babies don't like to use pacifiers.
 - If the pacifier falls out after your baby falls asleep, you don't have to put it back in.
 - Do not use pacifiers that attach to infant clothing.
 - Do not use pacifiers that are attached to objects, such as stuffed toys and other items that may be a suffocation or choking risk.

- **Do not use home cardiorespiratory monitors to help reduce the risk of SIDS.**
 - Home cardiorespiratory monitors can be helpful for babies with breathing or heart problems, but they have not been found to reduce the risk of SIDS.
- **Use caution when using products that claim to reduce the risk of SIDS.**
 - Products such as wedges, positioners, special mattresses, and specialized sleep surfaces have not been shown to reduce the risk of SIDS.

What expectant moms can do

- Schedule and go to all prenatal doctor visits.
- Do not smoke, drink alcohol, or use drugs while pregnant or after the birth of your newborn.
- Stay away from smokers and places where people smoke.
- Hold your newborn skin to skin while breastfeeding. If you can, breastfeed as soon as you can after birth. Skin-to-skin contact is also beneficial for bottle-fed newborns.

What sleepy parents need to know

- It is safer to feed your baby on your bed than on a sofa or cushioned chair. Make sure to remove pillows, blankets, or other soft bedding, in case you fall asleep while feeding. If you do fall asleep, move your baby back into her own bed as soon as you awake.
- Be careful not to fall asleep on a sofa or cushioned chair while holding your baby.

Remember Tummy Time

Give your baby plenty of “tummy time” when she is awake. This will help strengthen neck muscles and help prevent flat spots on the head. Always stay with your baby during tummy time, and make sure she is awake.

Listing of resources does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

American Academy
of Pediatrics



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The American Academy of Pediatrics (AAP) is an organization of 66,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults.

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