

# Your Child's Checkup: Newborn

## What to Expect

In the hospital, the doctor and/or nurse will probably:

**1. Check your baby's weight, length, and head circumference** and plot the measurements on a growth chart.

**2. Ask questions, address any concerns, and offer advice** on taking care of your baby:

**Feeding.** Breast milk is the best nutrition for infants, but store-bought formula also can provide the nutrients they need. Newborns should be fed when they're hungry, which is about every 1 to 3 hours. Your doctor or nurse may watch as you breastfeed and offer help with any problems. Formula-fed newborns take about 1–1½ ounces (30–45 ml) at each feeding. Burp your baby midway through a feeding and at the end. As they grow, babies start to eat more at each feeding, so will need fewer feedings over time.

**Peeing and pooping.** A breastfed baby may have only 1 or 2 wet diapers a day until the mother's milk comes in. Expect about 6 wet diapers by 3–5 days of age for all babies. Newborns may have just 1 poopy diaper a day at first. Poop is dark and tarry the first few days, then becomes soft or loose and greenish-yellow by about 3–4 days. Newborns typically have several poopy diapers a day if breastfed and fewer if formula-fed.

**Sleeping.** A newborn may sleep 14 to 17 hours or more in 24 hours, waking up often (day and night) to breastfeed or take a bottle. Breastfed babies usually wake to eat every 1 to 3 hours, while formula-fed babies may sleep longer, waking every 2 to 4 hours to eat (formula takes longer to digest so babies feel fuller longer). Newborns should not sleep more than 4 hours between feedings until they have good weight gain, usually within the first few weeks. After that, it's OK if a baby sleeps for longer stretches.

**Developing.** Newborn babies should:

- pay attention to faces or bright objects 8–12 inches (20–30 cm) away
- respond to sound — they may turn to a parent's voice, quiet down, blink, startle, or cry
- hold their arms and legs in a flexed position
- have strong newborn reflexes, such as:
  - rooting and sucking: turns toward, then sucks breast/bottle nipple
  - grasp: tightly grabs hold of a finger placed within the palm
  - fencer's pose: straightens arm when head is turned to that side and bends opposite arm
  - Moro reflex (startle response): throws out arms and legs, then curls them in when startled

**3. Do an exam** with your baby undressed while you are present. This will include an eye exam, listening to your baby's heart; feeling pulses; inspecting the umbilical cord; and checking the back, hips, and feet.

**4. Do screening tests.** Your baby's heel will be pricked for a small amount of blood to test for some kinds of harmful diseases. Your baby will also get a hearing test and have their oxygen levels checked before leaving the hospital.

**5. Give first immunizations.** While in the hospital, your baby should have their first immunizations. Immunizations can protect infants from serious childhood illnesses, so it's important that your baby get them on time. Immunization schedules can vary, so talk to your doctor about what to expect.

## Looking Ahead

Here are some things to keep in mind until your baby's next routine checkup in a few days:

## Feeding

### 1. If you **breastfeed**:

- Help your baby latch on correctly: mouth opened wide, tongue down, with as much of the breast in the mouth as possible.
- Don't use a bottle or pacifier until nursing is going well.
- Breastfeed whenever your baby is hungry. Pay attention to signs that your baby is full, such as turning away from the nipple and closing the mouth.
- Continue to take a prenatal vitamin or multivitamin daily.

### 2. If you **formula-feed**:

- Give your baby iron-fortified formula.
- Follow the formula package's instructions when making and storing bottles. Don't add extra water to your baby's formula.
- Don't prop bottles or put your baby to bed with a bottle.
- Give a bottle whenever your baby is hungry. Pay attention to signs that your baby is full, such as turning away from the bottle and closing the mouth.

## Routine Care

1. **Wash your hands** before handling the baby and avoid people who may be sick.
2. Hold your baby and **be attentive** to their needs. You can't spoil a newborn.
3. Keep the diaper below the **umbilical cord** so the stump can dry. The umbilical cord usually falls off in 10–14 days.
4. For **circumcised boys**, put petroleum jelly on the penis or diaper's front.
5. Girls may have **vaginal discharge** that may include a small amount of blood during the first week of life. This is nothing to worry about.
6. Give **sponge baths** until the umbilical cord falls off and a boy's circumcision heals. Make sure the water isn't too hot — test it with your wrist first.
7. Use fragrance-free **soaps and lotions**.

8. **Call your baby's doctor** if your infant has a fever of 100.4°F (38°C) or higher, taken in your baby's bottom. Call the doctor if your baby is acting sick, isn't eating, isn't peeing or pooping, isn't latching on or sucking well when nursing, doesn't seem satisfied after breastfeeding, looks yellow, or has increasing redness or pus around the umbilical cord or circumcision. Do not give any medicine without talking to the doctor first.
9. It's common for new moms to feel tired and overwhelmed at times. But if these feelings are intense, or you feel **sad, moody, or anxious**, call your doctor.
10. Talk to your doctor if you're worried about your living situation. Do you have the things that you need to take care of your baby? Do you have enough food, a safe place to live, and health insurance? Your doctor can tell you about community resources or refer you to a social worker.

## Safety

1. To reduce the risk of **sudden infant death syndrome (SIDS)**:
  - Always place your baby to sleep on a firm, flat mattress on their back, and not on the stomach or side, in a crib or bassinet without any crib bumpers, blankets, quilts, pillows, or plush toys.
  - Breastfeed your baby, if possible.
  - Let your baby sleep in your room in a bassinet or crib next to the bed until your baby's first birthday, or for at least 6 months, when the risk of SIDS is highest.
  - Avoid overheating by keeping the room temperature comfortable. Dress your baby for the room temperature and don't overbundle. Don't cover your baby's head while they're sleeping. Watch for signs of overheating, such as sweating or feeling hot to the touch.
  - Consider putting your baby to sleep sucking on a pacifier. If your baby rejects the pacifier, don't force it. If the pacifier falls out during sleep, you don't have to replace it. If you're breastfeeding, wait until breastfeeding is established before introducing the pacifier.
  - Don't let your baby fall asleep on a product that isn't specifically designed for sleeping babies, such as a sitting device (like a car seat), a feeding pillow (like the Boppy pillow), or an infant lounger (like the Dock-a-Tot, Podster, and Bummzie).
  - Don't use products or devices that claim to lower the risk of SIDS, such as sleep positioners (like wedges or incliners) or monitors that can detect a baby's heart rate and breathing pattern. No known products can actually do this.
  - Make sure that all sleep surfaces and products you use to help your baby sleep have been approved by the U.S. Consumer Product Safety Commission (CPSC) and meet federal safety standards.
2. **Don't smoke** or use e-cigarettes. Don't let anyone smoke or vape around your baby.
3. Always put your baby in a **rear-facing car seat** in the back seat. **Never** leave your baby alone in a car.
4. While your baby is awake, don't leave your little one unattended, especially on high surfaces or in the bath.
5. **Never shake your baby** — it can cause bleeding in the brain and even death. If you are ever worried that you will hurt your baby, put your baby in the crib or bassinet for a few minutes. Call a friend, relative, or

your health care provider for help.

6. Avoid **sun exposure** by keeping your baby covered and in the shade when possible. Sunscreens are not recommended for infants younger than 6 months. However, you may use a small amount of sunscreen on an infant younger than 6 months if shade and clothing don't offer enough protection.

*These checkup sheets are consistent with the American Academy of Pediatrics (AAP)/Bright Futures guidelines.*

**Medically reviewed by:** Elana Pearl Ben-Joseph, MD

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