



# New Parent Survival Guide



The most important thing we can tell you is trust your instincts. If you think your child is ill, you should call or see the doctor.

### Fever

Under 3 months of age, for 100.4 or higher, call the doctor immediately for a rectal temperature.

### Bath

Newborns - wash face and bottom once a day. You may give a sponge bath daily. Once the cord falls off babies may be given a bath every 1 to 3 days. Plain baby wash, unscented Dove, or Cetaphil are the best.

### Cord Care

Dip a cotton swab in rubbing alcohol, rub the swab gently around the umbilical cord. Do not be shy moving the cord around. The alcohol needs to get under the hard dry top to the wet base underneath so it can dry and fall off. A drop or two of blood is normal as the cord separates. If the belly button remains wet and oozing for more than one day, or if you notice redness, odor or pus, call the doctor.

### Hiccups/Sneezes/Tremors

These are normal newborn reflexes. Nothing is wrong; furthermore, there is nothing you can do to fix it. If the baby is tremoring and you think it is a seizure, place your hand on the shaking part. If the shaking stops it is not a seizure.

### Lotion/Potion/Powder

The simpler the better. Vaseline, Aquaphor, plain lotion (Keri, Lubriderm, etc.) once or twice a day is sufficient, most important after the bath. Initially infant skin is very dry and peeling. This is normal and not harmful in any way. If your child's ankles or wrists look especially cracked, put on Aquaphor or Vaseline twice a day. Powder is not generally recommended and should only be used on doctor's instructions.

### Clothing

The general rule of thumb is whatever you are comfortable wearing, plus one extra item. Everything counts - including t-shirt and blanket. If it is January and you are wearing an extra sweater, the baby also needs an extra layer. If it is August and you wish you were naked, the baby does too! Hats are not mandatory; however the baby does lose a lot of heat through their relatively large head, so if it's cool, a hat is good.



## Diaper Cream

A and D or similar diaper cream is the best for regular use. Zinc creams like Desitin, Balmex, or Triple Paste are excellent for diaper rash, however most people don't use them correctly. If your child has a rash, clean their bottom gently with water, pat dry, and apply a VERY THICK layer of zinc-based cream - so thick that you cannot see the skin. When you need to change the diaper, DO NOT wipe off all the cream. As long as you have put it on thick enough, the cream has formed a barrier against the skin and will protect it from stool and urine. Secondly, the wiping required to remove all the cream is very irritating to baby's skin. Twice a day the baby's bottom should receive a gentle and thorough cleaning at the sink or bath, be patted dry and covered afresh with the zinc-based cream. Although wipes are usually okay, do NOT use them if your baby has a rash, as they may burn and worsen the rash. Instead, use wet washcloths (or soft paper towels that have been wet). If the rash is getting worse or will not go away after a few days, your child may need to be seen by the doctor.

## Nail Care

Babies' nails are very sharp and grow very quickly. You may need to trim them twice a week. This is a very fearful procedure, as even the best of us have cut the tip of the infant's finger while trying to trim the nails! The guilt! Luckily, baby skin heals very quickly and the incriminating evidence is soon gone. The same applies for scratches on the face. We have never seen a baby scratch scar, no matter how bad it looked initially. You may cut, peel, or bite off the nail. Many people trim nails while the baby is sleeping. Good luck!

## Sleep

Cuddle, rock, and hold your baby all day long, but when it is time for the baby to go to sleep (naps or nighttime) you need to put the baby on their back in the crib or bassinet.

Especially if this is your first child; We can't say this strongly enough - PUT THE BABY DOWN TO SLEEP! Everyone loves to hold and rock a sleepy baby. So cute. Grandparents, neighbors, friends. Guess who gets to get up at 3am to rock the baby back to sleep? Parents! All people, including newborns, know where they are when they fall asleep and expect to remain there throughout their sleeping time. If the baby fell asleep being rocked in your arms and then wakes up in the crib, it's as if you went to sleep in your bed and woke up on the kitchen floor! So, when the baby is ready to fall asleep, put them in the crib or bassinet - awake, calm, and drowsy. This one step alone will save you months or even years of endless anguish. As for the back/side/tummy issue, placing babies on their backs reduced the rate of crib death by 40%. That's an amazing number to achieve in medical studies! Subsequent studies have shown that although side sleeping is better than tummy, it still has a higher rate of crib death than back sleeping.



## Breastfeeding

Breast fed infants need to eat every 1 to 3 hours. If the baby sleeps a nice long 3 to 6 hours, they will likely awaken ravenous and need to eat frequently for the next few hours. In the early days home, the baby should not go longer than 4 to 5 hours (once a day) without feeding. Lots of books say lots of things about how long each feeding should last. In the end you will find your own rhythm with your new baby. In short: an awake, hungry infant who is happily eating can empty a breast in 5 to 10 minutes. Therefore, an actively eating baby does not need more than 15 to 20 minutes per breast, and may even be switched sooner. There is NO reason to nurse more than 20 minutes on one side or you will be in a lot of pain, with no extra benefit for the baby. A pokey eater may be kept awake by undressing, stroking back or head, or by putting a cold washcloth on their head. A nursing baby against mom's warmth will not get too cold. You are trying to irritate the baby enough to stay interested in sucking. Again, 20 minutes per side, even with a very sleeping unmotivated baby is enough. For the very avid eater who would eat continuously, 20 minutes per side is enough. Keep in mind babies are programmed to suck as a survival skill. Some babies would suck all day and night and mom will be crying in pain. If your baby still wants to suck, pacifiers or Dad's finger (nail turned to tongue) is an excellent solution. A baby will never prefer a pacifier to mother's breast or bottle, because they don't get the milk reward. Pacifiers can be very handy.

**Supplementing** with formula is often prescribed by the doctor. There is always a good reason, and instructions should be followed to prevent the baby from getting dehydrated. Specifics on supplementing your baby should come from your doctor.

## Bottle Feeding

Breastfeeding is not for everyone. It is okay if breastfeeding doesn't work for you, we went to medical school with lots of people raised on formula! We do encourage you to try breastfeeding; for some women it is much easier and enjoyable than anticipated. Other women expect to breastfeed and finally decide to stop for their own mental health! A happy mom makes a happy baby. One suggestion for struggling moms is this: You cannot learn anything new when you are tired, hungry, and sleep deprived. Sit down in a quiet place with a big glass of water (Dad's job is to help this blessed event to occur) and try to feed the baby for 5 minutes. If the baby is too tired or hungry or angry, STOP. Supplement with a bottle or syringe feeding, say 20 to 30 ml. If you want, try again to put the baby to breast; if they are calmer now it just might work. If you or the baby are too worked up, just finish the feeding with formula and try again next feeding. You and the baby must learn together as a team, and **YOU HAVE TIME**. Not everyone is nursing happy as a clam in the delivery room! A calm, relaxed mother makes a calm, relaxed baby as does anxiety and stress build more anxiety and stress. A few days of learning are expected, and with formula supplements so readily available, babies in this day and age don't just have to survive, they can thrive!



## Bottle Feeding Only

Babies need to eat every 3 to 4 hours on average. They should not go more than 6 hours without trying to feed in the early days.

Formula may be bought ready to feed, concentrated, and in powder form. It's all a matter of finances, it is the same stuff.

Concentrated and powder may be made with tap water, the fluoride is good. If you want to boil the water, it should not boil for more than 5 minutes, or impurities will begin to

concentrate in the remaining water. The water should be cooled before making formula. You can make formula up in batches to keep in the fridge for up to 48 hours at a time. Once a baby has eaten from a bottle, the remainder should be discarded. Bottles do not need to be sterilized. Bottles and nipples should be washed in warm soapy water and left to air dry, or they may be washed in the dishwasher.

## Congestion

All babies sound congested, especially in the wintertime. Their nasal passages are small, and the slightest mucous makes them sound like an old man snoring! You CANNOT use cold medicines in babies under 4 to 6 months of age! You CAN use nasal saline drops (buy the cheapest one, it's just salt water). Put 4 to 5 drops or one squirt into one side of your child's nose. The child will hate it and will cry and sputter and hopefully sneeze or cough.

This loosens the mucous so that baby can sneeze it out or swallow it down. If the baby still sounds very noisy, now is the time to use your bulb suction (blue thing from the hospital) to suck out any remaining snot. Now do the other side: saline, then suction if needed. All we can do to help the baby is help move the mucous. Nasal saline is very safe and will not hurt the baby's nose. You may use it as often as needed. Keep in mind the bulb suction is irritating to the nose, so only use it if there seems to be something you can suck out.

## Pumping

Many mothers pump their own breastmilk to give them the freedom to return to work, go out for a few hours, or just get some sleep while Dad gives a midnight bottle. Be wary of pumping in the early days. Sometimes mothers are instructed to pump in order to increase or protect their milk supply, especially if the baby is having trouble latching and nursing well. If you have NOT been instructed to pump, be careful! The more you pump the more you make. If you are engorged and just need some temporary relief, you could pump, but only pump a little - just enough to take the edge off - you are likely to find yourself even more engorged later. Each time you pump (or feed) you are telling your body that you need the milk, and it will make more accordingly.

**Storing Breastmilk:** 3 hours counter  
3 days fridge  
3 months regular freezer  
6 months or more deep freezer

We have seen other sources that allow for much longer time, but do not agree. Breastmilk is nutritious, and bacteria are just thrilled to grow in it. Think of it like you would think of lunch meat, if you would be comfortable eating the meat, then the baby can have the milk.



## Spitting Up

All babies have some spitting up. The muscle at the top of their stomach is very weak and the stomach contents slosh back up. Some babies spit up all the time, could care less and grow well. These babies are fine. Some babies spit up often, seem very uncomfortable, sometimes even pull away halfway through a feeding which they initially seemed very hungry for. Some babies never spit up but have all the symptoms of discomfort during or after eating, possibly including arching of the back. If your baby seemed uncomfortable with spitting up or does so during or after a meal on a fairly regular basis you should see your doctor.

## Gas

Gas is good as long as it's passed! Burping and flatulence are good! Gas stuck inside the belly can be painful. The best thing you can do is burp the baby well. You may use Mylicon drops or Gripe water, which are safe. Some parents swear by them, some parents swear at them.

## Stooling

In the first few days after the birth the baby must stool at least once every 24 hours. By the second week, especially in formula fed babies, there are fewer stools; some babies stool only once every 3 to 4 days, or even once a week! Stools may be yellow, orange, green (even fluorescent!) or brown. Call if they are white or have any signs of blood. Stools often look seedy, runny, even foamy - this is all okay! Babies have very underdeveloped abdominal muscles; therefore, many infants grunt, groan, struggle and turn red with stooling. The baby is NOT constipated if they are happy, and the stool is soft when it finally passes. If your baby is in distress, or the stool is very thick or hard-like rabbit pellets, then you should call the doctor.

## Colic

Starting around 4 to 6 weeks, most babies have a fussy period in the early evening, but if you're not ready to jump out a window, it's not colic. Colic is defined as an inconsolable crying period lasting at least 3 hours (total in the day), usually in the evening hours, at least 3 times a week. The baby appears to be in pain, and although you may be able to settle them down a little, the crying persists until the episode finally passes. Some parents describe it as if someone were jabbing a knife in the infant's belly. No one knows what causes colic, or truly how to fix it. It does go away, usually by 3 months of age. If you think your baby has colic, you need to see your doctor. There may be something wrong that can be addressed.



## Crying

Is normal. This is the baby's only way to tell you they need something. Especially in the first weeks, attend to the baby when they cry. The first weeks are critical for building a trust between parents and babies. The baby needs to know that when they need something, you will take care of it (or at least try your best). Once this trust is established, the baby tends to cry less, because there is less worry that you might not take care of their needs. As they grow you learn that babies have different cries for different needs ("I'm hungry!" "I'm wet!" "I'm tired!" "I'm having a grumpy day!") The routine goes like this: Baby cries! Are they hungry? Are they wet? Is it time to sleep? This is an endless cycle. If you cannot seem to find the reason for the crying, strip the baby down and check that all parts are and there are no hair tourniquets (a hair that got wound around the baby's finger or toe or penis that may be causing pain). If you are getting stressed, put the baby in the crib or bassinet for 5 to 10 minutes and walk away. You need to regain your cool. Dealing with a screaming baby that you cannot sooth is EXTREMELY stressful. You will probably consider that you now understand how child abuse could hapen. If you can't calm down, you need IMMEDIATE help for the baby. Call a neighbor, auntie, or whoever has the slightest chance of being avaiable to help out.

## Cradle Cap

A skin condition, many newborns experience involving yellow "greasy" flakes attached to the baby's scalp (and sometimes eyebrows). Cradle cap is only cosmetic, not dangerous! It's easy enough to get control of, though there is no "cure". Massage mineral oil (baby oil) into scalp about 30 minutes before a bath. Just before the bath use the baby comb to try to comb off all the softened crusts. If you do this once in a while as needed, it should keep cradle cap under control. If your child has persistent cradle cap you may also use Selsun Blue. Massage the Selsun Blue into scalp at the beginning of bath and wash it off at the end. If some of the shampoo gets into the baby's eyes, it may sting, but it will not cause any damage.

## Thrush

Many babies have white tongues, this is from the milk and is okay. If the white gets very thick, cannot be wiped off with a washcloth or dry paper towel and there are spots of white on the cheeks and lips then it is probably thrush, and you should call or come into the doctor's office. Thrush is simply a yeast infection of the mouth that many babies get and does not mean there is anything else wrong with your baby.



## Visitors

Germs come from people (not the weather!). Germs cause illness. If your baby of 2 months or younger gets a fever, it is a big deal.

Therefore, **NO SICK PEOPLE** should visit/kiss/hold/touch your baby! (Sick meaning cold, cough, runny nose, cold sore, or stomach flu; long term illnesses such as cancer are not usually of concern. Please ask your doctor if you have a special situation.) Be firm and blame the doctor. You can act sweet and nice and moan about how strict your doctor is when you tell your great aunt she shouldn't come over because she has a cold - because your doctor told you so! Children who are well and old enough to wash their hands thoroughly are not a big worry. Smaller children are best asked to stay away, but good judgement can certainly be put to use. Your own children... well... use Purell and pray!

Please don't try to keep your children separated. It never works anyway and just adds to stress and encourages your toddler's belief that you should give the baby back. A good thing to inform your toddler is that babies LOVE to be kissed on their feet! (Not their faces.) Moms sometimes get sick - please try not to go clean crazy or stay away from you infant. If mom gets sick, the baby will too, there is no other way. If you are breastfeeding, please stay well hydrated and continue to breastfeed as you will produce antibodies to any cold you have and will actually help protect the baby from getting as sick as you did. Antibiotics are rarely a problem for breastfeeding, though many adult doctors may tell you to stop - **PLEASE CALL** to check with your pediatrician before stopping breastfeeding. Dad getting sick is much murkier business. Our recommendation is to wash hands, don't smother the baby in kisses (when Dad is sick), and cross your fingers.

## Watery Eyes

Many parents notice the baby's eyes seem to water a lot or have a small amount of clear or white discharge. This is from blocked tear ducts. You may have noticed that when you cry, your nose runs. This is because there is a tiny duct that runs from your lower eyelid to your nose to keep your eye drained. This duct is so small in babies that it is often blocked, so the eye fluid builds up. All you need to do is wipe away any excess drainage with a soft, wet washcloth. If you notice the discharge has become very yellow or green, or the eyeball is red, you should call or visit the doctor as the eye has likely become infected.





## Visiting

YES! You may go out with the baby. You need to go out with the baby for your own mental health, and that of those around you! With the exception of severe weather, walks are just fine. Shopping and religious services are ok but take caution! You don't want anyone to hold, kiss, or sneeze on your beautiful baby. If the nice old lady at the deli counter leans in for a squeeze, pull out your mother tiger routine and blame either your hormones or your doctor! (Laugh as you say, "Between my hormones and the doctor, I'm just paranoid about the baby getting sick!") In general, public outings are much safer than family gatherings. Families feel they have rights to your child and are more likely to pick the baby up and smother them with kisses and germs! So, a trip to the mall at a slow time is much better than attending a wedding. A small bottle of Purell in the diaper bag is great for those times when you've been out, and just want to kill the germs off your hands before you pick up and tend to the baby. Please remember the baby MUST be strapped in a car seat for the duration of all automobile rides - NO EXCEPTIONS! You must pull over and stop to breastfeed the baby!

## Airplane Travel

Is not recommended before 3 months of age. Emergencies do happen, please speak with your doctor for specific recommendations.

## Marriage

This is one of the toughest times your relationship will go through. Stress and worry over the well-being of your new infant is immense. Sleep deprivation is cumulative, leading to crankier and crankier parents and babies. Resentment looms large. Hormones rage wild, added to engorged painful breasts, sore nipples and general healing after childbirth. Keep in mind this is a generally stressful time. Try to take stock of your situation, take turns getting up, and most importantly keep talking to each other. Accept whatever extra help comes your way. Try to get out of the house, if even just to take a walk.



## Product List

- Petroleum Jelly
- Cotton Swabs
- Rubbing Alcohol
- The First Year's Digital Rectal Thermometer
- The First Year's Bulb Suction/Nasal Aspirator
- Nasal Saline
- Pacifier and clothing clip



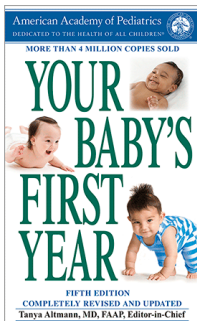
## Breastfeeding

- Medela Pump In Style, if you buy.
  - Renting is a good option for mom's who don't plan to go back to work right away.
- Lansinoh Lanolin for nipples (ok for infant to ingest from nipples)
- Lansinoh Breast Milk Storage Bags
- Gerber Nursing Pads
  - (Heavy or Medium flow - the best! Ultrathin ok for later on when less leakage.)
- Materna Mates (or other brand) gel pads. Great for soothing sore nipples, especially if you keep them in the refrigerator.

\* Where noted, brand names are those we've tried and recommend. Elsewhere, generic means generic, you can spend more for prettier packaging, but there is no discernable difference in the product itself.

## Books

Your Baby's First Year from the American Academy of Pediatrics



If you already have What to Expect the First Year, hide it under your bed, it will make you crazy otherwise!

