

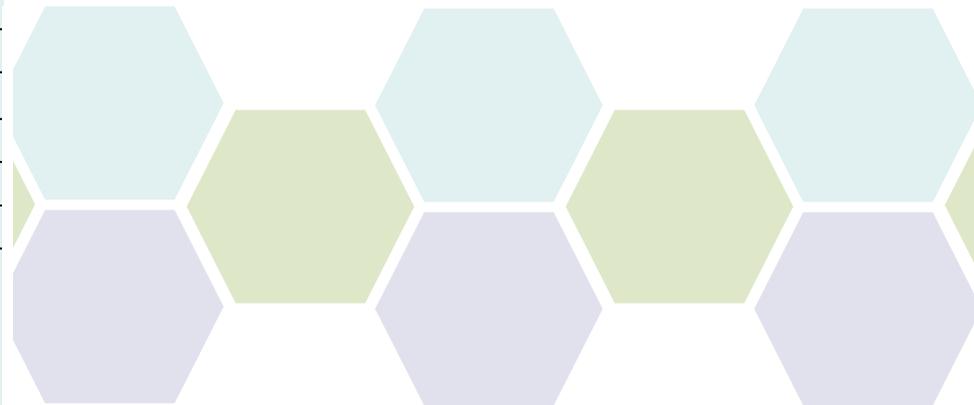
SCHEDULE FOR CHECK-UPS

2	Weeks	Hep B ₁
1	Month	NO SHOTS
2	Months	DTAP ₁ / IPV ₁ / Prevnar ₁ / Rotateq ₁
3	Months	Hep B ₂ / HIB ₁
4	Months	DTAP ₂ / IPV ₂ / Prevnar ₂ / Rotateq ₂ / Assess Dev't
6	Months	DTAP ₃ / Prevnar ₃ / HIB ₂ / Rotateq ₃ / Assess Dev't
8	Months	Hep B ₃ / HIB ₃ / Assess Dev't
10	Months	Assess Dev't
12	Months	Varivax / Prevnar ₄ / CBC / Assess Dev't
15	Months	MMR ₁ / Hep A
18	Months	DTAP ₄ / IPV ₃ / HIB ₄ / Assess Dev't
21	Months	Assess Dev't
2	Years	MMR ₂ / Hep A ₂ / Assess Dev't
2.5	Years	Measurement & Weight Only
3-4	Years	CBC / Assess Dev't
5	Years	CBC / B/P / Varivax / DTAP ₅ / IPV ₄ / MMR (if not had)
6-10	Years	CBC / B/P
11	Years	CBC / B/P / Menactra / Gardasil
12	Years	Td or Adacel / CBC / B/P
13-17	Years	CBC / B/P
18	Years	Adacel / CBC / B/P / Menactra



Newborn Instruction Manual

Tamara P. Folz, MD, FAAP, IBCLC
 Susan K. Welch, MD, FAAP
 Jamie Carpenter, FNP



Dear Parents:

Congratulations on the birth of your new baby!

The next few months will be an exciting time for you. As parents, you will naturally be concerned about caring for your baby and providing proper nutrition. We are here to help and are available to answer any questions you may have.

As your baby's care providers we feel it is our obligation to share important information with you about infant nutrition. You should know that meeting your baby's nutritional requirements will never be more important than during the first year. What you feed your baby during infancy will be the foundation for your child's growth and development.

Breast milk remains the nutrition of choice for all babies. Should formula be necessary as an alternative, we can recommend which formula is best suited for your baby. Use of either breast milk or formula should be continued until the first birthday.

Again, congratulations! We look forward to caring for your new baby.

Sincerely,

Tamara P. Folz, MD, FAAP, IBCLC
Susan K. Welch, MD, FAAP
Jamie Carpenter, FNP

All Better Pediatrics

1102 Brookfield Rd., 2nd Floor
Memphis, TN 38119
(901) 761-1880

OFFICE HOURS

Monday - Friday 8:30 AM - 5:00 PM
Saturday 8:30 AM - 1:00 PM

APPOINTMENT TIMES

Monday - Friday 9:00 AM - 4:00 PM
Saturday 9:45 AM - 12:00 PM

Things to Expect (cont.)

FEEDING

1. If you are breast-feeding, alternate breasts during each feeding. Begin the next feeding with the breast last used.
2. Your baby will cry when hungry and take a bottle eagerly. Most bottle-fed babies will take 2 1/2 to 4 ounces of milk with each feeding after the first two weeks.
3. Feed your baby when she is hungry. Time between feedings will vary from 2 to 5 hours. Do not let your baby sleep longer than 4 hours between feedings during the day so he will sleep longer at night. Your baby will need to be awake for anywhere from 2 to 6 hours a day. Try to keep your baby awake one hour before and during the daytime feedings as this will help prevent long wake periods during the night.
4. Bottles and bottle nipples need to be cleaned but sterilization is unnecessary.
5. For routine or supplemental bottle feeding, we recommend Enfamil® Newborn.

Our website is full of useful information about breastfeeding, bringing baby home from the hospital and summaries of various conditions and injuries and what to do/when to call us. Please visit us online at www.allbetterpediatrics.com

PLEASE RESERVE AFTER HOURS AND NIGHT CALLS FOR ACUTE PROBLEMS OR EMERGENCIES. Call about routine or chronic problems during office hours. Prescriptions are not called in after regular hours. (901) 761-1880.

Things to Expect

1. All babies “spit up” occasionally: this is not alarming. Burp your baby during and at the end of each feeding. If the baby persistently vomits after every feeding, give us a call. The most common cause of vomiting in infants is overfeeding.
2. Babies have variable number of bowel movements and it is normal for them to have none to as many as ten a day. These stools are generally loose, semisolid, yellowish-green in color and will frequently contain small amounts of mucus and milk curd. Babies usually stool while feeding or immediately after. Babies normally turn red and fuss when they have a bowel movement. Not infrequently, a baby will have a stool only every other day and this, too, is normal as long as the stool is soft.
3. Although an infant’s eyes do not yet focus, babies will usually flinch when they see a bright light and try to follow it in an irregular way; they can hear and will respond to loud noises they can taste and smell. During these first weeks, their eyes focus for increasingly longer periods of time. They learn to recognize familiar voices and begin to make throaty noises. They may even favor you with their first real smile.

EVERY BABY IS DIFFERENT

Your new baby is very much an individual, different from every other baby - even those in your own family. Your baby will grow and develop in his own way and at his own rate. Comparing your baby’s growth with that of others is not very helpful and may cause you needless worry. Your doctor is the best judge of your baby’s development. This is why we ask you to bring your baby in for frequent checkups. It is wise to have monthly visits with your baby during the first six months so we can check his or her development as we add foods to the diet and begin immunizations.

Instructions for Newborn Care

We are honored that you have chosen All Better Pediatrics to guide you in caring for your new baby. We share in your joy on this happy occasion. Please read this helpful pamphlet completely and keep it handy as a future reference guide.

ITEMS YOU WILL NEED

1. Acetaminophen Drops: You can purchase liquid acetaminophen over the counter (without a prescription). ***If your baby has a fever higher than 100.4 rectally during the first 8 weeks of life, you need to call our office.*** Please do not give Tylenol to a baby in the first 8 weeks of life without talking to us first. Use ONLY acetaminophen until your baby is 6 months old. After 6 months of age, you may use either acetaminophen or ibuprofen, given as directed.
2. Rectal thermometer
3. Rubber bulb ear and nose syringe. This is used to clean the nose and not the ears. It may also be used to clean your baby’s throat if he becomes choked.

BATH AND DIAPERING

1. Dove® white, unscented soap may be used for bathing unless suggested otherwise.
2. Do not immerse the baby during bathing until the umbilical cord is completely healed.
3. Use lotion sparingly on dry or cracked areas of skin.
4. Care of diaper area: Diapers, regardless of the type, must be changed frequently and the skin cleansed gently with water or baby wipes. Unscented Vaseline® or Aquaphor® may routinely be used in the diaper area.

Instructions for Newborn Care (cont.)

NAVEL AND CORD CARE

The navel cord will dry out, turn black and fall off at about 7-21 days. It is NOT necessary to clean the cord with alcohol; just keep it clean and dry and exposed to air.

CIRCUMCISION

The circumcision needs very little care. Although it may look raw and infected to you, it will usually heal in 7 days and needs only a coating of Vaseline® or triple antibiotic ointment at each diaper change to keep off the urine and stool.

EARS

Do not clean the ear canal with Q-tips®. This pushes wax deeper into the ear canal and creates ear problems. You can clean the outside of the ear with a wash cloth.

BREAST

Almost all babies have breast swelling. No special medicine or attention to the breast is necessary. This is due to hormone changes. Female infants may have a pinkish or whitish vaginal discharge which is also normal and hormone related.

RASHES

Babies have a variety of rashes from time to time and generally the best treatment is to do nothing, just keep the skin clean and dry. Most rashes will resolve in a few days on their own.

NAILS

Keep nails short to prevent injury from scratching. Do not cut nails too close, as the nail bed is easily infected. Filing nails is usually easier than clipping them.

EYES

The eyes will frequently mat together and this is normal. Warm water on a soft cloth will clean away eye secretions. If there are heavy secretions and they persist for several days, bring your baby in for an examination.

Instructions for Newborn Care (cont.)

NOSE

All infants sneeze. Excessive secretions should be cleared with gentle aspiration using a bulb suction. You may also use saline nose drops (available without a prescription) to loosen secretions before using the bulb suction.

SLEEP

The Academy of Pediatrics advises always placing your baby on his/her back to sleep.

ROOM TEMPERATURE

The room temperature should be about 72 degrees. Dress your baby in clothes of a weight that would be comfortable for you. Your baby needs the same amount of cover that you need. Newborn infants cannot perspire and become overheated easily if overdressed.

COLIC

There is no cure for colic and it must run its course, but some medication or a change in feeding/formula may be recommended. You may try Mylicon gas drops (available without a prescription) as directed. Calls concerning colic should be made during office hours please. We highly recommend reading Happiest Baby on the Block by Dr. Karp for tips on helping to calm colicky babies.

CRADLE CAP

Any selenium sulfide-containing shampoo (i.e. Sebulex® or Selsun Blue®) may be used to clean scalp of crusts along with brushing the scalp with a soft brush.

HICCUP

All babies hiccough on occasion. Simply burp your infant if she has just been fed.