**Umbilical Cord**

- Begins to dry 1-2 hours after delivery.
- Cord stump changes from yellowish green to brown to black as it eventually falls off, usually within 2 weeks of birth.
- Keep cord dry and clean.
- Newborn providers prefer you put nothing on the cord.
- May submerge infant in water for bath; then dry area well.

**Diapering**

- Change diapers before and after feedings.
- Fold top of diaper over to fit below umbilical cord unless cutout is provided.
- Cleanse infant’s bottom; wipe female genitalia front to back.
- Baby powder or cornstarch is not recommended.
- Olive oil is appropriate for newborn skin; baby oil or lotion is not necessary.
- Infant genitalia are often swollen after delivery and will gradually decrease.
- Sometimes uric acid crystals in the urine dry in the diaper. They can be harmless or indicate dehydration if deposited frequently.
- Initially, newborn girls may have blood spots on diaper due to mother’s hormones.

**Signs of Hunger**

- Early signs of hunger:
  - Rooting
  - Stirring and stretching
  - Sucking motions and lip movements
- Later signs of hunger:
  - Sucking on fists
  - Fussy noises, crying
**Formula Feeding**

- Feed when baby is hungry, typically every 2-4 hours. Baby will feed more at 2-, 4- and 6-week growth spurts.
- Initiate Bottle Feeding Diary.
- Formulas are available as ready-to-feed, concentrate and powder.
- Check with your baby’s doctor when choosing the formula best suited for baby.
- Wash hands before preparing formula, and wipe off formula can before opening.
- Follow manufacturer’s instructions exactly when making up formula.
- Clean equipment before use.
- Do not use formula past expiration date.
- A bottle can be warm or room temperature; baby likes consistency.
- Never microwave when heating formula.
- Test temperature of formula before feeding to baby.
- Throw away leftover formula.
- Burp baby after ½ -1 oz. and again halfway through feeding to eliminate trapped air, allowing baby to drink adequate amounts at a feeding time.
- When burping, use a position that puts pressure on baby’s tummy.

**Breastfeeding**

- Refer to “Your Guide to Breastfeeding” booklet.
  - Pages 11: **How Often** – ASAP after birth, then 8-12 times every 24 hours. The more the baby nurses, the faster mom’s milk comes in.
  - Pages 11: **How Long** – Feedings may be 15-20 minutes per breast.
  - Pages 16-19: **Feeding Goals, Feeding Chart, Wets and Poops, Diaper Tracker**
    - Pages 12-13: **Latch** – How to bring baby to breast; 9 signs of a good latch; breasts may be tender, but breastfeeding should not hurt! Assess latch. Optional video: “Bringing Baby to Breast”
  - Pages 14: **Positioning** – Cradle hold, cross cradle, football hold, side-lying, laidback.
  - Page 11: **Pacifiers** – Best to wait until baby is 1 month old.

**Infant Temperature**

- Infant temperature should be taken rectally (using KY jelly).
- Digital thermometers are recommended.
- Rectal technique: Lay baby on tummy. Lubricate end of thermometer. Insert ½ inch into baby’s rectum. Stabilize baby while waiting for reading.
- Normal infant temperature range taken rectally is 97.6-100.3 degrees Fahrenheit.
- Call baby’s doctor with rectal temperature of 100.4 or greater.
- Many young infants like to be swaddled. It preserves heat and prevents overstimulation.
Bathing and Skin Care

- Gather supplies before beginning bath, never leaving baby unattended.
- Tub bath every third day.
- Use mild, pH-balanced soaps.
- Choose dye- and fragrance-free skin care products.
- Room should be warm.
- Check temperature of water to avoid burning or chilling baby.
- Begin by washing baby’s face with clear water.
- Wash eyes from the inside out, using corner of washcloth. Avoid using cotton balls.
- Wash baby’s gums and complete washing remainder of body.
- Review with your physician the use of sunscreen and insect repellent.

Circumcision Care

- Prior to procedure, baby is given oral sucrose, pacifier for non-nutritive sucking, and Lidocaine block for pain control.
- After a Gomco procedure, apply Vaseline ointment to circumcision.
- After a Plastibell procedure, DO NOT apply Vaseline to circumcision.
- Yellowish discharge on the tip of penis is normal; do not try to remove.
- Site may be submerged in bath water; practice varies, so check with baby’s doctor.
- Site of circumcision will heal in 7-10 days.
- Gently clean groove under head of penis at each diaper change.
- After discharge, parents should be watchful of foreskin creeping back toward head of penis. If observed, call baby’s doctor for instructions.

Uncircumcised

- Wash baby’s penis with soap and water during each bath.
- No need to clean beneath the foreskin. It retracts on its own, usually by age 5.
- At that time you will teach your son to gently retract the foreskin and wash the penis with soap and water, rinse, dry and gently pull the foreskin back over the head of penis.
Safety and Safe Sleep Practices

- Place baby on back alone in crib, bassinet or Pack 'N Play in parents’ room.
- Baby should not sleep on bed, couch or chair or with anyone.
- If you bring baby into bed with you to breastfeed, put baby back in bassinet, crib or cradle when finished. Falling asleep with baby is dangerous!
- Pets should not share sleep space with baby.
- No pillows, blankets, bumpers, toys or stuffed animals in the baby’s crib.
- Being hot is not good for baby.
- Avoid smoking, alcohol and drugs. They hurt baby, too.
- Refer to handout in Patient Admitting Folder: “Helping Baby Back to Sleep.”
- Babies should never be swaddled for sleep. Place baby in a sleep sack for safe sleep.

Tummy Time

- Place baby on his or her stomach frequently when he or she is awake and someone is watching.
- Tummy time strengthens baby’s head, neck and shoulder muscles and helps prevent flat spots on head.

Shaken Baby Syndrome

- Occurs when infant or young child is violently shaken.
- A few seconds of violent shaking can cause severe brain damage and even death.
- Alleviating caregiver’s stress at critical periods of crying significantly reduces risk.
- Make sure baby’s basic needs are being met: hunger, burping, change diaper, temperature (not too hot, not too cold).
- Call a physician if you suspect baby is ill or has a fever.
- Call a friend or relative for support or to take care of baby while you take a break.
- If nothing else works, put baby on back in crib, close door and check baby in 10 minutes.
- Review “Babies Cry!” in Patient Admitting Folder.
- View “Happiest Baby on the Block” video.
Jaundice

- Yellow discoloration of infant’s skin and eyes will usually develop during the 2nd or 3rd day of life in more than half of all full-term babies.
- Jaundice is fairly common in late preterm infants. Blood tests and phototherapy may be used to diagnose and treat. This may continue even after discharge from the hospital.
- Caused by normal breakdown of extra blood cells not needed after birth. When red blood cells break apart, bilirubin enters the bloodstream, causing skin to look yellow.
- All babies are screened for jaundice prior to discharge.
- After discharge, call baby’s doctor if baby’s skin is yellow down to their legs.
- A blood test may be done to confirm jaundice.
- Treatment is phototherapy done at home with a bili-blanket.
- Bilirubin is eliminated through baby’s bowel movements. It is important for baby to drink lots of breast milk or formula (hydration) and have frequent bowel movements.
- Mom should wake baby to feed every 3 hours until jaundice is resolved. Refer to Jaundice handout in Patient and Family Resource Binder.

Infant Car Seats

- AAP advises parents to keep their infants and toddlers in rear-facing car seats until age 2, or until they reach the maximum height and weight for their seat.
- In cold weather, dress baby in thinner layers instead of bulky coat or snowsuit. Tuck blanket around baby after harness straps are buckled (AAP).
- Parents advised of concern about integrity of car seat.
- Infant car seats need to be safely installed in your vehicle before baby is discharged from hospital. Review Safe Kids Car Seat Safety Inspection Schedule in Patient and Family Resource Binder.
- Avoid buying used car seats, as safety standards change and car seats expire.
- OB staff are not car seat experts and can’t place baby in the car seat for you. We will provide verbal guidance.