

Newborn Care

Hospital Safety

Safe Sleep While in the Hospital

Co-sleeping, or bed sharing, is when a parent and baby sleep together in the same bed. This can be dangerous.

- The baby could fall off the bed
- The parent could roll onto the baby
- Soft bedding increases the risk of SUID (Sudden Unexpected Infant Death)

Hold your baby skin to skin as much as possible, but when you are drowsy, put your baby in the crib next to your bed, ask your family to help you, or press your nurse call button for help.

Newborn Identification and Security During Your Hospital Stay

Your baby has three bands that were placed after birth:

Admission information band – soft sponge band placed on baby's wrist or ankle.

Identification bands - identically numbered, soft plastic bands on your baby's wrist and ankle. You and your significant other will have these bands, too.

Electronic security device – security device placed on baby's ankle to monitor baby's location.

You may cover the security device with socks. Attempting to remove the device will set off alarms. If you take your baby into the hallway, they must be in a bassinet. Stay away from unit exit doors and open stairway entrances while walking with your baby.

At discharge, we will identify your baby by the ID band, and then remove the security device.

Ensure your baby only leaves your room with an authorized Pavilion for Women staff member.

- Check for a solid, light blue badge, with the staff member's name, photo, and Pavilion logo. Say NO if anyone without this badge asks to take your baby from your room.
- When staff members bring your baby to you, they will compare your ID band to the baby's ID band.
- Always keep your baby in sight, and don't leave your baby alone in your room.



Basic Baby Care

Safe Sleep at Home

- Make sure baby sleeps flat on his or her back in a crib or bassinet on a firm mattress.
- There should be nothing in the crib but your baby – no pillows, no stuffed animals or toys, and no thick blankets.
- Sleep in the same room as your baby for at least six months.
- Prevent your baby from overheating while sleeping. Keep your home at a comfortable temperature, dress your baby in just one light layer more than what you are wearing and avoid using hats indoors.
- Do not allow anyone to smoke or vape around your baby. Do not allow anyone to hold your baby after smoking until they have changed clothes and washed their hands.

Umbilical Cord Stump Care

Your baby's umbilical cord stump will heal and fall off in about two weeks. Keep the area clean and dry, and do not put alcohol on the area. When diapering your baby, tuck the diaper below the cord stump.

Your baby's umbilical cord stump may have a slight smell as it heals. Call your baby's doctor if the area smells very bad, looks red or has drainage.

Diapering

Change your baby's diaper when it is wet or soiled. Do not use baby powder because it can cause breathing problems. If your baby's bottom looks red or chapped, use diaper cream on the area as it heals.

It is common for male or female baby's breasts and genitals to be swollen at first due to hormones passed to them before birth. This swelling will decrease within a few weeks.

If your baby had a circumcision, care for the penis following the instructions your doctor gave you.

Female babies may have vaginal discharge, which can look like light bleeding or be pink or white. This discharge is normal and should go away within ten days.

Count the number of wet and soiled diapers each day. Your baby should have at least one wet diaper per day of life (at least 1 on day 1, 2 on day 2, 6 on day 6) and 3-4 poopy diapers by days 5 to 7. These are signs that your baby is getting enough milk. Read your feeding guide for more information.

Cleaning and Bathing

Wash your baby with a soft washcloth and soap and water until the umbilical cord stump falls off. Do not set your baby in water while the umbilical cord stump is still attached.

After the umbilical cord stump falls off, your baby can be set in a tub for bathing. Keep your baby within arm's reach at all times when they are in the tub. Bathe your newborn as often as needed, generally three times per week. Most babies don't like baths at first, but in time they will enjoy bathing.

Interacting with your Baby

Be loving toward your baby and give them attention. Respond to them every time they need something. This helps your baby grow and develop. It does not spoil them.

Your baby will have a number of short periods of being calm and alert each day. This is a great time to interact and play.

- Babies most developed sense is their sense of touch. You can hold your baby skin to skin or do some short baby massage sessions.
- Babies love looking at their parents' faces. Hold your baby in your arms, make eye contact, and talk with them.
- Tummy time helps strengthen baby's neck and back. During play sessions 2 to 3 times per day, put your baby on their tummy for 3-5 minutes. Work up to 15 to 30 minutes each day by 7 weeks.

Crying

All babies cry. It is their way to get your attention and tell you they need something. Always respond to your baby when they cry and try to meet their needs.

It's common for babies to start crying more when they're about two weeks old. Their crying usually gets worse until they are about two months old (the peak). At the peak of crying, your baby may cry two, three or more hours per day. After the peak passes, crying starts to get better. Babies cry much less by the time they are three to five months old.

Sometimes, no matter what you do, your baby may start crying and keep going. When they cry, they can look like they are in pain, even though they are not. Crying could go on for 30 minutes or longer. This can be worrying and frustrating, but this kind of crying is a normal part of your baby's development. Your baby is not crying to make you mad or manipulate you.

Caregivers may get overwhelmed or angry when a baby cries for a long time. If any caregiver starts to lose their temper, they should put the baby in a safe place like a crib and go somewhere where they can't hear the crying for 10-15 minutes. This will not hurt the baby, and will give the caregiver time to cool down.

Be sure everyone knows never to shake, hit or throw your baby. These actions can cause permanent injury or even death.

Car Safety

Never leave your baby alone in a car, even for a moment. Cars can become dangerously hot quickly, even when it doesn't seem very hot outside. Always check your back seat when leaving the car. Keep parked cars locked and keep the keys out of reach and out of sight.

When traveling by car, always use a car seat for your baby. Be sure to have the right car seat and use it correctly.

Choose the Right Car Seat

Check the label on the car seat for the expiration date and weight, height, and age limits. Your car seat should be rear-facing for at least two years. Do not add anything to your car seat that didn't come with it.

Use Your Car Seat Correctly

Check your car's manual and the car seat instructions to be sure your car seat is installed correctly. Harness straps are placed at or slightly below the baby's shoulders when the seat is rear facing. Tighten the straps after putting your baby in the car seat every time. Place the chest clip at armpit level.

Newborn Health

Wash your hands often, and be sure others wash their hands before touching the baby. Don't let people who are ill (cold, cough, fever, vomiting, diarrhea) be around your baby.

Take your baby to every check-up advised by your baby's doctor, and follow the vaccination schedule your baby's doctor recommends.

When to Call Your Baby's Doctor

- You see signs of illness, such as coughing, diarrhea or vomiting
- Baby is not feeding well, or you are having to wake your baby for feedings (after day 5)
- Baby is more sleepy than usual
- You notice a change in baby's color (looks pale, bluish or gray arms and legs)

Urgent Warning Signs Call 911 or go to the ER

- Blue or gray lips, tongue or face
- Serious difficulty breathing
- Can't wake up
- Rectal temperature of 100.4°F or higher



For more information about
caring for your newborn,
visit [healthychildren.org](https://www.healthychildren.org)



A Guide for Parents

Check with your doctor or nurse to make sure your baby is receiving all vaccinations on schedule. Many times vaccines are combined to reduce the number of injections. Be sure you ask for a record card with the dates of your baby's vaccinations; bring this with you to every visit.

HepB: Hepatitis B, a serious liver disease

RSV: Respiratory syncytial virus, a serious lung infection

RV: Rotavirus infection, a serious diarrheal disease

Influenza: A serious lung infection

MMR: Measles, mumps, and rubella

COVID-19: A serious and highly infectious disease

HepA: Hepatitis A, a serious liver disease

Chickenpox: Also called varicella

1. From October through March, infants age birth through 7 months may need RSV preventative antibody (RSV-mAb) if RSV vaccine was not given during pregnancy. Certain older infants age 8-19 months may need RSV-mAb during their second RSV season.
2. This is the age range in which this vaccine should be given.
3. Your baby may not need a dose of Hep B vaccine at age 4 months, depending on the vaccine used. Check with your doctor or nurse.
4. Your baby may not need a dose of Hib vaccine at age 6 months, depending on the vaccine used. Check with your doctor or nurse.
5. Your baby may not need a dose of RV vaccine at age 6 months, depending on the vaccine used. Check with your doctor or nurse.
6. All children age 6 months and older should be vaccinated against influenza in the fall or winter of each year.
7. Your child will need 2 or 3 doses, depending on the brand of COVID-19 vaccine given.
8. Your child will need 2 doses of HepA vaccine, given at least 6 months apart.



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