

## HEART OF TEXAS PEDIATRICS

### 2 MONTHS

**Patient** \_\_\_\_\_

**Weight** \_\_\_\_\_ **Height** \_\_\_\_\_

**FEEDING:** Breast milk or formula provides all the nutrients your baby needs to grow. It is best to wait until 4 months to start cereal or baby foods. After four months of age, babies tolerate new foods better and are less likely to have an allergic reaction. Most babies will be eating every 3-4 hours and usually once at night. Most babies will not be sleeping through the night yet, but most achieve this by 4 months of age. Infants should not be fed honey or corn syrup until one year due to the risk of infant botulism.

**BREAST:** You and your baby may have a routine for breast-feeding and this should be continued if this is working well for both of you. An occasional increase in nursing frequency for a few days is your baby's way of increasing your milk supply for a growth spurt. Occasional bottles of pumped breast milk or formula are fine and allow others to assist you with feedings.

**BOTTLE:** Your baby will begin to gradually take increased amounts of formula. Most will take about 25-30 ounces per day now and 30-35 ounces per day by four months of age. Remember that not all crying means hunger. Sometimes fussiness just means a change in scenery is needed.

**STOOLS:** Changes in your baby's bowel movements are not uncommon. Typically, bottle-fed babies stool once daily and breast-fed babies stool more frequently. For some babies it can be normal to go 3-4 days between bowel movements as long as they are soft. If your baby has hard bowel movements and goes more than 48 hours without a bowel movement, try 1-2 oz of pear or prune juice diluted in 1-2 oz of water 1-2x/day. If still no bowel movement, call for further treatment of constipation.

**DEVELOPMENT:** Babies should be placed on their backs to sleep, but it is fine to place them on their stomach while awake and being observed. This helps strengthen neck and chest muscles and will eventually encourage scooting. Your baby should be able to push his/her chest off a surface when lying on his/her stomach. At this age, babies become more sociable and smile and laugh more over the next two months. They begin to recognize your face and respond more when you come into view, moving his/her arms and legs. Your baby should respond to sound, and babbling over the next few months is a good indicator of adequate hearing. If your baby is excessively quiet and does not start cooing in the next few months, let us know. Some babies will start to roll over before 4 months of age so be careful when your baby is on the bed, changing table, etc. Babies begin to reach with their hands over the next couple of months.

**FEVER:** Keep a rectal thermometer handy and check your baby's temperature if you think your baby is acting ill or feels warm. Do not panic if your baby has a fever (temperature  $\geq 100.4$ ). Fever is common after two months of age and is the body's way of fighting off infection. Keep Tylenol infant drops on hand and use for a fever  $> 101$  or if your baby seems uncomfortable.

This is purely a comfort measure. The fever does not have to come down to normal and probably will not if the fever is high. After treating a fever, your baby should look better and be more active. If there is no obvious source for the fever such as a cold or if the fever is persistent, then call our office for an appointment.

**TEETHING:** Teething is a continual process that may begin before 4 months of age and continues until around 3 years of age when all of the baby teeth are present. The lower central incisors typically come in at 6-8 months, but can vary from 4 months to over 1 year of age. Teething does not cause fever > 101, congestion, extreme irritability or wakefulness. It can cause drooling, loose stools, and mild fussiness. Your baby might experience some relief with cold teething rings, Orajel topically, and/or Tylenol.

**SLEEP:** Sleeping around 16 hours a day is normal for infants. Babies should be placed on their backs when they go to sleep to decrease the rate of SIDS (sudden infant death syndrome). In fact, the rate of SIDS has decreased by 40% since the National Back-to-Sleep program. Co-sleeping and smoking also

increase the rate of SIDS. It is good to get into a habit of putting your baby in the crib when drowsy, but still awake. If the last thing your baby remembers before falling asleep is being rocked and fed, he/she may demand this to go back to sleep once awakened.

**SAFETY:** Car seats are required by state law and are the safest way for your baby to travel. Infants should be placed in an infant carrier and rear-facing until 1 year of age AND more than 20 pounds. Some infants will outgrow their infant carrier before a year and need a bigger, convertible (forward and rear-facing) car seat before a year. Your baby should never be left alone with pets, young children, or on a changing table or bed without rails. Crib slats should be no wider than 2 and 3/8 inches to avoid injury. Water heaters should be set no higher than 120 degrees to prevent scalding. Smoke detectors should be installed and checked monthly and replace the batteries once a year, helpful if on your baby's birthday. Infants this age are starting to reach and should not be held by anyone carrying a hot liquid or smoking. Second-hand smoke travels throughout the home even if you smoke in another room. This increases the number of ear infections and respiratory infections and should be avoided indoors and in cars.

**IMMUNIZATIONS:** Immunizations are an important part of your child's healthcare and help prevent a number of serious and life-threatening diseases. You will receive information on the various vaccines, possible reactions, and the diseases they prevent. Today your baby will receive DtaP (Diphtheria, Tetanus, and Pertussis), IPV (Polio), Prevnar, and Comvax (combination of Hepatitis B and Hemophilus influenza, type B). Be sure to bring your baby's shot record with you on every visit.

**YOUR CHILD'S NEXT VISIT IS AT *FOUR* MONTHS OF AGE.**