

HEART OF TEXAS PEDIATRICS

9 MONTHS

Patient _____

Weight _____ **Height** _____

FEEDING: By 6 months of age your baby will take solids better and if single ingredient foods have not been added to the diet, then you should start them now. Feeding should be about four hours apart and infants should sleep through the night without any feedings. By 9 months of age, a formula-fed baby should take about 20-25 ounces a day. Many nursing mothers think of weaning at this age, but there is no rush. You can continue to nurse as long as it is enjoyable for both of you. For those who do wean in the next few months, most babies can go straight to a sippy cup and bypass the bottle stage.

SOLIDS: Solids become more important for your baby's diet at this time. Milk intake will decrease as your baby consumes more food. Iron-fortified cereal should be given with a spoon while sitting up. Do not use an infant feeder or give cereal in a bottle. Foods should consist of blended table foods or commercially prepared baby foods (Stage 1, 2, then 3). Babies typically take two or three meals of solids with the eventual goal of three meals a day and a snack, usually in the afternoon or between dinner and bedtime. However, you should NEVER let your baby go to bed with a bottle. This increases the chances of developing ear infections and promotes tooth decay. Many babies do well drinking from a cup, and for practice, drinks should be offered in a cup routinely between six and nine months of age. Do not switch to whole milk until twelve months of age. You can offer teething biscuits or baby cookies in the next few months to practice with thicker foods and self-feeding.

DEVELOPMENT: At six months of age babies squeal, laugh, babble, and of course, cry. Reading aloud to your child and responding to his/her sounds will help with your baby's language development. Separation anxiety develops over the next few months and your baby may resist staying with anyone besides you, including grandparents. You should reassure your baby of your planned return. Peak-a-boo is a favorite game at this age. Babies grab everything and bring objects to their mouth. They can find even small objects from the floor with a raking motion of the hand so choking on small objects is a concern. At this age, babies can follow a parent with their head 180 degrees, as they walk across a room. Your baby should roll over both ways and be able to sit up with some support. Most will anticipate spoon feedings and reach for cups and bring them to their mouth with some help.

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, Tylenol, and/or Motrin (Motrin is safe to use after 6 months of age).

SLEEP: Most babies will sleep through the night at 4 months of age and if not, they should be by 6 months. 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. By this age, your baby does not need to be fed during the night. Upon awakening, try patting, stroking, or rocking your baby or replacing the pacifier to help with falling back asleep. A bedtime routine is important for your baby to get drowsy before bedtime. This may include

baths, rocking, bedtime reading, blankets (or other security objects), etc. During illnesses, you may need to hold and comfort your child during the night. When the illness passes, resume your previous bedtime routine quickly. Most babies still require two naps a day at this age.

HEALTH: Babies average 6-8 colds per year. Colds are caused by viruses and cause a runny nose, congestion, and typically low-grade fever. Since antibiotics treat bacterial infections but NOT viral infections, they do not help colds to resolve any sooner. Giving antibiotics when unnecessary may increase

your child's risk of having resistant bacteria. Colds typically make it harder for babies to sleep and eat. Using a bulb syringe with normal saline drops or spray will help with breathing, especially before feeding and sleeping. If acting ill, take a rectal temperature. If your baby has a persistent fever > 101 , is taking fluids poorly, is working hard to breathe (nostrils flaring, ribs consistently showing between breaths, or breathing hard and fast), or not acting right, call our office. A cool mist humidifier in your baby's room will also help with his/her breathing as well as elevating the head of the bed when sleeping.

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 $\frac{3}{8}$ inches to avoid injury. Hanging mobiles or toys should be removed before your baby can reach them. Keep cords, ropes, and strings away from your baby as well as plastic bags and balloons. Keep the floors clear of small objects such as coins, which are choking hazards for your infant. Foods such as hot dogs, grapes, and carrots, should be cut lengthwise to prevent them from being choking hazards as well. As your child becomes more mobile, you need to childproof your house. Stairs should have gates to prevent falls and cabinets should be locked. Medicines, chemicals, cleaning supplies, and paints need to be out of reach or locked up. If your baby has an accidental ingestion, call POISON CONTROL at 1-800-222-1222 for further instructions. Syrup of ipecac is no longer recommended to be given before seeking medical advice. Walkers can be dangerous, especially around stairs, and are no longer recommended by the AAP. Plug all electrical outlets that are not in use with plastic covers. 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. 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 #3 (Diphtheria, Tetanus, and Pertussis) and possibly Prevnar #3 and/or Polio #3. The immunization schedule is flexible and may vary somewhat according to your physician. Be sure to bring your baby's shot record with you on every visit.

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