

Baby's First Year



Family Record for Baby's First Year

Mother's Name _____ *Father's Name* _____

First Birthday Record for _____ *Born on* _____

Weight _____ *Length* _____ *Words* _____

What baby can do _____

First Birthday Record for _____ *Born on* _____

Weight _____ *Length* _____ *Words* _____

What baby can do _____

First Birthday Record for _____ *Born on* _____

Weight _____ *Length* _____ *Words* _____

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Weight _____ *Length* _____ *Words* _____

What baby can do _____

First Birthday Record for _____ *Born on* _____

Weight _____ *Length* _____ *Words* _____

What baby can do _____



Dear Families,

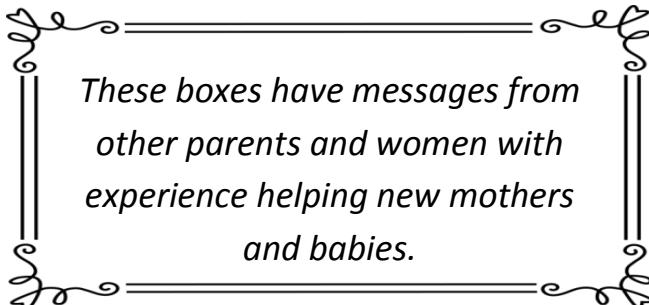
In response to requests from families for a booklet on caring for a new baby, a group of families, midwives, doctors, and nurses has put this little book together.

We hope that you will find something helpful, whether it is your first baby or your 10th.

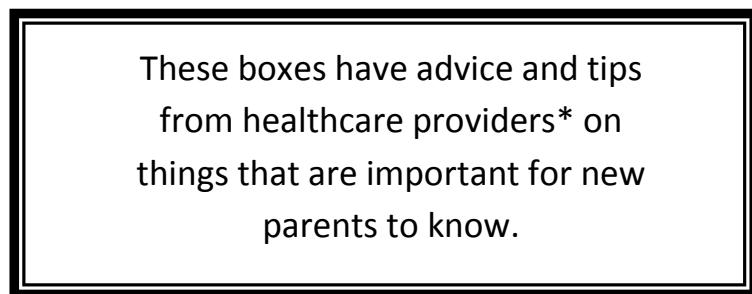
This booklet focuses on practical advice but many contributors stressed the importance of reminding new parents to turn to prayer and trust in a higher power to guide them in the care of this precious life that is placed in their hands.

Special Messages for Parents

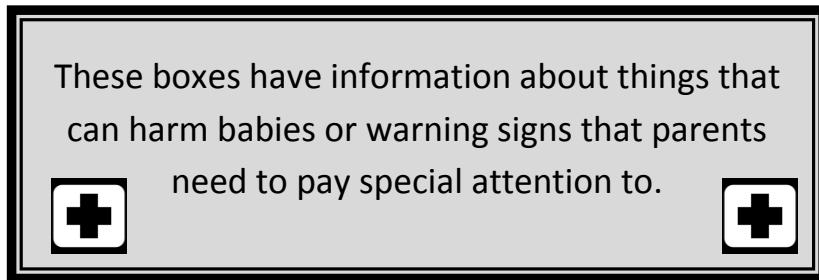
In this book you will find the following messages:



These boxes have messages from other parents and women with experience helping new mothers and babies.



These boxes have advice and tips from healthcare providers* on things that are important for new parents to know.



These boxes have information about things that can harm babies or warning signs that parents need to pay special attention to.



* You will see the words “healthcare provider” throughout the book. This means a person who is trained and licensed to provide care to mothers and babies, such as Licensed Midwives, Public Health Nurses, Medical Doctors, Physician’s Assistants and Nurse Practitioners.

Caring for Mother

So your new baby has arrived! It may seem odd to talk about caring for the mother first, but your newborn baby is totally dependent on you, the mother. Mother must be well fed, rested and healthy to be able to make milk and care for her baby.

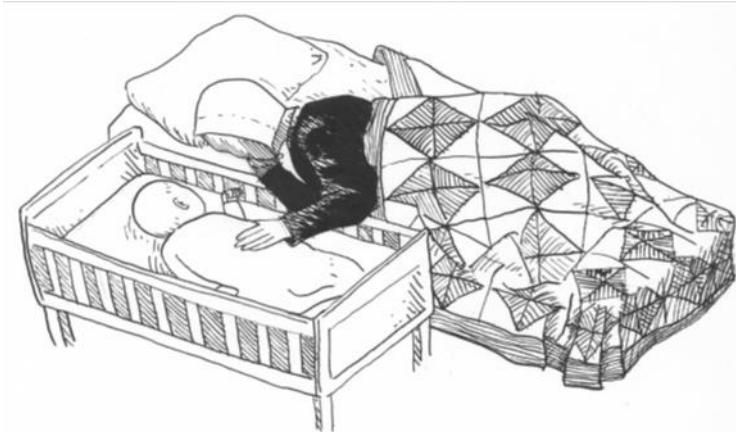
Make sure that mother has the right kind of help, such as meal preparation or someone responsible to look after younger siblings and daily housework. Having father take off a few days from work would be very helpful. Rest, rest, rest those first few weeks, even if you feel like getting back to work. The time comes soon enough that you no longer have any excuse to just sit and enjoy your little one.

New mothers need healthy meals that include wholesome, nutrient-rich foods and fresh fruits and vegetables, frequent small healthy snacks, and 2 to 3 quarts of water every day. Make sure that mother has a full glass of water by her side at all times.

During the first six weeks, take time to know your baby and relax and let your body heal. As your energy returns, take time to nurture your other children, so your family can enjoy the new baby together. This is an important time to talk with your husband so he can understand if you need help or more rest. Good communication will strengthen your marriage.

Above all, trust God and stay close to Him. Try to have a grateful heart for all His blessings; think happy thoughts. Even if you are tired, you can be a good mother!

To keep mother healthy, mix one cup of very warm water with 1 teaspoon of honey and a tablespoon each of vinegar and lemon juice and drink every morning.



Feeding

Getting started with breastfeeding: It is important that both mother and baby are in good positions for nursing. This experience will be easier for mother and baby if mother is as relaxed and comfortable as possible. You may feed your baby sitting or lying down. It is best to feed in different positions every day so your baby latches onto your breast at different angles. This helps prevent soreness and plugged ducts.

Most newborns have strong sucking reflexes and will want to eat soon after they are born. Breast milk is the perfect food for baby! It is easily digested, always warm, and always ready for baby. Colostrum usually starts to appear in late pregnancy and is higher in protein and minerals, and lower in fat and carbohydrates than the milk that comes a few days after the baby is born. An ideal first food!

Start breastfeeding by touching baby's cheek with your nipple. You want the baby to open its mouth nice and wide. The baby will seek the nipple and hopefully will take the nipple into its mouth. The nipple should be placed well into the baby's mouth, with baby's tongue underneath the nipple. The lips should be turned out against the dark area around the nipple (areola), rather than the nipple itself. A proper latch is the key to preventing nipple soreness.

When your baby has finished nursing, gently press a finger against your breast at the corner of the baby's mouth. This breaks the suction and baby will release the nipple. This way it will not be painful for you as a mother. If this is your first baby, your nipples might become quite sore.

Pure Lanolin or Vitamin E oil from opened capsules can be rubbed on your nipples after each feed. These do not need to be wiped off.

Burping: Burping helps to remove swallowed air from baby's stomach. After a feeding, hold your baby upright against your shoulder or lay baby on your lap, face down. Then pat or rub the back gently. This will usually bring up the air that the baby has swallowed. Not all babies need to burp. Some babies may be difficult

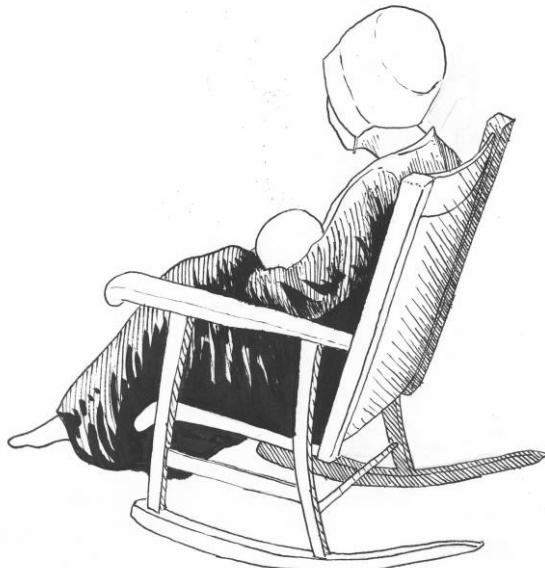
Reasons to breast feed

- *It has everything babies need to grow and develop
- *It helps keep baby and mom healthy
- *It boosts baby's immune system
- *It helps mom and baby bond
- *It helps mom's body recover after pregnancy and childbirth
- *It is much less expensive than buying infant formula
- *It is simpler – no bottles to wash

to burp as they may be fussy and squirmy. Some babies will spit up milk at times and this is not something to worry about. However, forceful vomiting may be a sign of a problem.

How often should your baby eat? New babies need to nurse well for 5 or more minutes, every 2-3 hours, day and night. If baby is not waking on its own to nurse, try the following:

- * Undress the baby
- * Place the baby's skin against your skin
- * Gently rub baby's feet or back
- * Pump some milk or colostrum and feed it to baby with a clean dropper or small spoon (not a bottle). If mother is unable to pump, milk from another nursing mother or an FDA-approved formula may be used.



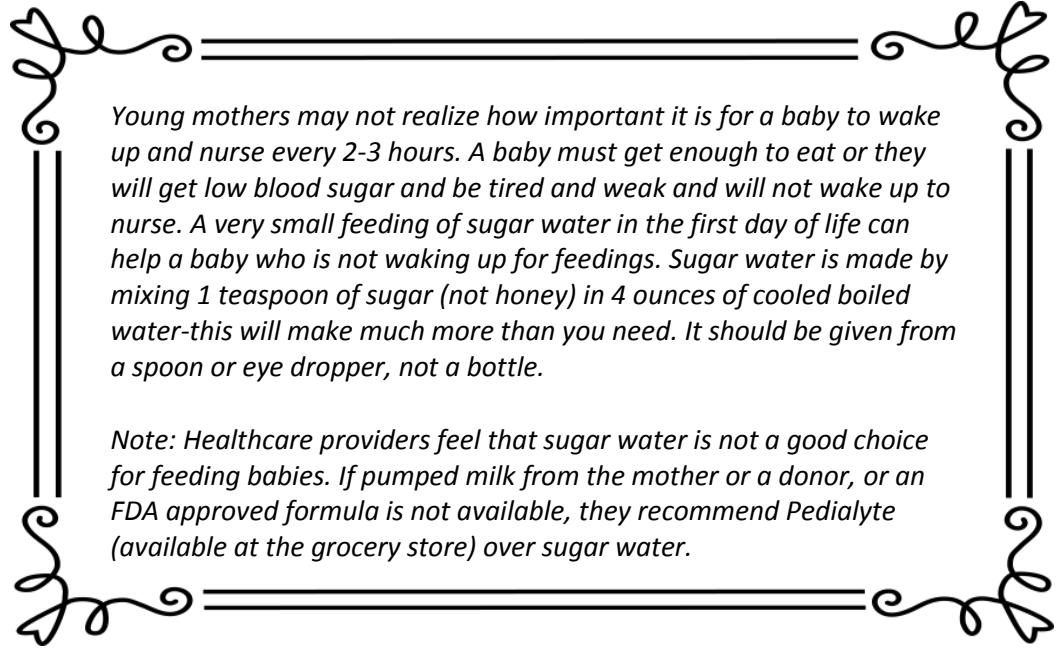
In the very first days it is best if baby is fed every time they show an interest. This can be as often as every hour (or even more). This can be tiring for mother but it won't last long. As soon as your milk comes in, baby will get more at each feeding and will begin to sleep longer between feedings. To help develop milk production, it is important for baby to nurse as long as they can at each feeding in the early weeks. Babies need to nurse long enough on each side to get to the last milk called the hind milk, which is the highest in fat and helps babies gain weight. It is more important for the baby to finish one side than to use both breasts at each feeding.

If you have tried these tips and your baby is not waking up for feedings, this is a very real concern. Your baby needs a visit with a healthcare provider who is experienced with caring for newborns.



Breastfeeding is an example of supply and demand; the more milk your baby demands, the more your body will supply. Let your baby set his own schedule. **When the baby is hungry, feed the baby.** It is best not to go by a set time, which can be frustrating to baby and mother. A pacifier or a bottle to supplement the demand for more milk can throw things out of balance. If your baby goes through a growth spurt and wants more milk than you have, nurse the baby often and let the baby suck as long as he/she wants to. It may take a couple days of long feeding periods until your body builds up the supply to meet the demand. These are just recommendations. You and your baby will figure out what works best for both of you.

Babies will usually lose some of their birth weight in the first week and it is nothing to worry about if baby nurses well and is having plenty of wet and messy diapers. Most babies will gain from 4 to 8 oz. per week. If fewer than 4 oz. are gained in a week's time or baby is losing weight after the first week, this is a concern. Watch carefully, nurse often, and pay attention to baby's behavior. A baby that is very fussy or sleepy may not be getting enough to eat. If weight gain does not improve, it would be wise to see your healthcare provider.



Young mothers may not realize how important it is for a baby to wake up and nurse every 2-3 hours. A baby must get enough to eat or they will get low blood sugar and be tired and weak and will not wake up to nurse. A very small feeding of sugar water in the first day of life can help a baby who is not waking up for feedings. Sugar water is made by mixing 1 teaspoon of sugar (not honey) in 4 ounces of cooled boiled water-this will make much more than you need. It should be given from a spoon or eye dropper, not a bottle.

Note: Healthcare providers feel that sugar water is not a good choice for feeding babies. If pumped milk from the mother or a donor, or an FDA approved formula is not available, they recommend Pedialyte (available at the grocery store) over sugar water.

How to tell if baby is getting enough to eat

Day of Life	Number of Wet Diapers	Number of Messy Diapers
1	1	1
2	2	2
3	3	3
4 and over	6-8	varies, should be yellow

What if breastfeeding is not going well? Many new mothers have temporary challenges with breastfeeding, such as sore nipples, milk that comes too fast, too much milk, or days when baby does not seem to be getting enough milk. A mother who is having continuing problems with breastfeeding may find it helpful to have a visit with a person called a lactation consultant, who helps nursing mothers with breastfeeding concerns. A few mothers may benefit from medications from their healthcare providers to increase milk supply. Rarely, there is a problem with mother or baby that prevents successful breastfeeding. A few mothers choose not to breastfeed. In these cases, it is important that baby gets milk from another nursing mother or an FDA-approved infant formula. Infant formula has the right amount of nutrients that babies need to grow and develop.

How long should baby nurse? It is best for baby to nurse or receive an FDA-approved infant formula for at least the first year. There are benefits for both mother and baby to continue nursing for as long as two years or more. Babies drinking formula can begin drinking cow or goat milk at 1 year of age.

What about baby's teeth and bottle feeding? Don't put your baby to bed with a bottle. It can cause cavities and tooth problems.

Melloseam, goat's milk, homemade formulas, jello, sugar water, and juice don't have everything that babies need to grow and are not recommended.

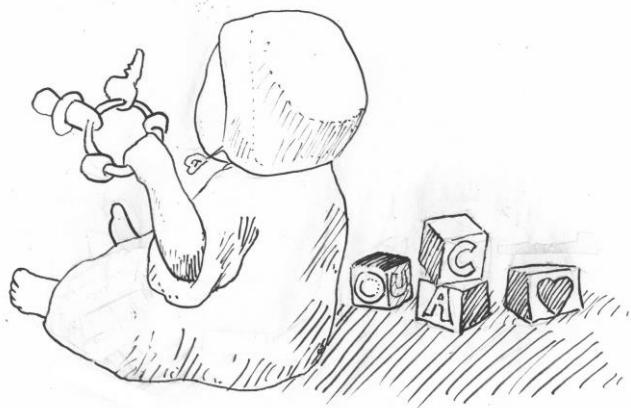


What about teas and water? Breast milk or an FDA-approved infant formula is an ideal food for infants for the first year of life. Teas, especially if they are sweetened, may cause baby to nurse less and not get what they need to properly grow. Babies get enough water from breast milk or formula and don't need extra water. Do not give any water until your baby has started solid foods (around 6 months).

When do babies need other foods? The age that babies need to begin other foods varies. Below is a general guide about when to begin to offer other foods. When a baby under 4 -6 months of age seems hungry, it is better to try to increase the breast milk supply or add some formula than to begin solid foods. It is recommended that babies consume just breast milk until they are 6 months old – breast is best. Formula fed babies may begin solids at 4 months of age.

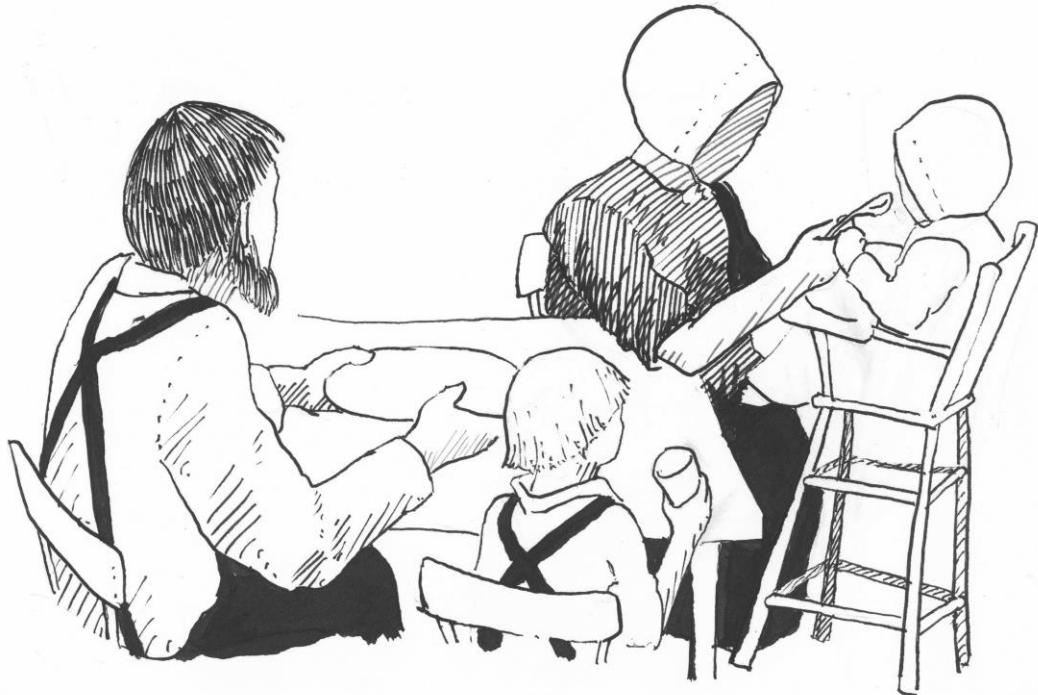
Your baby should start solid foods when they are able to do these things, usually around 4-6 months old:

- Sits up with support and holds head up
- Puts fingers and toys in mouth
- Shows interest in food and opens mouth when they see food
- Closes lips over spoon and does not push spoon out with tongue
- Keeps food in mouth and swallows (though some dribbling is normal when new to eating!)
- Can turn his/her head away to stop feeding



Tips for starting solid foods:

- Babies accept solid foods at different rates. Don't worry if they refuse a meal.
- Your baby might try a food 10-15 times before they decide they like it!
- The first "meals" may only be 1-2 teaspoons.
- Good first foods include pureed vegetables (squash, sweet potatoes, peas, potatoes, green beans) or mashed fruits in small amounts. Some people recommend trying soft pureed meat as a first baby food, especially for breast fed babies.
- Foods can be started in any order.
- It is important to avoid honey (due to botulism risk) until your baby is 1 year old.
- Babies should also avoid cow's milk until they are 1 year old.
- To keep your baby from developing a 'sweet tooth', avoid giving sweetened foods.



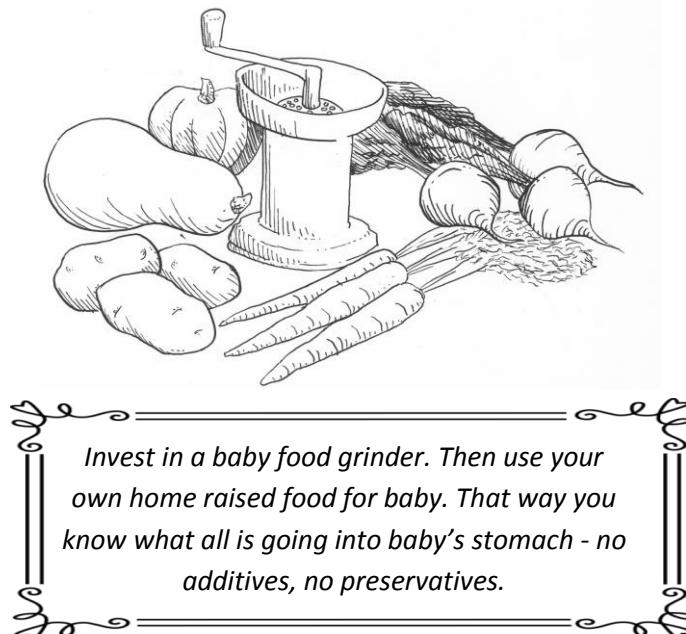
Here is a general guide about when to begin to offer other foods:

Age	Breastmilk or Formula	Solid Foods
0 - 6 months	8 - 12 feedings per day	None yet
4 - 6 months	5 feedings per day, or more	Offer small amounts of fruits, vegetables, soft meats, offer foods at family meal and snack times.
6 - 8 months	3-5 feedings per day, or more	Offer more of foods listed above, at family meal and snack times.
9 - 12 months	3-4 feedings per day, or more	Offer foods with a little more texture so that baby learns to chew. Do not offer large chunks.

Source: UW Health Facts for You – Starting Solid Foods

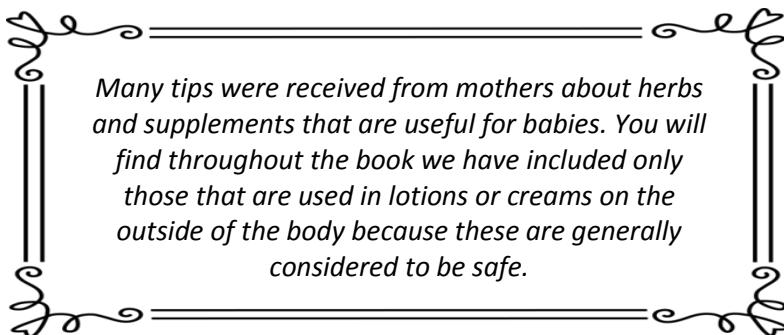
Signs that baby is intolerant of a food: Some babies have allergies or food intolerances. It is important to wait 2-3 days after starting a new food before trying another new food. This will give you time to notice if your baby is having an allergic reaction to a food. An allergic reaction might include rash, diarrhea, vomiting or difficulty breathing.

If you are worried about a food allergy, talk to your healthcare provider right away.



Contact your health care provider before giving any herbs to infants

Using herbs for babies under one year of age: The American Academy of Pediatrics does not recommend any herbs by mouth for babies under one year of age because there are no good studies that show what herbs are safe for babies. Some babies have gotten sick from herbs such as chamomile, which many people would think are perfectly safe. Families may feel confused when they get advice and information from others about herbs and supplements they feel are useful and safe for young babies. The best way to get information about what is safe for your baby is to talk with your healthcare provider before using any herbs for a baby under one year of age.



Herbs and supplements that should never be given to babies

- Honey (may cause botulism)
- Pennyroyal (can be fatal)
- Castor Oil (by mouth)
- Blue and Black Cohosh
- Rue
- Lobelia
- Fennel Oil
- Fenugreek Tea
- Any product that contains alcohol, such as tinctures
- High doses of vitamins and minerals not intended for infants

All breastfeeding babies need to get 400 IU of Vitamin D every day in oral drops that are meant for infants (available in any drug store). These preparations may contain other vitamins in amounts that are safe for infants. This is the only recommended supplement for breastfed infants.

Vitamin D prevents a serious disease called Rickets, which causes softening of bones and seizures.

Using dietary supplements for babies under 1 year of age: Dietary supplements are vitamins, minerals, amino acids, enzymes, herbals, botanicals and homeopathic products. Supplements can sometimes be helpful but can also involve health risks. Some supplements may not cause any harm, but may be very expensive and of little value. Often the symptoms that herbs and supplements are given for will go away on their own with no treatment other than breastfeeding and comfort.

Supplements come in pills, powders, liquids and tinctures. They often come in a similar package as a drug. However, the rules for selling supplements are different from drugs. Many claims about the benefits of a supplement have not been reviewed, approved or disapproved. Only drugs have U.S. Food and Drug Administration (FDA) approval to make a claim to diagnose, cure, treat, prevent, or relieve specific diseases. The FDA does not review supplements before they are sold. An organization that tests different products, found many supplements did not contain the amounts of vitamins and minerals that were on the label.

Learn more about the product you plan to use. Ask to see the reports about the claims on the label. Ask about safety and effectiveness of the ingredients. Avoid using a testimony or an ad as the resource for information. Watch out for statements like “works better than [a drug],” “totally safe,” or “has no side effects.” Beware that the term ‘natural’ does not always mean safe. Report adverse effects to help others stay safe too.

Growth and Development

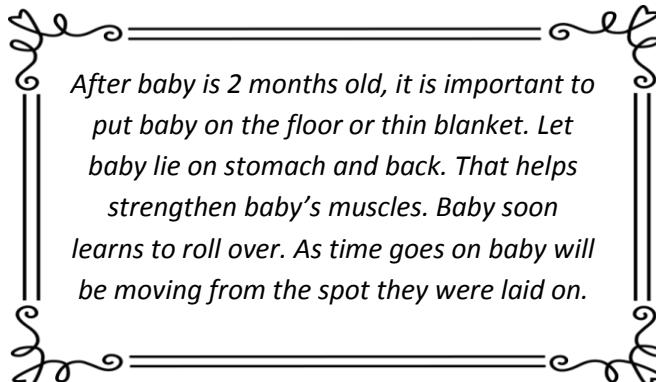
Infants go through many changes during their first year of life. Children develop at different rates. Anytime you are concerned that your child is not developing as you would expect, have them checked by a healthcare provider.

Newborn to 1 month:

- Basic reflexes such as sucking, swallowing, coughing, gagging, grasping, blinking and startling
- Holding their hand in fists much of the time
- Watch an object about 12-15 inches away – they like faces!
- Investigate their hands and fingers
- Sleep an average of 16-17 hours a day, but don't stay asleep for more than 2-4 hours, day or night
- Enjoy being held and rocked

1 - 4 months:

- Lift head and chest and look both ways
- Begin to keep hands open; Wrap fingers around an object when it is placed in their hand
- Focus eyes or watch an object move
- Move their arms and legs in a squirming fashion and kick legs out
- Moves head toward different colors and changes in lighting
- Make cooing and gurgling noises, especially if someone talks to or smiles at them
- Cry when need something
- Respond with a smile if someone smiles at them
- Be soothed by a familiar voice when they are upset



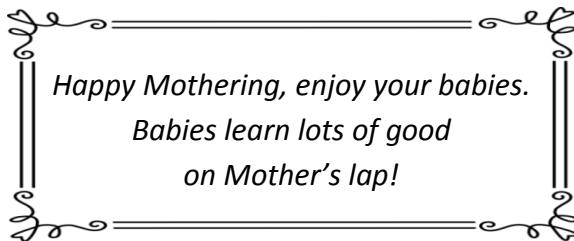
4 – 8 months

- First teeth may come in, causing gum swelling and irritation
- Begin to purposely reach for things by coordinating their hands and eyes
- Sit up with a little help and bounce up and down if held in a standing position
- They may scoot backwards while on their stomach before they can crawl forward
- Start to respond to caregivers, such as waving
- They may be able to focus on only one toy at a time
- Babble in a rhythmic fashion; Repeat the same sounds over and over
- Recognize their name when they hear it
- Perform simple one word requests, such as “wave” and “eat”
- Imitate sounds not related to speech, such as lip smacking and tongue clicking
- May start to show caution towards strangers

8 - 12 months

- Manage to drink from a cup with a little help
- Begin to use only one hand to reach for things
- Eat cereal and other finger foods by themselves
- Sit up by themselves
- Crawl on stairs and flat surfaces
- Walk while being supported by someone else
- Begin to point at things far away
- Will drop a toy when offered a different one
- Speak their first words
- Wants familiar people, may show concern if left with someone they don't know
- They understand what the word “no” means

If your infant does not do most of these things at the age suggested or suddenly stops making progress for several weeks, please consult your physician or area Health Department. They can suggest appropriate steps to take. Early Intervention will help your child greatly.



Baby Care Tips

Enjoying Baby: Take time with your newborn, just holding and enjoying baby. They grow up so fast. Sing and talk to your baby, just as if they could understand you. You will be surprised how alert this makes your baby.

Soothing Fussy Babies: There are many good ways to soothe a fussy baby. As you get to know your baby you will find what works.

- Make sure baby is fed, burped and diaper is clean and dry
- Swaddle securely in a blanket
- Walking or rocking baby
- Putting baby in a swing
- Taking baby to a quiet room
- Singing, humming, talking in a soft soothing voice
- Body or foot rubs with olive oil (with a drop of lavender oil)
- If mother is tired have another person take the baby



Colic and Stomach Aches: A baby with colic or a stomach ache often has very fussy spells, which can occur in the evening. The baby may act uncomfortable and hungry, may cry or act or may not be soothed by nursing. Colic usually is worse during the first three months. Some babies who seem to have colic may have reflux (see tips below).

- Have mother avoid coffee, chocolate, wheat, dairy, or tomato products like pizza
- Digestive enzymes and probiotics for mother
- Give baby probiotics (break open a capsule and dip finger in powder and put in baby's mouth after each feeding)
- Avoid overfeeding baby
- Massage baby's stomach by placing thumbs on belly button and pushing in very gently as baby breathes out, then move thumbs down and to baby's sides (this will help release gas).

Reflux: Babies with reflux spit up very often, especially after feedings, and may be very fussy and uncomfortable. If reflux is severe, babies may not gain well and may need to see a healthcare provider. There are medications which can be helpful to treat reflux and help baby gain weight.

- Feed baby in an upright position
- Burp baby frequently
- Avoid overfeeding
- Have baby sleep with the head of bed elevated

Cradle Cap: This is the same thing that would be called dandruff in adults. It often goes away with time, or the hair will grow in and cover it.

- Wash with gentle baby shampoo
- Mix 1/4 cup aloe vera gel with 3 drops lavender oil and rub on baby's scalp and comb gently with fine tooth comb
- Massage head with almond oil, comb and wipe off with soft cloth

Dressing baby: In the first days of life it can be hard for a baby to keep their temperature normal. If they are in a very warm room with too much clothing and blankets, they can become overheated. If they are in a cool place with not enough clothes and blankets, they can become chilled. In general, babies need only one more layer than other family members to be comfortable. If baby feels warm check their temperature. If it is over 99 degrees but less than 101 degrees take off some of the clothing and blankets and move baby to a cooler area. Check the temperature again in 30 minutes. If baby feels cool or hands and feet are pale or blue check the baby's temperature. If it is less than 97 degrees put the baby's skin next to mother's skin or add

a layer of clothing or blankets and move the baby to a warmer spot. Check the temperature again in 30 minutes.

Any baby under 4 weeks of age with a temperature over 100.4 degrees or whose temperature does not return to normal (between 97 and 99 degrees) after adding or removing blankets and clothing, should be seen by a health care provider. Both low and high temperatures in a young baby can be a sign of sickness.

Diaper Rash/Yeast Rash/Thrush:

- Give baby probiotics (see directions under colic)
- Wash baby's bottom or area with rash with a solution of 1 teaspoon vinegar in 1 cup warm water and then apply castor oil, repeat until rash is gone
- Put one cup of vinegar in rinse water when washing diapers
- For diaper rash use an ointment such as Desitin that contains zinc oxide
- If there is a yeast rash, the mother should remove sugar from her diet for 2 weeks. She should take probiotics.
- A yeast rash will respond quickly to Lotrimin AF (available at the drug store)

Babies with the following symptoms should see a healthcare provider

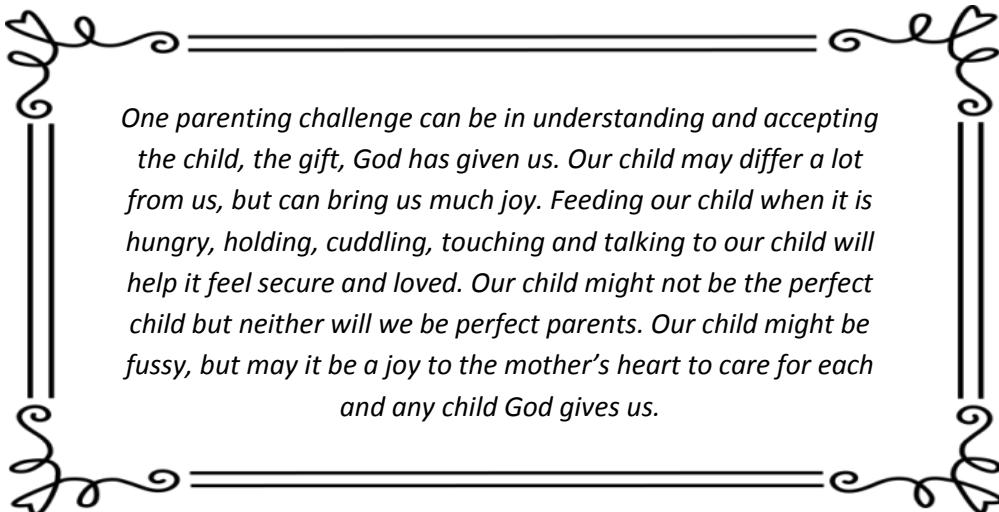
- Any baby under 2 months of age with a fever over 100.4
- Very sleepy or jittery
- Not feeding normally
- Not wetting diapers
- Sick for more than a week



Colds and flu: It is common for babies to have minor illnesses after 6 weeks of age. As long as baby is feeding well and wakes easily, they usually recover well with normal feeding and care.

- Nurse baby very often
- Keep a pan of water on the stove to add humidity in winter months

- Put a few drops of salt water (mix 1/2 teaspoon of salt in one cup of boiled water cooled to lukewarm before use) in baby's nose
- If using oil-based chest rubs make sure to wash the skin well in the morning and remove all greasy clothes as cold penetrates more easily on greasy skin



One parenting challenge can be in understanding and accepting the child, the gift, God has given us. Our child may differ a lot from us, but can bring us much joy. Feeding our child when it is hungry, holding, cuddling, touching and talking to our child will help it feel secure and loved. Our child might not be the perfect child but neither will we be perfect parents. Our child might be fussy, but may it be a joy to the mother's heart to care for each and any child God gives us.

Keeping Baby Safe in the First Year

Safe Sleep: Babies should sleep on their backs on a firm mattress in their own crib. Avoid placing soft bedding near their faces. Continue to place babies on their backs to sleep through their first year of life. When babies are awake they need some "tummy time" to help them develop.

Car Seat: Babies must ride in an approved car seat that is correctly secured in a car or truck. Car seats more than 6 years old should not be used. Call the Wisconsin Information Network at 1-866-511-9467 (no charge) to locate a certified car seat technician in your area. They can help you find out if your old or used car seat is safe, and help you use your car seat correctly. If you need a car seat, contact the Health Department in your county. They may have a program to provide car seats to families or may be able to help you find a program in your area.

Shaking: Babies should be handled gently with their necks supported at all times. Shaking or jerking a baby back and forth several times can cause brain damage and

should never be tolerated. Watch young brothers and sisters carefully when they are holding or helping with the baby.

Household Water: If your water comes from a well, it should be tested for bacteria and nitrates before your baby begins to drink water (after 6 months of age). Unsafe water can make your baby ill. Water test kits are available from local health department offices.

Falls: As your baby grows and is able to roll over, they may fall off of things unless protected. Do not leave your baby alone on changing tables, beds, sofas, or chairs. Put your baby in a safe place such as a crib or playpen when you cannot hold them. Your baby may be able to crawl as early as 6 months. Use gates on stairways and close doors to keep your baby out of rooms where he or she might get hurt. Do not use a baby walker. Your baby may tip the walker over, fall out of it, risking serious head injuries. Baby walkers let children get to places where they can pull heavy objects or hot food onto themselves. If your child has a serious fall or does not act normally after a fall, call your healthcare provider.

Burns: Do not carry your baby and hot liquids (such as coffee) or foods at the same time. Your baby can get burned. To protect your baby from house fires, be sure you have a working smoke alarm on every level of your home. Test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries at least once a year.

Choking: Do not leave small objects in your baby's reach. Do not feed your baby hard pieces of food such as chunks of raw carrots, apples, hot dogs, grapes, peanuts, and popcorn. Cut all the foods you feed your baby into thin pieces to prevent choking.

When to see a healthcare provider

Fever in the first week or two: Fever in infants over 2 months of age is common, often seen with most colds and other viral infections. In newborns, fever is uncommon. When it occurs, it is more likely associated with life threatening infections. Any baby in the first 8-12 weeks of life with temperature over 100.4 should be evaluated at a medical clinic.

Fever: How high is too high? For infants over 2 months of age, fever to 104 can be common with colds and not a cause for alarm, unless the baby doesn't respond normally or stops feeding. If a high fever is noted, use acetaminophen (Tylenol/pain

reliever/aspirin-free) or ibuprofen (Motrin/Advil) to bring the fever down. Most babies will feel better when the fever lessens and need not be seen by the healthcare provider. A warm, but not hot, bath may make baby with a fever more comfortable. Make sure that babies with a fever do not become dehydrated. If they remain sluggish, then checking with the healthcare provider may be a good idea. A high fever, by itself, does not cause brain damage. It is the sickness with which it is associated which can rarely cause brain injury (such as spinal meningitis*).



Fever without a cold: Most fevers in infants are associated with viruses, such as colds or the stomach flu. If infants have fever and irritability with no sign of a cold, they likely have another type of infection. Sometimes such a fever is caused by a urinary infection, which is best treated with an antibiotic. For an infant who seems sick and has fever, but does not have signs of a viral infection, consider a checkup. (Toddlers with fever and no cold, in our region, could have tick fever or Lyme disease. This is less likely in the first year of life.)

Colds and respiratory infections: Babies may have colds several times each year. Colds with or without fever generally need not be seen by a healthcare provider.

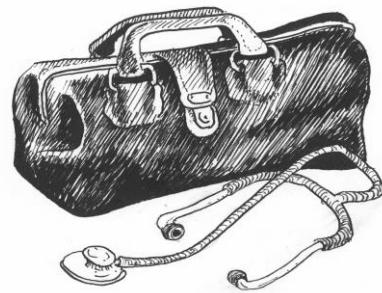
Decisions about when to have an infant

seen with a respiratory infection are made based on trouble breathing and degree of irritability. Infants that are breathing quickly or retracting (drawing in between or below the ribs) should be evaluated, especially if the breathing difficulty interferes with nursing. Babies with fever who are irritable and don't interact normally with mom or dad should be evaluated.

*Babies who have had the normal childhood vaccines almost never have spinal meningitis.

Breathing troubles without sickness: Some babies may have trouble breathing without an illness. Dusky or bluish color on fingers, toes, or lips should be evaluated promptly. This can be from trouble with the heart or the lungs and can be life threatening.

Abdominal pain: Many babies are colicky and seem miserable, pulling up the legs and screaming. These babies should eat well and gain weight normally. While a checkup is reasonable, it is optional and generally not urgent. Indicators of concern include associated vomiting, fever (without a cold), and decreased feeding. Any vomiting of bile requires immediate evaluation. Blood in the stool with abdominal pain similarly needs urgent evaluation. Checking for hernia or pain and swelling in the scrotum in baby boys is something parents can do. A swollen hernia or scrotum with pain requires urgent evaluation.



Prevention of sickness: Starting off with the newborn blood screen, hearing screen, and heart screen is a good start to baby's life. Consider immunizations, as they have eliminated smallpox, nearly eliminated polio, prevent tetanus, and have greatly reduced spinal meningitis in infants and children.

Problems in growth: Growth is one of the best indicators of the health of a baby. Babies with a lot of colds *who grow well* are usually healthy. Babies with reflux problems *who grow well* are usually healthy. Babies with problems in growth who otherwise seem healthy often just need more calories. Breast milk is generally all your baby needs. Occasionally, enriching breast milk will resolve the problem. If not, an appointment with the healthcare provider is a good idea.

Problems in development: Minor differences in development in infants are common and usually normal. More significant challenges in development should be evaluated by a healthcare provider. They can be an indicator of more serious conditions and your child may benefit from evaluation and early intervention.

Troubles with vision or hearing: If parents have concerns about an infant's vision or hearing, it is wise to check it out. Early diagnosis of vision or hearing loss can be very helpful. Some conditions are correctable. In other situations, early diagnosis allows parents to modify the child's environment to improve the baby's chance for learning.

Vaccines in Baby's First Year

Parents want to do everything possible to make sure their children are healthy. Vaccination is the most effective way to protect children and communities against many serious infectious diseases.

How vaccines work: Our immune system works to protect us from infectious disease and disease processes like cancer by creating antibodies to attack or block disease-causing bacteria or viruses. When we are exposed to this same infection again, our immune system will defend our body better against the infection because it remembers the disease from the previous infection, often preventing any symptoms at all. Vaccines work in the same way—encouraging the body to produce antibodies to protect individuals when exposed to diseases. All or part of a virus or bacteria is given to a person to force their body to generate an immune response. This immune response is similar to, but usually not as strong as, that which develops from natural infection. Some vaccines provide lifelong protection and other vaccines require boosters.

Complications of disease: Infectious diseases were the most common cause of death in children before vaccines were developed. In some cases, children survived the disease but continued to suffer from chronic health problems for the rest of their lives.

Cost of disease: For every \$1 spent on vaccines, \$7 is saved in medical costs and \$25 in overall costs to the community. Prevention of disease is essential for both patient health and the control of medical costs.

Community immunity: The more people within a community that are vaccinated, the harder it is for an outbreak to spread, as less people will get the disease and pass it on to others. People who are not immunized against a disease increase the risk for themselves and the community they reside in. The risk is especially high for those who are too young to be vaccinated and for the small number of people for whom immunizations do not work.



Vaccine safety: Immunizations face the highest level of scrutiny to ensure safety. Vaccines are safe and effective and undergo a long and continuous review by doctors, scientists and public health officials.

Access to vaccines: All county public health nurses will work with families to provide vaccines at a low cost, some may be free.

Vaccinating babies and children: The vaccination of children benefits everyone in the community as many diseases are initially spread through children due to their low immunity. Babies are more vulnerable to serious disease because their immune system cannot readily fight off disease-causing bacteria or viruses. The effects of disease are often more serious in infants than in older children and adults. The youngest babies are the most vulnerable. Current recommended vaccines protect against diseases most likely to harm babies as well as some diseases that are more severe when they become an adult.

The rates of infection and reaction to vaccines can change with specific disease outbreaks and when new vaccines are introduced. The best place to get current information about vaccines that are available, when they should be given, and the effectiveness and side effects of each vaccine is from your County Health Department. You may also access vaccination information from:

The Centers for Disease Control (CDC)
1600 Clifton Road Atlanta, GA 30329
1-800-CDC-INFO (1-800-232-4636)

Recommended Vaccines

Tetanus: Tetanus is a serious bacterial infection that causes painful muscle spasm and can lead to death. Newborns can be at risk if their belly button becomes infected.

Pertussis (Whooping cough): Whooping cough has the highest death rate in babies less than 2 months. The resulting cough can be so severe that the baby is unable to catch their breath. This causes them to turn blue and may result in a seizure from lack of oxygen—potentially causing permanent brain damage or death in those most fragile.

Diphtheria: Diphtheria is spread by coughing or sneezing and can cause a thick coating to build up on the back of the throat, along with swelling in the neck, resulting in breathing problems.

Pneumococcal: The Pneumococcus bacterium is commonly associated with severe disease requiring intensive care of babies and young children. This invasive disease results from the bacteria getting into the blood and spreading throughout the body. It is the most common cause of meningitis in children as well as the leading cause of pneumonia and ear infections. The rate of disease has significantly lowered since the immunization of babies was initiated.

Haemophilus Influenza Type B (Hib): This bacterium is one of the leading causes of meningitis in babies and children but is rarely seen anymore since the widespread use of vaccinations. This aggressive bacterium causes disease by entering the blood and spreading throughout the body.

Measles: Measles is a highly contagious disease that produces cough, pinkeye, high fever and a rash. The cough can turn into pneumonia, which causes 60% of the deaths associated with measles. 1 in 1,000 will develop a brain infection with a risk for hearing loss and developmental delay.

Mumps: Mumps infects the salivary glands and the testes in boys, sometimes causing infertility. Mumps causes more severe disease in adults than children.

Rubella: Rubella poses the greatest risk to pregnant women and can result in miscarriage or birth defects.

Polio: Polio is highly contagious and is spread through contact with infected stools as well as coughing or sneezing. Polio causes muscle weakness and can lead to paralysis and death when the muscles involved in breathing become affected.

Hepatitis A: Hepatitis A is spread through contact with infected stools and, as a result, can spread easily at home when changing a diaper of an infected child. This disease is mild in children, but can cause jaundice and more severe liver disease in adults.

Hepatitis B: Hepatitis B is spread through infected blood and body fluids. People with Hepatitis B often show no signs of the disease and, as a result, may spread it to others without knowing. A mother with Hepatitis B can also infect her baby during birth. Hepatitis B can cause lifelong liver problems including cancer.

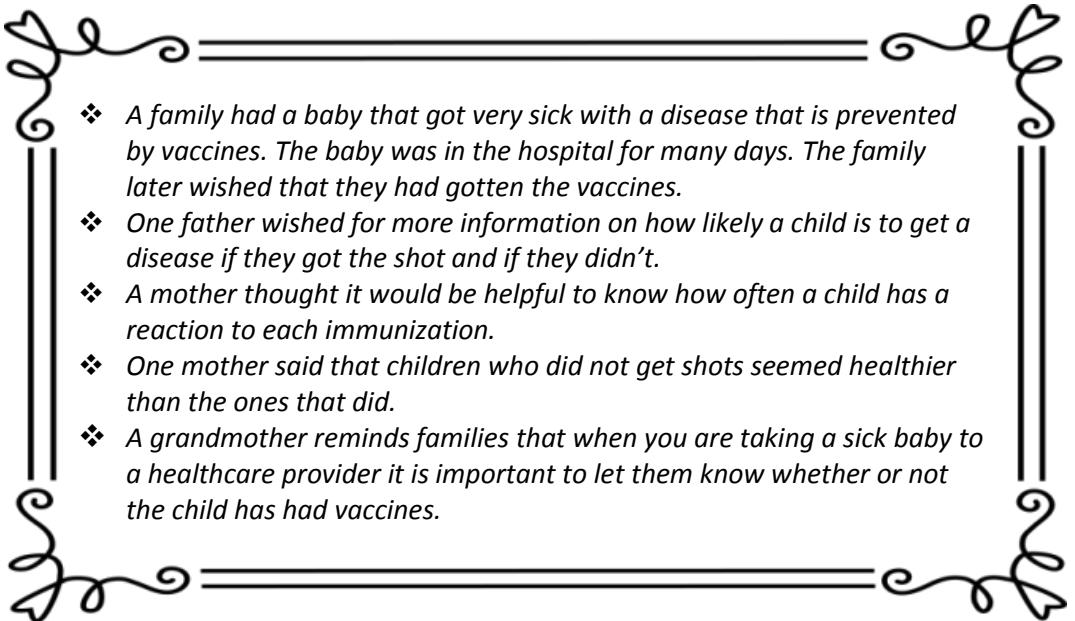
Rotavirus: Rotavirus is spread through contact with infected stools and is the cause of the most common and severe diarrhea in babies and children worldwide. Symptoms are fever and vomiting, followed by diarrhea for up to a week. The severe diarrhea results in

dehydration. Once the baby becomes weak, feeding becomes problematic and hospitalization usually results.

Influenza (flu): Influenza is spread through coughs, sneezes and contact. The highest rate of contamination is in school aged children. Symptoms include fever, chills, cough, headache, sore throat and muscle aches. While everyone is at risk, babies, the elderly and the chronically ill are at the highest risk from developing complications such as pneumonia and heart problems.

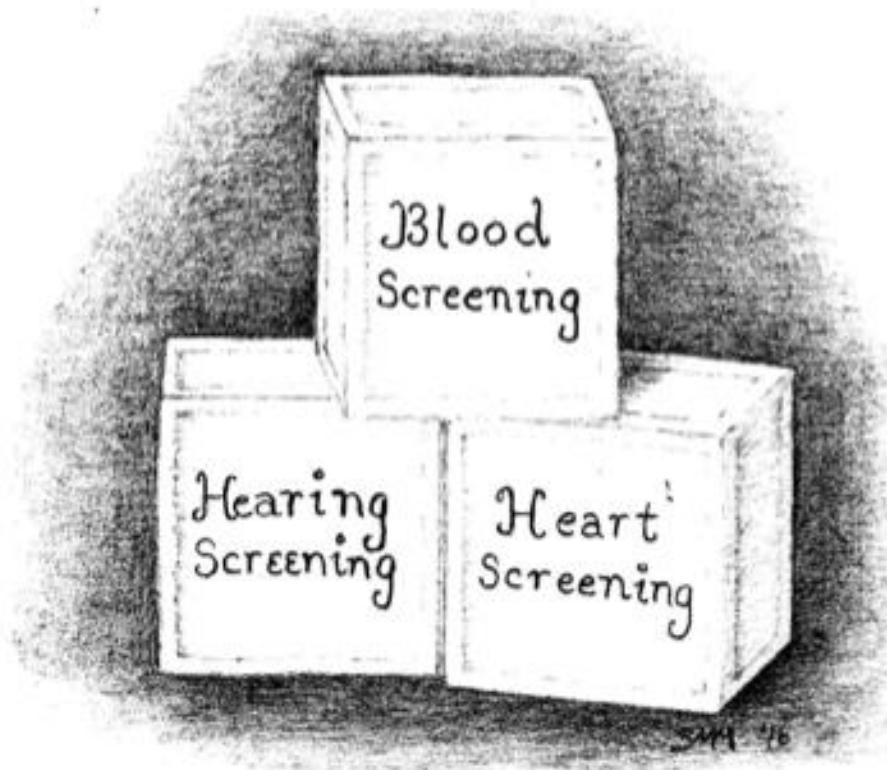
Chicken Pox (Varicella): Chicken pox is spread by coughing, sneezing or being in direct contact with the rash. It can also be spread through the air as skin cells from the rash float around as dust and infect others. Complications from the disease vary with age but most severe in adults and those under 1 year. If mothers develop chicken pox during pregnancy, this poses a risk to the mother and her unborn baby. Rare, but possible complications include pneumonia for the mother and birth defects for the baby.

Meningococcal: Meningococcus is spread by coughs, sneezes or sharing anything orally, like utensils. These bacteria can spread into the blood and brain and result in meningitis. Meningococcus is a leading cause of meningitis in the USA. This disease can affect blood flow to the fingers and toes, leading to limb loss. Severe disease with meningitis can result in hearing loss, brain damage or death.



- ❖ *A family had a baby that got very sick with a disease that is prevented by vaccines. The baby was in the hospital for many days. The family later wished that they had gotten the vaccines.*
- ❖ *One father wished for more information on how likely a child is to get a disease if they got the shot and if they didn't.*
- ❖ *A mother thought it would be helpful to know how often a child has a reaction to each immunization.*
- ❖ *One mother said that children who did not get shots seemed healthier than the ones that did.*
- ❖ *A grandmother reminds families that when you are taking a sick baby to a healthcare provider it is important to let them know whether or not the child has had vaccines.*

Very Important Tests in the First Days of Baby's Life



All parents want to do everything they can to protect their baby's health. If you are reading this before your baby is born, there is something very important that you can do now to protect your baby's health.

Ask the person who will be helping with your birth if they provide newborn screening. Newborn screening includes three very important tests that are done 24 to 48 hours after the birth that can protect your baby's health or even save their life. If the person helping you does not do these tests, only does part of them, or your baby is already born and has not had newborn screening, ask your healthcare provider about getting the tests done. Many county health departments will come to your home and do these tests for free. Many of the things that are tested for are more common in babies born to Plain families.

Newborn Blood Screen: This test is done by collecting a few drops of the baby's blood from the heel on a special card that is sent to the Wisconsin State Laboratory of Hygiene for testing. It checks for dozens of hidden conditions that are treatable, but if untreated can make a baby very sick, cause learning disability, or even cause death. It is best to have this test be done when the baby is between 24 and 48 hours old, but it can still be done on older babies. If the newborn blood screen shows that a baby may have one of these hidden conditions, they will need more testing. Sometimes this is just repeating the newborn blood screen. Other times the baby may need to go to the hospital or see a special doctor for evaluation and treatment. Early treatment can reduce or prevent the effects of these serious conditions. Even families who have many other children that are all healthy can still have a baby that is affected by one of these hidden conditions.

Newborn Hearing Screen: One in 350 babies is born with enough hearing loss to make it hard for them to talk and hear others. Children who cannot communicate may feel lonely and isolated and miss important lessons that parents pass along to children daily. Hearing loss can be difficult to notice, even by attentive and loving parents, so a hearing screen is very important for detecting hearing loss early. A small instrument can check if a baby has loss of hearing in one or both ears. Because this test is easiest when the baby is sleeping it can be done later if it is unable to be done at the same time as the other tests or missed. Babies that don't pass the hearing screen twice will need further evaluation. When children with hearing loss are not identified by the newborn hearing screen, most families do not realize the child does not hear until they are two to three years old. By then, many children will have permanent delays in speech and learning. To have the best speech and learning outcomes, it is very important that babies who are deaf or hard of hearing start appropriate treatment by 6 months of age.

Newborn Heart Screen: Some babies who look perfectly healthy when they are born have a serious heart defect that can be found with newborn heart screening. These babies don't show any signs in the first few days but may suddenly become very sick during their first week of life. This test is done using a small instrument called a pulse oximeter that measures the levels of oxygen in the baby's blood. This test is painless and does not harm the baby. If the test shows a low level of oxygen, the baby will need to be seen by a doctor for more evaluation. Some babies with low oxygen levels turn out to have a serious infection or other condition besides a heart defect. Babies with heart defects or other conditions causing low oxygen levels need immediate treatment. Babies who are identified with low oxygen levels with a pulse oximeter receive early treatment before they are sick, often do much better than babies who are very sick by the time they receive treatment.

Special Situations

Most babies are born healthy and gain weight and grow rapidly. Some babies are born early or are sick and have to spend time in the hospital after they are born. Some babies appear healthy at birth but don't grow or develop as expected and no one is sure why. Some babies are born with a special condition such as Down syndrome that is identified at birth. Other babies appear healthy but are found to have a special condition from the newborn screening tests.

Special children and babies that spent time in a Neonatal Intensive Care Unit (NICU) may have special challenges and need extra care after they are born. It is important to make sure that these babies are gaining weight and growing and developing normally.

All states have programs to help families with special children. Your healthcare provider or County Health Department can provide you with information about these free and very helpful services.

Even if you do not regularly get vaccines you may want to consider them for these children, so they do not have extra healthcare challenges to deal with.

Pennsylvania, Indiana, Ohio, Kentucky, and Wisconsin have clinics that care for many Plain families who have children with special conditions. Here is the contact information for these clinics:

Center for Special Children
206 N. Mill Street
La Farge, WI 54639
608-625-4039

Clinic for Special Children
20 Community Lane
Gordonville, PA 17529
717-687-9407

We Care Clinic
775 Pembroke-Fairview Rd
Pembroke, KY 42266
(270) 962-7383

DDC Center for Special
Needs Children
14567 Madison Rd
Middlefield, OH 44062
440-632-1668

New Leaf Center
16014 Chestnut Street
Mt. Eaton, OH 44659
330-359-9888

Community Health Clinic
730 E North St.
Shipshewana, IN 46565
260-593-0108

Central Pennsylvania Clinic
PO Box 5806
Belleville, PA 17004
717-935-2065

Family Record for Baby's First Birthday (continued)

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

First Birthday Record for _____ Born on _____

Weight _____ Length _____ Words _____

What baby can do _____

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