

WELL CHILD CARE AT TWO MONTHS

At Today's Visit

- We will ask for an update on your baby's health.
- We will discuss your baby's growth and development.
- Your baby will have a physical examination.
- Your baby will receive immunizations.
- We will screen for post partum depression using the Edinburgh Postnatal Depression Screen.
- You will have an opportunity to ask questions.

Things to Keep in Mind between Now and the Next Visit

- **FEEDING**
 - ▷ Congratulations! You have worked hard over the past two months to establish a healthy feeding relationship with your infant. "Whether you breast- or bottle-feed, your baby eats best and feels best about you- and about eating- when you pay attention to her and do what she wants. Continue to pay attention to her signs of hunger and fullness, eating and sleeping to guide feeding. Help her stay calm and awake during feeding time. You can control feeding with a bottle, but don't. It will hurt your baby's feelings and make her eat less well, not better. Don't worry about spoiling her- you can't spoil a tiny baby."
 - ▷ Your baby still needs only breast milk or infant formula to grow healthy and strong.
 - ▷ It is not time to start cereal or baby foods yet. Cereal can be started at 4 to 6 months of age.
 - ▷ At this age, most babies take about 4 to 5 ounces of formula every 3 to 4 hours.
 - ▷ Breast fed infants generally feed about 8 times per day.
 - ▷ If you give your baby breast milk only, it is still a good idea to sometimes feed your baby with pumped milk that you put in a bottle. Then your baby will learn another way to drink milk and other people can enjoy feeding your baby.
 - ▷ Always hold your baby during feeding time. Then your baby learns that you are there to meet his needs. This is an important and special time.
 - ▷ Do not put your baby to bed with a bottle or prop it in their mouth.

- ▷ Spitting up is very common and is usually not harmful. Please refer to the spitting up by infants addendum for additional information*.

- **DEVELOPMENT**

- ▷ Babies start to lift their heads briefly. They reach for things with their hands. They enjoy smiling faces and sometimes smile in return. Cooing sounds and gurgles are made in response to people speaking gentle, soothing words. *Here's what you might see your baby doing between the ages of 2 and 4 months of age:*

- Daily Activities**

- ◆ Crying gradually becomes less frequent.
 - ◆ Displays greater variety of emotions: distress, excitement, delight.
 - ◆ Shows more distress when an adult leaves.
 - ◆ Quiets down when held or talked to.
 - ◆ Cannot conceive of an object existing if it cannot be sensed.
 - ◆ Gaining more interest in the surrounding environment
 - ◆ Will begin to enjoy rattles and musical toys.
 - ◆ Mobiles also become more interesting.

- Vision**

- ◆ Focuses better, but still no more than 12 inches.
 - ◆ Follows objects by moving head from side to side.
 - ◆ Prefers brightly colored objects.

- Hearing**

- ◆ Knows difference between male and female voices.
 - ◆ Knows the difference between angry and friendly voices.

- Motor Skills**

- ◆ Movements become increasingly smoother.
 - ◆ Lifts chest momentarily when lying on tummy.
 - ◆ Holds head steady when held or seated with support.
 - ◆ Discovers hands and fingers.
 - ◆ Grasps with more control.
 - ◆ May bat at dangling objects with entire body.
 - ◆ May start rolling over.

- **SLEEP**

- ▷ At two months of age, some babies are sleeping for stretches of 5 or 6 hours or more at night, while others are still waking up and wanting to be fed every 2 to 3 hours. Typically, however, by 2 or 3 months of age, most infants are sleeping for longer periods during the night, and staying awake for much of the day. Every baby is different. Remember, no baby sleeps deeply all night long. Like older children and adults, babies go through several periods of arousal and waking during the night. A baby who knows how to comfort herself is likely to go back to sleep in a few minutes. Babies learn this by being put in their cribs while still awake.

- ▷ A newborn often falls fast asleep while feeding or being rocked, and does not wake up when being put in his bed. But after the newborn phase (about 6 to 8 weeks of age), it's time for your baby to start learning how to go to sleep on his own.
- ▷ Even as early as 6 to 8 weeks, you can establish a predictable bedtime routine: wash and change into a sleeper, a few minutes "reading" a picture book, a gentle song, saying good night to toys or pictures in the room.
- ▷ At this time, do not allow your baby to fall asleep during your pre-sleep ritual. While holding your baby prior to bedtime, keep him awake by singing or talking in a soft voice, stroke his head, and play with his feet. Let him get drowsy or groggy, and then put him into bed on his back. At first he may become more awake and fuss or even cry. Draw the shades or turn down the lights, tell him good night in a soft, loving voice, and leave the room. You may want to place a small, soft toy in the crib where he can see it. Even if he begins to wail, resist going back in for a few minutes. If the crying continues, go to the crib, pat him gently in a soothing manner, but don't pick him up. After he calms down, again leave the room. If he continues to cry, wait a few minutes longer than the last time, then repeat the soothing visit. It may take a few days, but eventually, your baby will learn to fall asleep in his own crib on his own.
- ▷ Some babies learn to put themselves to sleep with the help of a soothing sensation, such as rocking themselves or sucking a thumb or a hand. Others want to feel a soft toy or lightweight blanket. Go with whatever is safe and works. However, never put your baby to bed with a bottle for comfort. The natural sugar in many liquids promotes the growth of bacteria that cause tooth decay. Liquid, even water, pooling in the mouth can also back up into the Eustachian tubes, favoring the development of ear infections.
- ▷ Many infants take two or more daytime naps for at least the first 6 months. Overtime, the morning nap gradually drops out but, for most children, the afternoon nap continues through toddlerhood and into the preschool years.
- ▷ Scenario #1. A two month old infant who won't sleep in his own bed. He has slept in his parent's bed since his birth. Despite lullabies, talking to him, and letting him cry, he will only sleep in his parent's arms. What to do! Your infant can learn to sleep where you put him to sleep, but it takes patience and perseverance. Follow a regular bedtime routine, then put your baby in his crib still awake, and return at intervals to reassure him.
- ▷ Scenario #2. Should I offer my infant some cereal in the evening to make him sleep longer at night? There is no relationship between starting solid foods and sleeping through the night. Many babies start sleeping through the night before starting solid foods, while others still want a nighttime feeding even though they are eating solid foods during the day.

- **ELIMINATION**

- ▷ Most babies will strain during a bowel movement. As long as the stool is soft, there is no need to worry.
- ▷ Infants generally will stool from 4-6 times per day (potentially up to 9-12) to as little as once every 3-4 days.
- ▷ Constipation refers to hard, dry stools which are difficult to pass. Please notify us if you think your baby may be constipated.
- ▷ Babies usually have at least six wet diapers per day.

- **SAFETY TIPS**

- ▷ ***Avoiding Suffocation and Choking.*** Use a crib with slats no more than 2 and 3/8 inches apart. Avoid the use of soft bedding or soft toys. Use a mattress that fits the crib snugly. Keep plastic bags, balloons, and baby powder out of reach. Mesh netting of playpens should always be in the upright position.
- ▷ ***Preventing Fires, Burns, and Scalds.*** Please make sure your infant's crib is in a safe location and not too close to a heater. Avoid eating, drinking, or carrying anything hot near your baby or while you are holding your baby. Ensure that the water temperature in your home is less than 120°F (50°C). Please refer to the addendum on burn safety for additional information*. Install smoke and carbon monoxide detectors and check them every six months. Keep a fire extinguisher in or near the kitchen. Please do not expose your baby to smoke of any kind. If you smoke cigarettes, try to cut back and set a quit date. Tell your friends you are quitting. Your baby's skin is very sensitive, so please avoid direct sunlight. If your infant must be in the sun, dress him in lightweight clothing that covers his body, including hats with wide brims to shadow his face. Use an umbrella to create shade. Sunscreen should not be applied to infants less than 6 months old
- ▷ ***Avoiding insect bites.*** Once your child is 2 months old, DEET-containing insect repellants can be used as long as the concentration of DEET is 30% or less. Apply these sprays or lotions sparingly on exposed skin, and not on your child's hands, or near the eyes or mouth. Wash treated skin with soap and water after returning indoors. Apply only one time in a 24 hour period.
- ▷ ***Avoiding Falls.*** Never leave your baby when he is up high, such as on a changing table or bed. Make sure that the sides of the crib are always completely up. Infant seats in the home are safe only on the floor. **PLEASE DO NOT BUY OR USE A WALKER.** Many children are injured or killed each year in walker related accidents. Please refer to the addendum on the dangers of baby walkers for additional information*. Watch for obstacles and ice. If you fall, so does your baby.
- ▷ ***Car Safety.*** Never leave your baby alone in a car, or alone with siblings or pets. Use an approved infant car safety seat and follow the instructions for proper use. Please refer to the addendums on car safety seats and tips

for infant travel for additional information. Be a good role model for your child by always wearing your seat belt.

- ▷ **Babysitters.** You can never be too careful: obtain good references through your church, local schools, relatives, or close friends. Leave emergency instructions and phone numbers and a written routine. Give the babysitter a quick tour of your home before you leave.

- **GENERAL RECOMMENDATIONS**

- ▷ Talking to your baby and establishing good eye contact are important.
- ▷ Avoid leaving your child alone, except in his crib.
- ▷ Never shake your baby. Forceful shaking can cause death or permanent injury. Good people, when overwhelmed, can hurt an infant. Remove yourself from your infant and return only when diffused and calm.
- ▷ Keep your home and car smoke and drug-free.
- ▷ Avoid crowded places such as malls, restaurants, movie theaters, and airplanes for the first 8-12 weeks of your infant's life to reduce the chances of him getting sick.
- ▷ Fevers and excessive irritability are not normal in the first two months of life and must be evaluated by your provider right away.
- ▷ Rectal temperatures are best. We use 38°C or 100.4°F for our definition of a significant fever. Please call us if your baby has a temperature at or above this. Please refer to the addendums on fever and how to take a rectal temperature for additional information*.
- ▷ Babies often sound congested at this age. For congestion that interferes with sleep or feedings, gently use a bulb suction device with saline drops. Please refer to the addendum on nasal saline irrigation for additional information*. Please call us if your baby develops a fever or trouble breathing.
- ▷ Responding to your infant's cries is important.
- ▷ It is usually not necessary to feed your baby for every crying spell.
- ▷ Swaddling, holding, rocking, singing, and caressing can comfort babies.
- ▷ The amount of extra sucking babies do when they are not feeding varies. This extra sucking is a beneficial self-comforting behavior. Some babies suck on their thumb or fingers almost constantly. If you have a baby like this, you may want to try to interest him in a pacifier. Another consideration favoring the use of a pacifier is a recent recommendation by the American Academy of Pediatrics (AAP) to encourage pacifier use as a potential method to reduce the risk of SIDS. The recommendation states that the pacifier should be offered to an infant when being placed down for all daytime naps and nighttime sleep for infants up to 1 year of age. For breastfed infants, the recommendation suggests that pacifiers should be introduced after breastfeeding has been well established (generally around 1 month of age). The pacifier can be removed once sleep has been established. Please refer to the pacifier addendum for additional information*.

- ▷ Colic (excessive, inconsolable crying for an unknown cause) can start around 2 weeks of age, peak around 6 weeks of age, and generally wane by around 10 weeks of age. Please call us to schedule an appointment to determine the source of your infant's irritability and refer to the colic addendum for additional information*.
- ▷ Place your infant's head in different positions throughout the day and night in order to prevent it from becoming misshapen or flattened. Please refer to the flattened head syndrome addendum for additional recommendations*.
- ▷ Accept support from family and friends. Learn about parent support groups if needed.
- ▷ Schedule a postpartum checkup for yourself.
- ▷ Older children are often jealous of a new baby. Provide them with 15 minutes of alone time with mom or dad daily to remind them that they're still special, important, and loved. Please see the sibling rivalry toward a newborn addendum for additional recommendations*.

▪ IMMUNIZATIONS

- ▷ **At the 2-month visit, your baby should receive 2 shots and 1 oral immunization including a:**
 - ◆ DTaP (diphtheria, tetanus, acellular pertussis,) Hib (Haemophilus influenza type B) , Polio combined within one shot (Pentacel)
 - ◆ Pneumococcal (PCV7) shot
 - ◆ Rotavirus oral vaccine.
 - ◆ *Please refer to your vaccine information statements (VIS) for complete details regarding each vaccine.*

▪ IMMUNIZATION SIDE EFFECTS

- ▷ Your child may run a fever and be irritable for about 1-2 days after getting shots. Your child may also have some soreness, redness, or swelling at the vaccine sites. Acetaminophen (Tylenol) may help reduce fever and pain. For pain at the injection sites, place a cool, wet washcloth on the area as often and as long as needed for comfort.
- ▷ *Please call us if your baby has a rectal temperature over 102.5°F, or has a reaction other than fever, mild irritability, or injection site problems.*

▪ ADDITIONAL HANDOUTS*

- ▷ Diaper rash
- ▷ Blocked tear duct
- ▷ Developmental stimulation
- ▷ Myths and facts about fever

How to Prepare for the Next Visit

- Please bring in questions and observations about your baby that you would like to discuss.
- Keep track of any illnesses, including visits to other health care facilities and the ER.
- Please bring your vaccine record.

What to Expect at the Next Visit

- Your child should return when he is **4 months old**.
- Your baby will have a physical examination.
- Your infant will receive her second set of immunizations at the four month well child visit to protect against diphtheria, pertussis, tetanus, polio, Hib, pneumococcal disease, and rotavirus.

* =found on our website

QUESTIONS FOR 2 MONTH VISIT

PATIENT NAME: _____

DATE: ____/____/____

Please answer the questions that apply to either your breast milk or formula fed infant.

NUTRITION

BREAST MILK

Do you feel that breast feeding is going well? yes no

Are you: breast feeding exclusively pumping both

APPROXIMATE NUMBER OF FEEDINGS IN A 24 HOUR PERIOD:

5 6 7-8 9-10 10-12 >12

DOES YOUR INFANT BREAST FEED FROM ONE OR BOTH BREASTS?

one both N/A

APPROXIMATE AMOUNT OF TIME PER BREAST?

< 15 minutes 15-30 minutes 30-45 minutes > 45 minutes n/a

Have you introduced an occasional bottle? yes no n/a

Are you currently taking your prenatal vitamins? yes no

Is your child taking a vitamin D supplement? yes no

Do you plan on returning to work while breast feeding or pumping breast milk? yes no

Do you want information regarding breast feeding/pumping while returning to work? yes no

FORMULA FED

OUNCES PER FEEDING:

½ to 1 ounce 1 to 2 ounces 2 to 4 ounces > 4 ounces

FREQUENCY OF FEEDING:

every 1-2 hours every 2-3 hours every 3-4 hours every 4-5 hours > 5 hours

APPROXIMATE FEEDINGS IN A 24 HOUR PERIOD:

5 6 7-8 9-10 10-12 >12

APPROXIMATE TIME PER FEEDING:

< 15 minutes 15-30 minutes 30-45 minutes > 45 minutes

FORMULA TYPE:

Enfamil Lipil Nestle Goodstart Prosobee Enfacare Other
 Similac Advance Isomil Nutramigen Neosure

M.A.R. 2.2008 SIGNATURE OF PROVIDER: _____ DATE: ____/____/____

QUESTIONS FOR 2 MONTH VISIT

PATIENT NAME: _____

ELIMINATION

Wet diapers per day: 1-3 4-6 >6

BOWEL MOVEMENTS:

FREQUENCY:

< 3 per day 3-6 per day > 6 per day

Is your infant having any problems with bowel movements? yes no

SLEEP

Sleeps consecutively for:

2-3 hours 3-4 hours 4-5 hours 5-6 hours > 6 hours

How many naps does your infant take?

none 1 2 3 > 3

How much time (total) does your infant spend napping during the day?

1 hour 1-2 hours 3-4 hours > 4 hours

Is your infant sleeping on his/her back? yes no

Is your infant using a pacifier? yes no

Are you establishing a routine before placing your infant to sleep? yes no

Are you placing your infant to sleep while partially or fully-awake? yes no

VISION

Do you have any concerns about your infant's vision? yes no

HEARING

Do you have any concerns about your infant's hearing? yes no

SAFETY

Does your infant ride in the car using a rear facing infant car seat? yes no

DEVELOPMENT

Coos and vocalizes in response to being talked to yes no

Is attentive to voices yes no

Follows you with his/her eyes yes no

Smiles responsively to your smile yes no

Shows pleasure in interaction with adults, especially parents and other primary caregivers yes no

While lying on stomach, lifts head, neck, and upper chest with support on forearms yes no

When held upright, has some head control yes no

M.A.R. 2.2008 SIGNATURE OF PROVIDER: _____ DATE: _____ / _____ / _____