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OWNER'S GUIDE for the 2 MONTH OLD

FEEDING:

Infants have rhythms for feeding and sleeping, so be flexible. Growth acceleration is greatest during the first six months and slows thereafter. Breast milk and/or formula meet all nutritional needs. Please do not give cow or goat milk or solid food. Expected weight gain is 1 ounce per day. Infants usually eat every 2-3 hours during the day and often have at least one night feeding. If your baby is able to sleep through the night and gaining appropriate weight, do not wake him/her for any feedings. Burp the baby frequently during feedings and do *not* prop bottles. If the baby is not content after a full feeding, use a pacifier to satisfy nonnutritive sucking. The baby may spit up and occasional vomiting is normal. Frequent projectile vomiting is *abnormal*. Pumped breast milk is good for 10 hrs. at room temperature but then must be refrigerated and used within 8 days. Frozen breast milk should be used within 6-12 months if stored in the freezer compartment of the refrigerator or within 2 years if stored in a deep freeze. Fluid needs are met by breast milk or formula. Small amounts of water may be offered to the baby between feedings, but this is not necessary. Do not use sweetened water.

SLEEP AND ACTIVITY:

By 2 months of age, babies may begin to sleep through the night and are able to sleep in their own cribs. They also begin to stay awake for longer periods during the day. Remember, just like adults, babies have good days and bad days. Infant seats and swings are helpful so that babies can observe activity and socialize, but should be placed in a safe location. Verbal and visual stimulation are important and mobiles are great. Do not talk "baby talk" or refer to yourself in the third person. Remember that what infants are hearing now is what they will eventually imitate. Most babies fuss before falling asleep and this is normal. Please do not prop bottles in the crib.

GROWTH AND DEVELOPMENT:

Babies now begin to recognize faces, follow movements, smile and respond to stimulation. They are soothed by voices or by being held. They will begin to grasp a rattle and focus on bright colors. By four months of age, they have pretty good head control, sit with support, sometimes roll over, wiggle, bat at toys, grasp and hold objects for a few moments, laugh out loud, gurgle, coo and stare at faces while feeding. Eating and sleeping schedules become more regular and crying decreases. **REMEMBER**, what is normal for one child may not be for another. *AVOID THE TEMPTATION* to compare one baby with another baby. Growth and development are evaluated individually at regular check-ups. Thumb sucking and finger sucking are normal.

TOYS:

You are your baby's best toy! Bright colored mobiles, rattles, squeeze toys and bright soft objects are stimulating. Please, no sharp objects.

SAFETY:

Burns: Always check bath water with your elbow. Keep hot liquids away.

Falls: Never leave the baby unattended. They may roll. Spaces between crib bars must be 2 3/8 inches or less.

Toys: Should be too large to swallow, too tough to break, no sharp edges or paints, no long cords and no jewelry or pacifiers around the neck.

Smothering: No plastic bags or soft pillows around the baby. Do not allow the baby to suck on balloons.

Cars: A car seat used properly according to the manufacturer's instructions is mandatory. The baby must be in the back seat and rear facing until at least one year of age. It's the law.

FAMILY:

Babies who travel out with their families adapt well and usually become quite content in various environments. Moms and Dads need time together away from the baby. Find a sitter you can trust. Breast fed infants can be supplemented with pumped breast milk or formula. Dads may enjoy giving an occasional supplemental bottle and this will not compromise breastfeeding.

COMMON WORRIES:

Colic: The real cause is not known. Subtle motion helps such as walking and car rides. Burp well during feedings and after crying. Lay the baby on your chest or across your knees. Try a wrapped warm hot water bottle or a heating pad on the lowest setting against his/her tummy. Stay calm because the baby will sense your tension and anxiety. Colic usually disappears by 3-4 months as the gastrointestinal tract matures. Breast milk does not cause colic and discontinuing breastfeeding will not prevent colic.

Constipation: Hard, formed stools, **not** infrequent stooling. Try prune juice and water mixed in equal amounts, 2-4 ounces per day. Remember, some breast fed babies may not have a stool for 10-14 days without difficulty and this is normal.

Colds: Frequent sneezing is normal. If true cold symptoms develop, suction the nose frequently with a bulb syringe. You may also use normal saline nose drops. Call us if the baby seems unusually irritable.

Diaper Rash: To prevent, keep diaper area clean and dry and expose to air as much as possible. If a rash occurs, use a good moisture barrier to protect skin from urine. If you see no improvement or if the rash worsens, call us.

Umbilical Hernia: This is protrusion from the navel. Most of these hernias go away by 5 years of age. Bowel never gets caught and dies with these types of hernias. We will assess the situation at each well visit.

Jealous Siblings: Don't ignore this jealousy. Try to direct their feelings into positive channels. Include them in the baby's care, making them feel special and important. Have special time with them to rebuild feelings of being and loved and needed and most jealous behavior will eventually pass.

HEALTH CARE:

Routine well child appointments and immunizations are:

2 MONTHS OF AGE: DTaP, IPV, Hep B, PCV 13, HIB, Rotavirus

4 MONTHS OF AGE: DTaP, IPV, Hep B, PCV 13, HIB, Rotavirus

6 MONTHS OF AGE: DTaP, IPV, Hep B, HIB

9 MONTHS OF AGE: Hematocrit

12 MONTHS OF AGE: Varicella, MMR, PCV 13, Hep A and if attending a licensed day care- HIB

15 MONTHS OF AGE: DTaP, HIB if not given at 12 months of age

18 MONTHS OF AGE: Hep A

24 MONTHS OF AGE: Update any vaccine deficits

3 YEARS OF AGE: Update any vaccine deficits

4 YEARS OF AGE: DTaP, IPV, MMR, Varicella

5 YEARS OF AGE: Update any vaccine deficits

6 YEARS OF AGE: Update any vaccine deficits

7 YEARS OF AGE: Update any vaccine deficits

8 YEARS OF AGE: Update any vaccine deficits

9 YEARS OF AGE: Update any vaccine deficits

10-11 YEARS OF AGE: Tdap, MCV4, HPV, update any vaccine deficits

12-15 YEARS OF AGE: Update any vaccine deficits

16-18 YEARS OF AGE: MCV4, Men B (Men B booster one month later)

WHEN TO CALL THE PEDIATRICIAN:

1. Baby has a rectal temperature of 101 degrees rectally or greater for more than 3 days which does not respond to Acetaminophen.
2. Baby has specific signs and/or symptoms of illness.
3. Baby is extremely lethargic, feeding poorly or is unusually irritable.
4. Baby has green tinted watery foul smelling stools more frequently than usual' significantly fewer wet diapers than usual.
5. ***Parent is uncomfortable and/or worried.***

If you are dealing with a life-threatening emergency, CALL 911. Otherwise, call our office phone number ***first*** and our voice message will provide detailed instructions on how to obtain medical care for your child when our office is closed. ***(775) 329-5555***