# Newborn Guidance Dr Ott June 2023 Transcript

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## Welcome and Newborn Resource Book

Hi, I'm Dr. Chrissy Yott. I am one of the pediatricians here at Willamette Falls. And I have here to share with you a few of things that I like to show with my newborn families.

Congratulations on your newest arrival. Hope you find this information useful. First of all, my favorite book to have around is called Baby 411. It's the closest we have to a user's guide, in my opinion.

It's a paperback book. You can find it on your online retailers. I would go ahead and order that now if someone hasn't gifted it to you. It has a thumbable index on the side so you can get to the information you need quickly.

Its reliable information and it gives a few different perspectives. So it's not all slanted information. And I was surprised to find that even as a pediatrician that book taught me things.

As a pro tip, there's also Toddler 411 for future use. Here are a number that you're going to want to be familiar with. A temperature of concern is 100.4, 100 point four.

Now that's not much of a fever for you or me, but it is quite a favor for a newborn in the first six weeks of life. The reason that we take fevers very seriously in first 6 weeks in life is that there's no a developed blood brain barrier.

## Fever, Temperature, and Weight Loss

So any infection in a baby's bloodstream can affect their neurological system quite quickly. Please keep that in mind. the best way to take a babies temperature, the gold standard, is erectile temperature, however, it is a little invasive.

And so we often start with a axillary or under the armpit temperature as you're probably familiar with. So if we use an under-the-arm pit temperature I add one degree to keep it very accurate.

A lot of people are surprised to find out that babies lose weight after they're born. Not all babies, but many babies and that is very normal. Another number here, 10, ten percent.

So babies can lose up to 10% of their birth weight without worrying us too much. If they lose beyond the 10%, Mark, we begin to think it's time to get some plans in place to help them, okay?

They have until two weeks of age to come back to theirbirth weight. So there are often many worries about is my baby getting enough food? Is it a problem that they're losing weight?

So I'm just here to say losingweight is normal and getting milk in takes a few days. So if you're breastfeeding your baby, which I hope that you are for all of its many, many benefits to both baby and you, I would make sure that are feeding the baby every three hours.

And when I say every 3 hours, we're counting from the beginning of a feed. So, if feed the babies starting at 8 a.m., it doesn't matter if baby fed for 10 minutes or 30 minutes, We're still going to start that next feed by 11 a.m.

## Feeding, Bundling, and Diaper Counts

and if the Baby isn't waking up to feed itself, then, we will wake them up, mess with them, make them a little bit less comfy, maybe change their diaper, or maybe take off a layer.

Speaking of layers, a lot of parents wonder how much should I bundle my baby? And I usually tell people just one

layer more than you would feel comfortable in.

What temperature should the rooms be at home? Around 68 to 72 degrees, something that's comfortable for you and me, and then baby needs one degree more, okay?

We start also thinking about numbers of wet diapers per day. So we wanna see at least one void or urination, one wet diaper, and one stool or poop in the first 24 hours.

If there are more, that's great, but we just wanna a minimum of one, okay? And then we want to see the babies having sequentially more wet diapers with each passing day.

When babies start to eat, their little tummies are about the size of a large walnut, so they're not taking in very much food. But very quickly, they can take more food over the few days of life.

Right? So, one urine in the first 24 hours and then as many urines as they are days old. So one urine on day one, at least two on Day Two, and so on up through the First Week.

After First week, we'll have up to eight, nine urinations a day. And that can be normal, okay? Sleep, babies sleep a lot, especially during the 1st few days.

You may find that they have difficulty waking up at the breast and things like that. So don't worry, that is perfectly normal. All of the snuggling skin to skin, all of these oral exploration, this is all part of their learning how to breastfeed and also your learning.

Here's a pro tip. If a latch is painful, go ahead and interrupt that latch. Don't be a hero. We can use our finger to unlatch the baby to avoid sort of a suction pain of taking baby off.

## Sleep, Soothing, and Stool Changes

That's important to know. And most babies use moms as a pacifier. Don't be a hero. If that is painful for you, please take a rest. Additionally, speaking of pacifiers, many places have concerns about nipple confusion and the use of Pacifiers early.

I personally feel like pacifers are a very reasonable thing to offer babies. They have very few self-soothing options. And one of the options they do have is to use a Pacifier to do non-nutritive sucking.

Otherwise they might use your breast as a pacifier, which can cause more damage to the nipple area and difficulties in that realm. As far as stools go, you'll notice that your baby's poops at the beginning are very dark and typically quite sticky, difficult to clean.

Luckily they don't stay that way. Um, as the milk comes in and you're getting more milk instead of colostrum, those stoles start to change color. And we see them turning from dark brown and blackish into yellow and green.

And many different colors can be normal. You'll see little sesame seed shapes in there. Those are curds. We call that a seedy poop. It's very normal, very, normal Also, you'll be asking yourself, is this normal?

Quite often. Again, Baby 411 is a great resource for that. Or if you are going to go to the internet, healthychildren.org is the American Academy of Pediatrics website.

That's a good place to start. So we've talked about temperature, we talked weight loss, feeding every three hours, how much urine and stool to expect.

And now we're going to talk a little bit about sleep safety. So all babies should sleep on their backs, not on the sides, and not their tummies. This is to prevent sudden infant death syndrome.

We want to do everything we can to decrease those risks, including sleep-safety. One of the things we can do is not smoke in the family. That is one of most important things that is evidence-based to prevent sudden infant death syndrome.

## Safe Sleep and Infection Prevention

Other than that, we want babies to sleep in a bassinet or crib near your bed, but probably not in your beds. So we like to have babies at first in our room so that you can hear them when they stir, when the need to feed during the night.

They should be tightly swaddled or in sleep sack with no loose blankets, no pillows, not toys, nothing additional in their sleep space. Sleeping safely also includes naps.

They should also be in a safe sleep space for napse during the day. So please don't sleep with them on a couch or in stuffed chair that's quite big. Big bodies and little bodies in those spaces do not mix safely.

In addition, if you're ever at a friend or family member's house and they offer to you, oh, I'll put some pillows around the bed and the baby can sleep in the middle, that way they won't fall off, please know this is not a safety option.

This is never ever a save option What else can we do to keep our babies safe? Hand washing, hand hygiene, very important for keeping our baby safe. Make sure that all of your visitors and admirers come feeling well, not sick, and do lots of good hand-hygiene.

It's okay to ask them. You can blame it on the pediatrics team and say, you know our doctor said, please just be very careful about preventing infection for this baby.

A word about siblings, especially toddler-age siblings. They're going to be a little bit have their world rocked by having a new baby in the house. So if you have a toddler or an older sibling, please make sure that they're getting lots of extra attention too.

There are many online guidances about parenting in that situation. Your provider will give your baby a detailed exam today and each day that you're at the hospital.

And after you go home, there are some follow-ups to expect.

## Follow-Ups and Safe Baby Handling

You should expect a follow up with your provider or mother-baby clinic at least two days after going home, and sometimes sooner if we have a weight loss or a bilirubin we're following, at two weeks of age and at months of ages.

So if you remember the number two, two day, s two week and two months. And last but not least, I'm gonna try to use this little CPR baby to show you one of my favorite ways to hold a newborn baby.

Because many people, especially first time parents, get a little nervous about carrying their baby. So always carry the baby with their head supported because they don't have the strength to hold up their own head.

And then this is the part I want to show you. Four fingers under their bum and one finger inside this leg. This is a very solid hold for you to not slip and drop or fumble your baby, all right?

Never leave baby on the changing table or the couch. Unintended, always have one hand on baby. If you can't have on hand the baby, make sure that all of the sides are up so that you could safely step away.

Please, if you have questions about any of this information, write them down. Share them with your nurse, share them your provider. We wish you the best in health and care for your baby and best wishes.