

Preparing for your Newborn – A Review

Breastfeeding

1. When should you feed a newborn baby?
2. What is the minimum number of feedings per day? What is the longest time a newborn should go in between feedings?
3. How long should you nurse the baby during each feeding?
4. How long can you store breastmilk that has been pumped?
5. Name some things you can do which may help prevent sore nipples.
6. What can you do to relieve the discomfort of engorgement?
7. Name some signs of a good position and a good latch.

Newborn Care

1. Describe some of the ways your baby would communicate to you that he is hungry? Full? Tired? Hot? Cold? Overstimulated? In Pain?
2. On Day 1 – 5: How many wet or dirty diapers should you expect?
After Day 5, when mature milk is in, how many wet or dirty diapers per day?
3. How much does a baby sleep each day? How often do they wake up?
4. Describe some important parts of sleep safety for baby.
5. Name some newborn warning signs (if you see any of these signs in a baby under one month old, you should call baby's doctor).
6. What are some ways to calm a crying baby?

Self-care

7. What are some resources you can use if you need support?
8. What nutrients are especially important for pregnant / breastfeeding moms?

Breast-feeding

1. When to feed: Feed on demand, anytime the baby is hungry. (Watch for hunger cues.)
2. How often to feed: Minimum: 8 – 12 feedings per day (may be more). No more than 3 hours between feedings in daytime, no more than 4 hrs at night (may be as frequent as every hour.)
3. How long to feed: Nurse on the 1st side for *at least* ten minutes (may be longer), until baby falls asleep or pulls away. Then, give him a chance to burp, switch sides, nurse until he's full.
4. Storing pumped breast milk: maximum of 10 hours at room temperature OR 8 days in the refrigerator OR 3 months in cold freezer. (Remember to wash hands and equipment thoroughly before pumping.)
5. Preventing sore nipples: Wash nipples with warm water, but no soap. Keep nipples dry; change nursing pads whenever wet. Nurse more often, for shorter periods. After each feeding, express a little breast milk, rub it in to nipples, and expose breasts to fresh air for a short while.
6. Relieving engorgement: Massage, warm washcloths, warm shower, hand expressing a small amount of milk. Nurse more often. Remember that engorgement is a temporary problem that will resolve soon.
7. Good Position: Make yourself comfortable first; bring baby to your breast, belly to belly; baby's chin and nose up against breast, baby's ears in line with shoulders and hips. Good Latch: lips flanged out over nipple, baby has part of areola in his mouth, and nipple is far back in mouth. Chin and nose against breast; hear swallowing (after day 5); shouldn't hear clicking or smacking.

Newborn Care

1. Baby's communication cues: Hungry: rooting, sucking, tongue thrusts, becoming active after being in quiet alert stage. Full: Falls asleep, pulls away, pauses more than he sucks. (Note, if he has eaten less than 10 minutes, he needs to eat more!) Tired: yawning, rubbing eyes, turning head side to side. Hot: clammy skin, breathes rapidly. Cold: splotchy skin. Overstimulated: turns away, sneezes, spreads fingers out, arches back. Pain: a sudden, high-pitched cry.
2. Diaper counts in first five days: You should see at least one wet or dirty diaper per day old. (e.g. on day 3, at least 3 wet/dirty diapers.) There may be more, if baby passes a lot of meconium. Diaper counts after Day 5, 7 – 10 wet or dirty diapers per day. For a breastfed baby, these diapers should include at least 3 bowel movements.
3. Typical sleep patterns: Newborns sleep 12-20 hrs a day, but usually not for more than 3 hours at a time. By three months, they will be sleeping for longer stretches, and starting to distinguish night from day.
4. Sleep safety: Babies should sleep on their backs, on a firm surface, without pillows, stuffed animals, or fluffy blankets. The room they are in should not

be heated to more than 70 degrees. For more info:
www.cpsc.gov/cpsc/pub/pubs/209.pdf

5. Warning signs in a baby under 1 month old. Call doctor if you see:
 - Dehydration: crepe papery skin; dry mouth; dark yellow urine; sunken fontanel. Fewer than five wet diapers in a 24 hour period (after day 4 or 5)
 - Diarrhea. Unusually frequent and very watery stools; blood or mucus in stools
 - Fever higher than 99.5° F, under the arm
 - Jaundice: whites of the eyes turning yellow; skin below nipple line yellow
 - Thrush: White patches on the tongue or inside the mouth that don't wipe off easily or reveal inflamed skin when wiped away.
 - Umbilical cord: redness around cord, foul odor or pus, bright red bleeding.
 - Circumcision: bright red bleeding, swelling, foul discharge, unable to urinate.
 - Vomiting: forcefully / projectile vomiting or more frequently than usual (more than just usual spitting up).
 - uncharacteristically fussy or irritable; unusually lethargic or sleepy
 - Problems with breathing: signs such as blue lips, struggling to breathe, flaring nostrils, or deep indentations of the chest when breathing.
6. To calm a crying baby: First, make sure baby's needs are met, especially check if it is hungry. Then, once needs are met, to calm a crying newborn, try to replicate the womb environment. Here's some things that may help:
 - Swaddle the baby and hold it close where it can hear your heartbeat and regulate its temperature to match yours.
 - Motion, such as swaying and rocking. Some babies like to be held so there is pressure on their bellies (as if you were burping them).
 - Gentle stroking, or rubbing their back, slowly and repetitively.
 - Sucking: giving the baby something to suck on, like your finger, or their own hand, or a pacifier (after breastfeeding is well-established).
 - White noise: parents making the same sound over and over, or running a fan, or appliance in the room where you're holding baby.
 - Talk soothingly, or sing lullabies. Stay as calm as possible yourself, as baby will respond to your mood.
 - Try to be repetitive and boring. If you are trying desperately to calm baby and change activities continuously, baby is likely to get even more over-stimulated and have an even harder time calming himself.
1. Swedish's New Parent Information Line. Staffed by a registered nurse / lactation consultant, from 7 am – 11 pm (you can leave a message during the night) (206)386-MOMS. PEPS Resource Guide:
www.pepsgroup.org/familyresources/default.htm Your baby's doctor is always your primary resource for health information.
2. You'll need each day: 30 mg of iron, 300 extra calories, 60 grams of protein, 1200 mg of calcium, and 2 quarts (64 ounces) of fluids. Continue taking prenatal vitamins.