

Shelly C. Bernstein, MD
Joshua Gundersheimer, MD
Robert Andler, MD
Colleen Brownell-Krupat, MD

Weston Pediatric Physicians

486 Boston Post Road, Weston, MA 02493
(781) 899-4456

www.westonpediatrics.org

Rosemarie Dieffenbach, MD
Katherine Bui, MD
Karen Ashworth, FNP

Your One Month Old

Length _____

Weight _____

HC _____

NORMAL DEVELOPMENT

Your baby may:

Lift her chin for a few seconds when lying on her tummy.

Not be able to support her head without assistance.

Grasp small objects like a rattle or finger when placed in her palm.

Sleep 16 hours a day, waking every 2-3 hours to feed.

Cry to let you know she's hungry, bored or uncomfortable.

Smile socially at familiar faces and voices.

Watch parents intently as they speak to her.

See 8-12 inches in front of her.

Startle to loud sounds, or quiet to parent's voice.

Still be fussy in the evening.

DIET

Breast milk or iron fortified formula is the main source of nourishment.

Babies who are primarily breast fed (32 oz/day of formula) should also take vitamin D supplements to prevent rickets. 1 dropperful of TRI-VI-SOL or D-VI-SOL a day (available without prescription) will meet these needs.

Do not give juices, cereals, solid foods, or honey.

Feeding solids before 4 months of age will not help your baby sleep through the night and may put your baby at risk for food allergies when she is older.

A bottle feeding may take 20-30 minutes.

Breastfeeding may take approximately 10-15 minutes per side.

To reduce night feedings, wake your baby if she naps more than 4 consecutive hours during the day.

Bottle fed babies usually take about 3-5 ounces 5-7 times per day.

If you are breastfeeding and want your baby to be able to take a bottle, now is the time to offer her a bottle every other day. This may be expressed breast milk or formula.

ELIMINATION

Breast fed babies usually have yellow, seedy, loose bowel movements. These can occur as often as every feeding to as infrequently as once every 7-10 days.

Formula fed babies usually have soft yellow, green or brown stools. These can occur as often as every feed to as infrequently as every other day.

CONSTIPATION

Many babies grunt and turn red in the face when having a bowel movement. This is normal. They are constipated if the stool is thicker than peanut butter, occurs infrequently, and the baby is very uncomfortable.

HYGIENE

It is okay to use unscented, hypoallergenic baby wipes.

Diaper rashes are common, caused by irritation from frequent stooling. Use any diaper cream to protect your infant's sensitive skin.

Keep your baby's fingernails short and smooth to prevent scratches. It may be easier to cut nails with blunt tipped scissors after a bath and while your baby is sleeping. Cut nails straight across.

SAFETY

- ☺ Your baby must ALWAYS be in a proper car seat when in the car. All babies must ride in a rear-facing car seat until they are at least 2 years of age or until they reach the highest weight or height allowed by your car seat's manufacturer. Keep all children in the backseat for greatest protection and to prevent airbag injuries. NEVER take your baby out of the car seat while the car is moving.
- ☺ Never leave your baby alone on a table, sofa, bed, or bathtub.
- ☺ Most babies should sleep on their backs. Be sure to tell all daycare providers this, including grandparents. Do not use soft cribbing in cribs or playpens.
- ☺ Keep your baby away from tobacco smoke. Smoke particles can stick to clothing and upholstery in the house and car. Smoke exposure has been linked to asthma, ear infections and possibly SIDS.
- ☺ Install smoke detectors on every floor and check batteries monthly. Replace batteries every 6 months.

PLAY

Talk and sing to your baby. You cannot spoil an infant at this age. You should respond to her crying since this is her only form of communication.

Be sure to place your baby on her tummy sometimes while you are playing with her so that she develops her neck and arm strength.

COMMON PROBLEMS

Call our office at any time if your baby:

- ♥ has a rectal temperature greater than 100.4.
- ♥ refuses to feed for more than one feeding.
- ♥ is unusually irritable or sleepy.
- ♥ has difficulty breathing
- ♥ has blood in the stool

SUGGESTED READINGS

Caring for Your Infant and Young Child: Birth to 5 Years
edited by Steven Shelov, MD.

The Nursing Mother's Companion by Kathleen Huggins

What to Expect the 1st Year by Heidi Murkoff, Sandee Hathaway, Arlene Eisenberg

LOOKING AHEAD

Before your next visit your baby may:

- ☺ start to smile and coo.
- ☺ enjoy looking at you more.
- ☺ begin to have better head control.
- ☺ wiggle more- never leave her unattended in the bath or on a table.
- ☺ not start sleeping through the night.

NOTES:

- ☺ Your next scheduled visit will be at 2 months.
- ☺ Immunizations for the next scheduled visit:
Pediarix (Dtap, IPV, HepB), Prevnar, Rotateq

SUPPLIES TO HAVE AT HOME

Digital rectal thermometer (not a mercury thermometer or an ear thermometer).

Saline nose drops and a short, fat nasal bulb aspirator (not the one from the hospital).

Breast pump for breastfeeding moms.