

# 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

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

1. When to feed: feed on demand, anytime the baby is hungry. (Watch for hunger cues.)
2. Minimum: 8 – 12 feedings per day (may be 16+). 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 1<sup>st</sup> 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. Breastmilk storage: 10 hours at room temperature OR 8 days in the refrigerator OR 3 months in 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 often, for shorter periods. After each feeding, express breast milk, rub it in to nipples, and expose breasts to fresh air for a short while.
6. For engorgement: Warm washcloths and massage, shower, hand expressing a little milk.
7. Position: Make yourself comfortable first; bring baby to your breast, belly to belly, baby's mouth at nipple level; baby's ears in line with shoulders and hips. 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.

1. 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. Pain: a sudden, high-pitched cry.
2. First 5 days: At least one wet or dirty diaper per day old. (e.g. on day 3, at least 3 diapers.) After Day 5, 7 – 10 wet or dirty diapers per day (of these, at least three bowel movements.)
3. Sleep patterns: Newborns sleep 12-20 hrs a day, but rarely for more than 3 hours at a time.
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/cpscpub/pubs/209.pdf](http://www.cpsc.gov/cpscpub/pubs/209.pdf)
5. Warning Signs (also see class handout for more info)
  - Dehydration: <6 diapers in 24 hours (after day 5), papery skin; dry mouth; dark yellow urine
  - Fever higher than 99.5° F, under the arm
  - Jaundice: whites of the eyes turning yellow; skin below nipple line turning yellow
  - Thrush: White patches on the tongue or inside the mouth that don't wipe off easily.
  - Umbilical cord or circumcision site: bright red bleeding, foul odor or pus, redness or swelling.
  - Vomiting: forcefully or more frequently than usual (more than just spitting up).
  - excessively or 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. Calming: First, make sure baby's needs are met, especially check if it is hungry. Then, to calm a crying newborn, replicate the womb environment: 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 can help. Some babies like to be held so there is pressure on their bellies (as if you were burping them). Giving the baby something to suck on, like your finger, or a pacifier (after breastfeeding is well-established) can help. Talk soothingly, or sing lullabies. Stay as calm as possible yourself, as baby will respond to your mood. The 5 S's: Swaddle, Side/Stomach, Swing, Shh, Suck.

1. Breastfeeding Info: [www.breastfeeding.com](http://www.breastfeeding.com); [www.lalecheleague.org](http://www.lalecheleague.org); [www.transitiontoparenthood.com/ttp/parented/breastfeed.htm](http://www.transitiontoparenthood.com/ttp/parented/breastfeed.htm). Parent crisis lines: 1-800-4-A-CHILD. 1-800-448-3000. Your baby's doctor is your primary source 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.