Welcome to Bringing Baby Home Class

Introductions

• For the mother to be:
  • Your name
  • Where are you delivering?
  • When are you due?
  • Do you know if it’s a boy or girl?

• For the support person:
  • Your name
  • What are you most excited about or fearful about related to having this new baby?

Presentation Menu

Understanding Newborn Traits
Understanding Feeding
Understanding Newborn Behaviors
Understanding Diapering
Understanding Crying & Comforting
Understanding Bathing, Nail Care, & Dressing
Understanding Newborn Health
Understanding Newborn Safety
Understanding Newborn Traits

- Skin-to-Skin Contact
- Newborn Procedures
- Newborn Appearance
- Newborn Reflexes
- Senses

Skin-to-Skin Contact

- Keeps babies warm and regulates temperature, heart rate and glucose levels
- Facilitates bonding
- Comforts babies so they cry less
- If choosing to breastfeed, helps babies latch on and breastfeed better and longer

Rooming-In

- Rooming-in is having baby stay in mom's room while at the hospital
- At home, have baby sleep in a crib, bassinet or pack and play in your room
- Quickly respond to baby's needs and learn his or her hunger signs
- Bonding develops trust
Newborn Procedures

- Clamping of the cord
- Suctioning/Bulb Syringe
- Apgar evaluation
- Weighing and measuring
- Antibiotic eye ointment
- Vitamin K shot
- Hepatitis B vaccine
- Hearing test and other screenings

Hearing Screening - Rapid Test and ALGO Test or Automated Auditory Brain Stem Response

- Each year approximately 200 babies are born deaf or have significant hearing impairment in Wisconsin.
- Studies have shown that early detection and intervention dramatically improves language skills, cognitive abilities, and social development.

Pulse Oximetry Screening for CCHD

- The Wisconsin Department of Health Services has added the screening for Critical Congenital Heart Disease (CCHD) by pulse oximetry to the Wisconsin Newborn Screening Program's panel of conditions. This means that every infant born in a hospital is required to have CCHD screening prior to discharge.
- This test is done before you leave the hospital.
- The reading is done on baby's hand and foot.
Newborn Screening Program
Genetic Screening

- Involves pricking your baby's heel to obtain a blood sample
- Officially tests infants born in Wisconsin for 44 disorders, including hearing loss, critical congenital heart disease and genetic disorders that may not show outward symptoms, but need early treatment.
- Newborn screening conditions are rare – about 1 in 800 births
- In the US, more than 12,000 newborn lives are saved or improved through newborn screening every year
- The test is performed between 24 and 48 hours
- To find out what is all included on the tests go to this website: http://www.wi.gov/clinical/newborn/generes-guide-to-newborn-screening/

Jaundice

- Yellowish discoloration on skin/eyes
- Caused by a build up of Bilirubin
- Baby checked for jaundice at the hospital
- Care provider will recommend treatment
- One form of treatment is the Billi blanket

Checking Baby's Blood Sugar

According to AAP guidelines blood sugar should be tested if baby is:
- LGA – large for gestational age
- SGA – small for gestational age
- Mother has diabetes
- Born preterm
- Or if baby is symptomatic
Newborn Appearance

Infant Acne
- Red or white bumps on forehead or cheeks
- Develops within the first 3 to 4 weeks and clears up within 3 months

Cradle Cap
- Scaly yellow or white patches on scalp
- Harmless, and usually clears up on its own in 6 to 12 months

Newborn Appearance

Cone Shaped Head
Swollen Breast Tissue

Newborn Reflexes

Your baby is born with reflexes, which are automatic responses to what she feels and hears.
Senses

How Senses Help Your Newborn
- Teach them about their environment
- Allows them to interact
- Facilitates bonding

Understanding

Newborn Behaviors
- States of Alertness
- Newborn Sleep
- Room-Sharing

Learn Your Baby's Cues
- Watch your baby to learn her cues.
- Cues are the movements and sounds your baby makes.
- Cues help you know if your baby is tired, overstimulated, hungry, or ready to play.
States of Alertness

- Babies go through different states of alertness.
- Variations of being asleep and awake.
- Recognizing the different states helps you better respond to your baby's needs.

Sleep Patterns

- Sleep as much as 16 to 18 hours per day.
- Sleep in 1 to 3 hour-long periods, sometimes shorter.
- Baby won't sleep through the night at first, needs to wake to eat.
- Keep daytime naps and light normal.
- Make night feedings dark and quiet.

Room-Sharing

The Benefits
- Makes night feeding easier.
- Helps you respond to your baby quicker.
- Improves sleep for you and your baby.
- Reduces the risk of SIDS.
Understanding Crying & Comforting

- Why Babies Cry
- Comfort Techniques
- Coping With a Crying Baby
- New Parent Emotions

Why Babies Cry

Crying is instinctual for babies
- To communicate a need
- To relieve stress
- To block unwanted stimulation

Why Babies Cry

The "Why Babies Cry" Checklist
- Did you miss his hunger cues?
- Does she need to be burped?
- Is his diaper wet or dirty?
- Are her clothes wet or uncomfortable?
- Is he too cold or warm?
- Is she overstimulated?
- Is he sleepy?
- Does she need to be comforted?
**Comfort Techniques**

**Touch**
- Hold her close or try holding skin to skin
- Let her suck on your breast or on her fingers
- Hold her in a safe front carrier or wrap

**Consider Baby Wearing to comfort and connect with baby**

**Comfort Techniques**

**Movement**
- Rock her
- Gently sway while holding her
- Go for a walk
- Take her on a drive
- Place her in a bouncy seat or an infant swing
Comfort Techniques

Sound
- Talk to her softly
- Sing songs
- Make shushing noises
- Provide white noise

Safe Swaddling
- Keep the swaddle loose so she can bend her legs.
- Make sure her hands reach her mouth — this is an important hunger cue.
- Always keep an eye on a swaddled baby.
- Always put her to sleep on her back.
- Stop swaddling before she could roll over (at around 8 weeks).

Coping With a Crying Baby

Coping Tips
- Take deep breaths, text a friend
- Ask for help when you need a break
- If you start to feel out of control, put your baby in a safe place, like a crib, and walk away until you feel calm
- Call a parent hotline
New Parent Emotions

- Baby blues—feelings of sadness, anxiety, and fatigue—are common
- Partners can experience the baby blues
- Talk about your feelings
- Get rest—sleep when your baby sleeps
- Check out a new mom's group like My Morning with Mom or Beyond the Baby Blues Support Group

Call Your Healthcare Provider

Postpartum Depression (PPD) Warning Signs
- Excessive worrying and anxiety
- Irritability, persistent crying, or sadness
- Inability to sleep, care for yourself or your baby
- Difficulty concentrating
- Changes in appetite or behavior
- Thoughts of suicide, harming yourself, or harming your baby

Understanding Feeding

- Breastfeeding Basics
- When to Feed Baby
- Hunger Cues
- Signs That Your Baby Is Bottle and/or Breastfeeding Well
- Burping Your Baby
Breastfeeding Basics

For Baby:
- Boosts immune system
- Enhances brain development
- Reduces risk of childhood obesity, diabetes, and SIDS

For Mother:
- Reduces risk of some cancers and diseases
- Helps you lose pregnancy weight sooner
- Breastfeeding hormones help you feel calm and connected with your baby

Tips for Feeding Baby

- Learn baby’s own signals that tells you baby is ready to eat
- It is important to prepare baby for feeding – change diaper, calm baby if he has been crying, burp before feeding if baby has been crying
- Babes will eat every few hours even during the night
- Burp your baby during and after feedings – over the shoulder, lying across your lap, or sitting in your lap with chin supported
- Spitting up small amounts is normal

Hunger Cues

- Moves arms and legs
- Makes sucking motions
- Smacks lips
- Brings hand to mouth
- Roots
- Cries (a late sign of hunger)
Avoid Pacifiers

- Early use of pacifiers can make it harder for your baby to breastfeed successfully and could reduce your milk supply.
- Don't use pacifiers until breastfeeding is going well (at around 3 to 4 weeks).

Take Note!

Signs That Baby Is Breastfeeding Well

- Baby feeds at least 8 times every 24 hours
- You can see and hear her suck and swallow
- At least 4 loose yellow stool and 6 wet diapers per day by Day 5
- Baby seems calm and full after feedings
- Breast feel full before feedings and softer after feedings
- Regains birth weight in 10 to 14 days

Feeding Diary
Burping Your Baby

- Put a cloth under his chin
- Hold him while he's sitting in your lap
- Support his chest and chin with one hand, and gently pat his back with the other
- Once he has better head and neck control, you can hold him against your chest

Understanding Diapering

- Diapering Basics
- Circumcision Care
- Stool & Urine Patterns

Diapering Basics

- Be prepared and keep it quick!
- You'll need a diaper, wipes, or a washcloth with warm water.
- Always keep one hand on her, and use a safety strap when on high surface.
- Diapering on the floor is a safe option.

AAP Recommends: No Baby Powder
Circumcision Care

Circumcised
- Keep clean and dry
- Follow healthcare provider's instructions
- You might see a small amount of discharge
- The American Academy of Pediatrics state the benefits include prevention of UTI, penile cancer and transmission of some sexually transmitted infections, including HIV.

Uncircumcised
- No special care needed
- Don't force back the foreskin

Stool and Urine Patterns

Below is the daily minimum number of wet and dirty diapers to expect for exclusively breastfed, healthy, full-term babies. To be counted, a stool should be at least the size of a quarter.

<table>
<thead>
<tr>
<th>Wet Diapers per Day</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
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<td>0-1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Dirty Diapers per Day</td>
<td>0-1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Type of Stool

- Normal
- Black
- Blood
- Watery

Understanding Newborn Health

- Cord Care (Demo)
- Cord Warning Signs
- Well Baby Visits
- Keep Your Baby Healthy
- Taking Baby's Temperature (Demo)
- When to Call the Doctor
Umbilical Cord Stump Care

- Keep the cord stump clean and dry
- Fold diapers down
- Dress baby in loose clothing
- Don't pick at the cord stump
- Cord will fall off in a few weeks

Signs and Symptoms Your Baby May Show When Sick & When You Should Call Your Baby's Healthcare Provider

- Temperature over 100°F
- Forceful vomiting (not spitting up)
- Several feedings when baby does not suck
- Watery, runny stools (with mucus, blood or foul odor)
- Constant crying
- Any unusual rash
- Yellow color of the skin or eyes
- Less than 4 wet diapers in a 24 hour period for first week, less than 6 later when baby one week old or greater
- No stool for 48 hours
- Redness, drainage or foul odor from umbilical cord or circumcision site
- Changes in activity, listlessness, poor muscle tone, tremors, high pitched cry or screaming
- When you feel something is wrong with your child

Well-Baby Visits

- Check for jaundice
- Check growth and development
- Discuss vaccine schedule
- Answer your questions
- First checkup is 1 to 3 days after leaving hospital
- Go to follow up visits

Partner Tip: Go to Well-Baby Visits
What are some of the ways you can prevent illness and/or boost immunity in your baby?

- Most important is prevention:
- Wash your hands
- Avoid contact with large crowds, ill people, second-hand smoke
- Breastfeeding
- Immunizations
- Well-baby checkups
- Infant massage

Understanding

Newborn Safety

- Car Seats
- Hot Car Safety
- Sudden Infant Death Syndrome (SIDS)
- Infant CPR & First Aid
- Other Baby Safety Tips

Car Seats

- Check the expiration date and know its history
- Carefully follow your vehicle's owner manual and the car seat manual
- Install the seat before your due date
- The middle of the back seat is usually the safest placement—never install in a front seat with an active airbag
- Don’t add anything that didn’t come with the car seat
Car Seat Checkup - Top 5 Things to Do

- Right Seat. Check the label on your car seat to make sure it's appropriate for your child's age, weight, and height. Like milk, your car seat has an expiration date. Just double check the label on your car seat to make sure it is still safe. (It usually expires in 6 years)
- Right Place. Keep all children in the back seat until they are 13 yo.
- Right Direction. You want to keep your child in a rear-facing car seat until ground age 2. When he or she outgrows the seat, move your child to a forward-facing car seat. Make sure to tighten and lock the seat belt or lower anchors.
- Inch Test. Once your car seat is installed, give it a good shake at the base. Can you move it more than an inch side to side or front to back? A properly installed seat will not move more than an inch.
- Pinch Test. Make sure the harness is tightly buckled and coming from the correct slots. Now, with the chest clip placed at armpit level, pinch the strap at your child's shoulder. If you are unable to pinch any excess webbing, you're good to go.

Hot Car Safety

- Heat stroke happens every year to children left in a hot car
- The inside of a car can reach dangerous temperatures quickly
- Never leave a child alone in a car, even if you expect to come back soon

Sudden Infant Death Syndrome (SIDS)

- Defined as the unexplained death of an infant in the first year
- Highest risk is between 2 to 4 months
- Usually occur during sleep—putting baby to sleep on his back and having a safe sleep environment are both essential
- Vaccines, breastfeeding, and a smoke-free environment also reduce the risk of SIDS
- Avoid overheating (keep room about 70°F)
Safe Sleep Environment

- Always put your baby on her back to sleep until she is 1 year old
- Use a firm, tight-fitting mattress and new crib
- Put nothing in the crib or bassinet except your baby
- Use wearable blankets or sleep sacks
- Keep your baby in the same room as you (but not in the same bed) for at least 6 months, and ideally, for 12 months

Infant CPR & First Aid

- Don't be unprepared for an emergency—take a class!
- Find classes here the at the hospital or a local American Red Cross office.
- Consider taking a refresher course—recommendations may have changed.

Other Baby Safety Tips

- Use safety straps on all changing tables, infant seats, swings, and car seats
- Supervise your baby with pets and siblings
- Never leave your baby alone, unless you place her in a safe place like a crib
- Visit recalls.gov to check equipment safety

AAP recommends: Bug and Sun Safety
Dad & Baby

- Make time to be alone with your newborn.
- Find something special that only you two do together, such as bathing, infant massage, or singing and rocking.
- Be confident in your natural ability to father your child; allow yourself to find your own routines and ways of doing things.
- If you're feeling left out, talk it over with your partner and try to work things out together.

Thank You!

"It’s nothing like we expected—we feel surrounded by love all the time.

We’re learning as we go, but we are her parents and we love her. That’s all that she needs to know right now."

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