

Well Baby Visit - Two Months

Date: _____ Weight: _____ Length: _____ Head size: _____

PARENTING AND BEHAVIORAL

- The next few months are perhaps the easiest age during a baby's life. Your baby still has relative immunity to most infections. He is happy to see people, yet does not demand a lot of attention nor can he get up and crawl around to get into things. Your child will become responsive when you talk to him, and is beginning to blossom into a "real" person.
- Continue to hold, cuddle, talk to, sing to and rock your baby as much as you can. Every interaction with your child stimulates brain development. Encourage your baby to "speak" by talking to her during dressing, bathing, feeding, playing, walking and driving. Keep the baby, when awake, in the room with you to enjoy the surroundings. Look your baby in the eyes during feeding or when talking to her. Let your baby listen to the radio. Encourage babbling or cooing.
- Stimulate your child with age-appropriate toys. Hang a rattle, mobile or some other bright object over the crib so that your infant can begin watching and reaching for it.
- Parents should continue to make sure they get adequate rest. A lot of new parents still need a nap, so take one when baby naps. Go for a daily walk with the baby for fresh air.
- Mothers and fathers need playtime too! Allow an afternoon or evening out for yourselves by leaving your baby with a trusted, competent sitter.

BATHING

- Your baby may enjoy bathing now, and will splash, coo, and play.
- Be sure to pay special attention to the baby's genitals. For uncircumcised boys, try to retract the foreskin gently - only enough to cleanse the tip of the penis with warm water. If the foreskin is unyielding, do not force it to retract.
- For little girls, be sure to wipe from front to back when cleaning, not back to front. Gently spread the outer lips apart to cleanse stool and secretions from the inner lips and to prevent adhesions (sealing closed of the vaginal opening).

DEVELOPMENT

Your 2 month old should be able to:

- Coo and smile and begin to have vowel sounds (ah, eh).
- Smile and stop crying when spoken to, especially by primary caregivers.
- Look at people and enjoy being held or propped upright to view the surroundings.
- Hold the head more erect and steady than before (when held upright). Until this happens, however, be prepared to give your baby extra head support.
- Focus her eyes and follow objects.
- Start to grasp objects briefly, like a rattle, or tightly hold on to your finger.
- Between now and the 4-month checkup, most babies will start to lift their head, neck and upper chest on their forearms, craning their necks like a turtle to see what is going on. They will also straighten out their legs when you let them sit on your lap and try to stand with support. (This will not cause them to become bow-legged.)

FEEDING

- Either breast milk or iron-fortified formula is still the best choice for your baby until 4-6 months of life.
- Ensure that your infant is gaining enough weight.
- Discuss with your baby's doctor any problems you are having with breast or bottle-feeding.
- Remember, "spitting up" is common and, the vomit is more of a "nuisance" than a "problem." It decreases by 6 to 18 months, and is not a medical problem as long as the baby is gaining weight well and does not seem terribly uncomfortable with spitting up.

- Now your baby is probably beginning to follow a more predictable feeding schedule of 5 to 6 feedings per day. However, infant feeding demands may continue to vary from day to day. By 10 weeks of age, some babies are feeding only four to five times a day (breast or bottle), while others require more frequent feedings. This is normal. Hopefully, the interval between feedings is not more frequent than every three to four hours during the day with longer intervals at night.
- The amount of breast milk or formula a baby will take varies, but around 28 to 32 ounces each 24 hours should be enough. Breast fed babies are getting enough milk if they are gaining weight and wetting diapers up to six times a day. An infant should be allowed to stop eating at the earliest sign that he may be getting full. A bottle does not need to be finished at each feeding.
- Do not put cereal in a bottle unless instructed to do so by your baby's doctor. The introduction of solid foods is usually between 4 and 6 months, and depends on the history of food allergies in the family, or medical problems in the infant. Giving solids, baby foods, juices, or whole milk too early can lead to food allergies, anemia, or weight problems.
- Do not use a microwave oven to heat formula, as uneven heating can burn your baby's mouth.
- Never put your baby to bed with a bottle or prop it in her mouth. You should look at and talk to your baby during feeding. Laying a baby flat while feeding increases the chance for ear infections or choking.
- Between now and the next checkup, many babies begin to drool. This is quite common and does not necessarily indicate early teething (teeth usually appear around 5-9 months of age). It is probably due to a lot of saliva that the baby has not yet learned to swallow.
- If you are breastfeeding your baby, remember to continue taking your prenatal vitamins.
- It is now recommended that all breastfed infants be supplemented with Vitamin D (which can be found in appropriate amounts in any infant multivitamin).

IMMUNIZATIONS

- Comvax [*Haemophilus influenzae* Type b (Hib) and Hepatitis B Virus (HBV) combined] Vaccine #1
- Diphtheria, Tetanus, Acellular Pertussis (DTaP) Vaccine #1
- Inactivated Poliovirus (IPV) Vaccine #1
- Prevnar (*Streptococcus pneumoniae*) Vaccine #1
- Some babies have no reactions at all to their immunizations, while other babies may be fretful or fussy for 24 to 48 hours; have a fever for 24 to 48 hours; or get a lump, redness, or swelling on the leg where the shots were given. Ask your baby's doctor about possible side effects for each vaccine .
- What to do:
 - ❖ For fretfulness: extra holding, rocking, and loving may help.
 - ❖ For a fever: the doctor will tell you how much Tylenol to give according to your infant's weight.
 - ❖ For a swollen shot site: a warm wet cloth applied frequently may help.
- Make sure you get the Vaccine Information Statement sheets on the immunizations your baby receives today (from the Pediatric or Immunization Clinic).

SAFETY

- Continue to use an infant car seat that is properly secured at all times while traveling in the car. Never hold your infant on your lap. The car seat should be rear-facing and in the back seat. When your child is 20 pounds **and** one year of age, the car seat can be changed to face forward, but the back seat remains the safest place in the car.
- Continue to put the baby to sleep on his back.
- Continue to test the water temperature with your wrist to make sure it is not hot before bathing. Never leave your baby in the tub unattended, even for a moment. Avoid scalding accidents by setting the water heater thermostat at 120 degrees.
- Never leave the infant alone in the house or car, even for a minute. Never leave the baby alone or with a young sibling or pet. You should be careful of the helpful intentions of the baby's older siblings, who may try to pick up the baby, or feed her food or other objects.

- Do not leave your baby alone on high places such as changing tables, beds, sofas, or chairs. Always keep one hand on the baby, since he is learning to roll. Watch out for falls from elevated areas. The only safe place to leave your baby unattended is in the crib with the rails up.
- Continue to insist that the baby's environment is free of smoke. Don't smoke or drink hot liquids while holding your baby - the baby may grab at the cigarette or cup and get burned. It is highly discouraged to smoke in the home or car, even if your baby is not present, as this can increase the risk of chronic stuffy nose, upper respiratory infections, asthma, allergies, or ear infections.
- If your home uses gas appliances, install and maintain carbon monoxide detectors.
- Never shake or jiggle the baby's head vigorously.
- Do not place strings or necklaces about a baby's neck. Do not tie a pacifier on a string around the baby's neck - pin it on the baby's shirt instead.
- Your baby is learning to grasp objects. Good toys include soft, washable toys, too large to place in the mouth, and without removable parts or sharp edges. Soft toys that make music, like rattles and bright-colored mobiles are good choices.
- Babies should not be outside in the sun for any prolonged period of time. If outside, keep your infant in the shade. Use hats, clothing and sunglasses to keep her covered. She is still too young for sunscreen.

SLEEP

- Always put your baby to sleep on his back to decrease the chance of SIDS (Sudden Infant Death Syndrome). Alternate the end of the crib where you place his head so he does not always sleep with his head on one side.
- Your baby is now starting to establish a schedule and may sleep soundly for up to 12 hours, or continue to wake every 3 to 4 hours. Your baby needs a separate bed and room now, if possible.
- Begin to establish a bedtime routine and other habits to discourage night awakening. Encourage wakefulness during the day. At nighttime feedings, discourage playfulness and excessive talking. Put your baby back to bed as soon as possible.
- Infants sleep most of the day but sleep patterns vary from baby to baby. Many babies still have that "fussy" period during the late afternoon or early evening. It is okay for moms and dads to give themselves a break from that time by getting assistance from relatives and friends.
- Many babies will sleep through the night by 3 months old. "Lucky" parents get a good night's sleep sooner. To achieve this, many babies need encouragement. Put the infant to bed when he is drowsy but awake. Avoid rocking your baby to sleep or holding him until he falls asleep. Your baby needs to learn to fall asleep on his own, so when he wakes up and you are not there, he can soothe himself back to sleep. Try to ignore the baby if he is just squirming or whimpering. Your infant may go back to sleep on his own.

STOOLING

- Your baby will have her own frequency of bowel movements.
- Most babies strain, grunt and fuss when they have bowel movements. This does not mean they are constipated.

WHEN TO CALL THE DOCTOR

- Anything that bothers you!
- Fever - may now allow the temperature to go to 104.0 ° F before bringing baby to the doctor
- Not gaining weight
- Excessive vomiting
- Disinterest in eating
- Irritability (so fussy that a caregiver cannot soothe the child in any way) or lethargy (unable to awaken a baby at their normal waking hours, for feedings, etc.)
- Your baby seems very stiff or very floppy

NEXT APPOINTMENT

- At 4 months old
- Call the appointment line 2-3 weeks in advance to set up an appointment

IMPORTANT PHONE NUMBERS

- Tricare Nurse Advice Line: 1-888-887-4111
- Nurse Triage Line 556-CARE
- Clinic appointment desk: 264-5000
- Clinic phone number: 556-1140/1141
- Emergency: 911
- Poison Control: 1-800-332-3073